LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1092-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

December 28, 1977 — THIS PERMIT EXPIRES

Daniel J. Runyan — ISSUED TO

715 W. Avon, Lincoln, NE — ADDRESS

T8N; R8E; Section 31 SW¼; Lots 2 and 3 I.T. — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

Health — ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

FORM HD-40(73) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1092-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: June 27 77

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. ~~Lot 2 & 3~~ 8N; Range ~~SW¼~~ 8E; Section 31 Part of SW¼
   Block ____; Lots ~~2 & 3 EL~~; Addition ____
   Street Address ____ See attached

2. Property Use: Residential ☒ ; Commercial ☐
   No. of Bedrooms 3. Describe: ____
   Other Use ☐
   Describe: ____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: N.A. ft.

Daniel J Runyan
Signature of Applicant (Owner or Lessee)

715 W AVON Lincoln, 68505
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 6/28/77. Date Frwd. 6/28/77. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd. ____. Date Frwd. ____. ACTION: Approved ☐ Disapproved ☐ Signature: ____
3. City or County Engineer: Date Rec'd. 6/28/77. Date Frwd. 7/20/77. ACTION: Approved ☐ Disapproved ☒ Signature: ~~Henry Graff~~ Acting

REMARKS OR REASONS FOR DISAPPROVAL ____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

Legal 17' easement received

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [ ]
County Resolution No. 2832 [X]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1092-C

DATE: _____

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 8N ; Range 8E ; Section 31 SW 1/4 ; Block ; Lot 2 & 3 IT; Addition .
Street Address .

2. Property Use: Residential [X]; Commercial [ ]
No. of Bedrooms 3
Describe:
Other Use
Describe:

3. Type of Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Daniel J Runyan
Signature of Applicant (owner or lessee)

715 W AVON Lincoln
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 30.00

2. Site Visits:
Date: 11-28-77 by: _____
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ] 11-28-77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-28-77 by: Lon Mangum

FORM HD-43 (73) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 474-1541)

FILE NO. 1092-C

PROPERTY WHERE SOIL TESTED: Lots 243 SW 1/4 Owner: _____
Location: Township _____ : Range _____
Section & 1/4 Sect. 31 Address: _____
Property Dimensions: ____ ft. x ____ ft.
Area: _____ acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Dates of Tests: June 23 to June 24. Weather: Precip none Temp. 88

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	35	6/23	8:30	6/24	7:15	6/24	7:15	20"	7:45	19 3/4"	30	1/4"	120 min/in
2	36	6/23	8:40	6/24	7:20	6/24	7:20	18 5/8"	7:50	18 1/8"	30	3/8"	80 min/in
3	34	6/23	9:05	6/24	7:25	6/24	7:25	16 3/4"	7:55	16 1/4"	30	1/2"	60 min/in
4	33	6/23	9:15	6/24	7:30	6/24	7:30	11 3/8"	8:00	11 3/8"	30	1/2"	60 min/in
5	36	6/23	9:25	6/24	7:35	6/24	7:35	13 1/4"	8:05	11 1/2"	30	1 3/4"	17 min/in
6	34	6/23	9:40	6/24	7:40	6/24	7:40	12 1/2"	8:10	11 5/8"	30	7/8"	34 min/in

4.25 Sum of Percolation Rates: 371 min/in
.708 Average of Rates: 62 min/in
Mean of Rates: _____

Dan Runyan
Signature of Person Conducting Test

Address 715 W Arbor
Phone 464-8455

(Do not write below this line)

REVIEWING ACTION

REMARKS: Wymore Silty Clay Loam

DATE: June 28, 1977

Approved Percolation Rate (a)
A. 44 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hood
Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☑

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1092-C

SPECIFICATIONS

DATE: 6/27/77

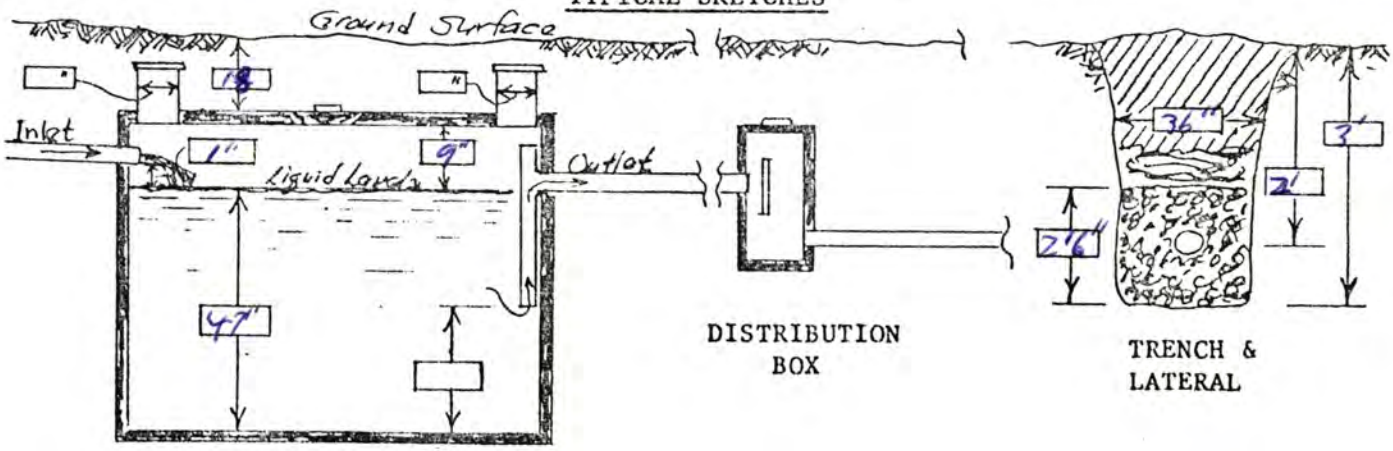
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 47 in.
3. Factory Built: Yes ☒ (Company precast step co,
No ☐
4. Manholes: Over Inlet; diam. ____in.
Cone Over Outlet; diam. ____in. 24"x24"sq
Below Grade _____in.
5. Inlet: Baffle ☒; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☒
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 18 in.
8. Distances To:
Well or Suction Line 500 ft.;
Stream 1304 ft.; Pressure Line N.A. ft.;
Property Line 120 ft.

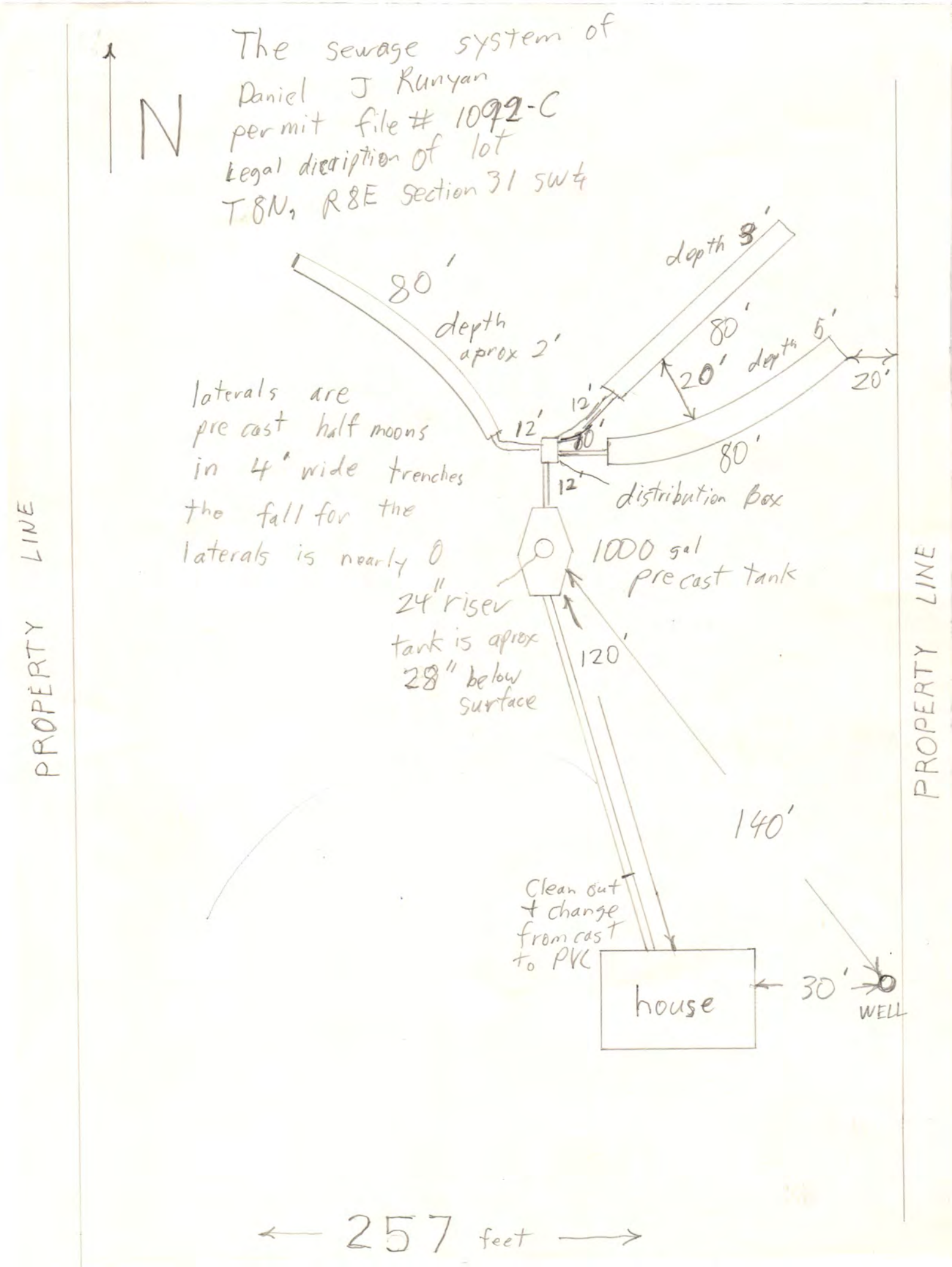
C. DISTRIBUTION BOX
1. Material concrete; No. available outlets 5.
2. Factory Built: Yes ☒, (Company precast Step Co, No ☐
3. Dimension: Length 36 in.; Width 24 in. Depth 24 in.
4. Distance from Septic Tank 12 ft.
5. Serial Distribution: Yes ☐, No ☒
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: precast half round blocks
2. Lateral Lines: Depth below grade 20 in.
Number 3; Length of each line 100 ft
Total length of Laterals 288 ft.;
Slope 4 in/100 ft. Diameter of pipe 4 in.; Shape half round
Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines N/A ft.
3. Trench Dimensions: Depth 36 in.; Width 48 in.
4. Filter Material: gravel.
Depth of material from trench bottom 24 in.
5. Distances To:
Well or Suction Line 505 ft.;
Stream 1315 ft.; Pressure Line NA ft.
Property Line ____ft.
6. Percolation Rate: 62 minutes/inch

TYPICAL SKETCHES



Dan Runyan
Signature of Applicant


N
The sewage system of
Daniel J Runyan
permit file # 1092-C
Legal dicription of lot
T8N, R8E Section 31 SW4
80'
depth aprox 2'
depth 3'
80'
20' depth 5'
20'
80'
12'
12'
12'
80'
distribution box
laterals are
pre cast half moons
in 4" wide trenches
the fall for the
laterals is nearly 0
1000 gal
pre cast tank
24" riser
tank is aprox
28" below
surface
120'
140'
Clean out
+ change
from cast
to PVC
house
30'
WELL
PROPERTY LINE
PROPERTY LINE
257 feet

Survey Record

Daniel J. Runyan

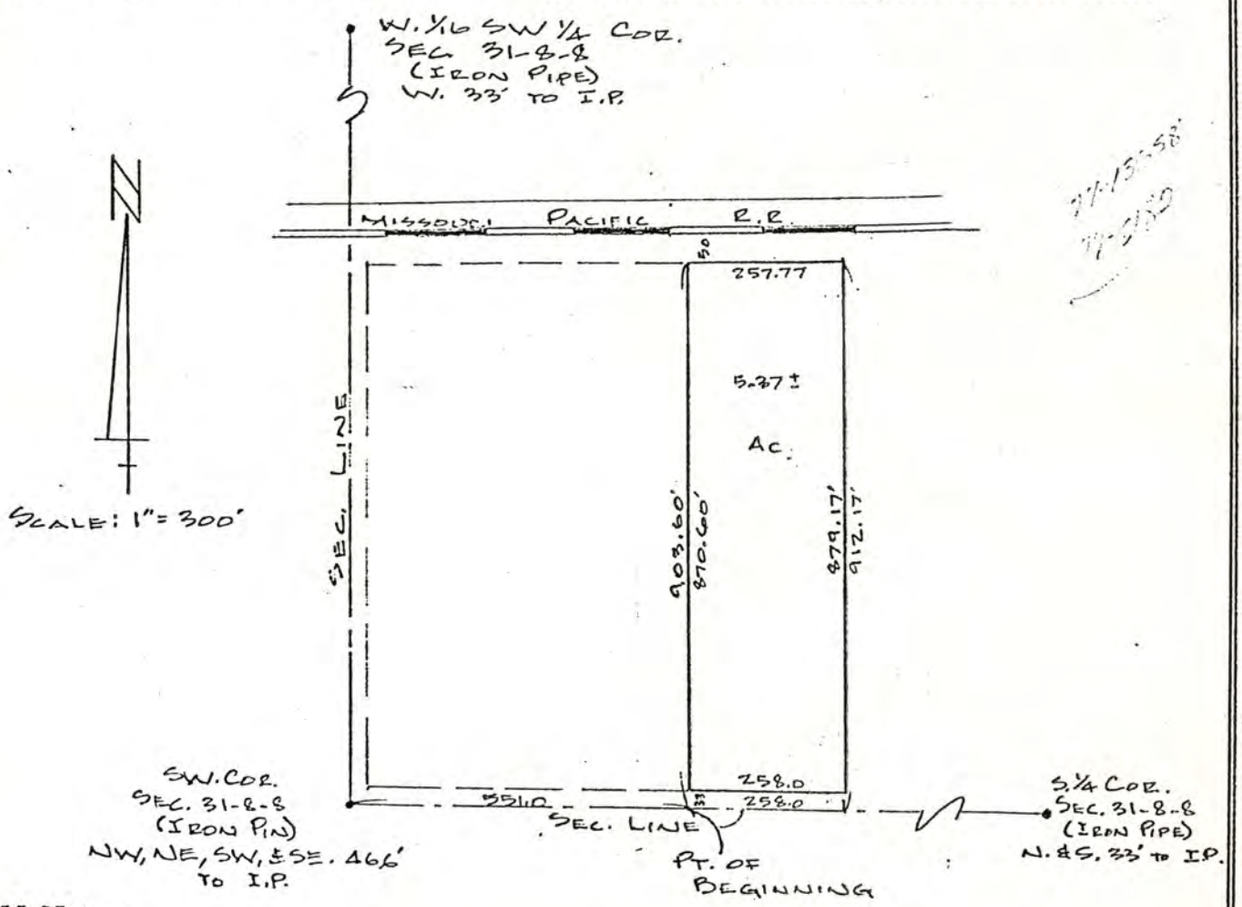
LANCASTER COUNTY, NEBRASKA

Survey of: .....

PART OF SW 1/4 **Section** 31 **T** 8 **N, R** 8 **E of 6th P.M.**

Survey No. .....**(To be assigned by County Surveyor)**

Date APRIL 30 1977 **Weather** CLOUDY, WARM



Field Notes:

Show descriptions of corners found and restored; distances chained; angles measured, if any; courses and bearings of irregular tracts surveyed; and ties taken to corners. Use reverse side if necessary.

LEGAL DESCRIPTION

A tract of land in the Southwest Quarter of Section 31, Township 8 North, Range 8 East of the 6th P.M., Lancaster County, Nebraska, more particularly described as follows: Commencing at the Southwest Corner of said Section 31; thence Easterly along the South line of said Section 31 a distance of 551.0 feet to the Point of Beginning, thence Northerly and parallel to the West line of said Section 31 a distance of 903.60 feet to the South Right of Way line of the Missouri Pacific Railroad Company; thence Easterly along said South Right of Way line a distance of 257.77 feet; thence Southerly and parallel to the West line of said Section 31 a distance of 912.17 feet to the South line of said Section 31; thence Westerly along said South line a distance of 258.0 feet to the Point of Beginning, said tract containing 5.37 acres, more or less, including public road right of way.

Signed this 16TH **day of** MAY **19**77

Name: .....

Surveyor's license No. L.S. 246

Land Surveyor's Seal

950627024

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

This form must be completed and returned to request a real estate transfer inspection. 16818 41272

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☐ Evaluation of the Individual Water System Date: 6-12-95

☐ Evaluation of the Sewage Disposal System ☐ Enclosed is $75.00

Legal Description of Property: TWP.____; RANGE ____; SECTION _____; BLOCK ____

LOT ____; ADDITION _____; Street Address _____

Directions to Property _____

_____

Location of Well _____ Tap Location: Inside ☐ Outside ☒

Location of Sewage System _____ Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	DAN RUDYAN	CAMBRIDGE CT Lincoln	
Tenant/Buyer:	Travis Velder	4510 MADISON AVE. Ne. 68504	464-5537
Return to:	Kasey Hartman Wells	Bus-3201 Pioneers Blvd 68502	437-8144

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Travis Velder - per K. Hartman Address 3201 Pioneers Blvd 68502

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HEALTH DEPARTMENT USE ONLY

Date Received _____ Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE June 14, 1995

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 6/15/95 by L.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 6/16/95 by L.C.H. (emailed)
Nitrate	☒ 4.0	☐	Disapproved:	☐	Date _____ by ____

Comments: WELL HOUSE WAS LOCKED. GOT NITRATE ONLY.
IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY
IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter ☐

FINAL STATUS

WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM:	
Approved: ☒	Approved: ☒	Provisional Approval: ☐

APPROVED BY Ken Mayfield, RS DATE 6-23-95

Approval or disapproval is based on written standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

WATER MICROBIOLOGY

STATE LAB NO. 14/2619

COMPLETE INFORMATION BELOW

DATE COLLECTED 6 (MO) 16 (DAY) 95 (YEAR) 9:36 AM (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION DAN RUNYAN

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR S-W SECT 31 TWNSHP 8 N RANGE 8 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
3140 "N" STREET
LINCOLN, NEBRASKA 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

FOR LABORATORY USE ONLY

TEST METHOD: ☑ MEMBRANE FILTER ☐ MPN

COLIFORM PURITY TEST FOR DRINKING WATER

TOTAL COLIFORMS 0 PER 100 ML.

☒ THE WATER MEETS BACTERIOLOGICAL STANDARD

☐ WATER DOES NOT MEET BACTERIOLOGICAL STANDARD

☐ RESULTS MAY BE INVALID DUE TO EXCESSIVE AGE*

*SAMPLES RECEIVED BETWEEN 30-48 HRS. AFTER COLLECTION

SAMPLE NOT ANALYZED BECAUSE OF:

☐ EXCESSIVE AGE ☐ INSUFFICIENT AMOUNT

☐ DAMAGE ☐ IMPROPER CONTAINER

TEST METHOD NUMBER: NIPDWR 141.27

TEST(S) BY JK

FOR ACCOUNTING USE ONLY

LWB 88

'95 JUN 16 A10:48 RECEIVED

'95 JUN 17 P12:30 REPORTED

WATER CHEMISTRY

STATE LAB NO. 154084

COMPLETE INFORMATION BELOW

FOR LABORATORY USE ONLY

DATE COLLECTED 6 (MO) 14 (DAY) 95 (YEAR) 11:10 A.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION DAN RUNYAN

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR SW SECT 31 TWNSHP 8 N RANGE 8 E

REPORTED

95 JUN 15 P3:00

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
3140 "N" STREET
LINCOLN, NEBRASKA 68510

RECEIVED

JUN 14 P1:12

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

TEST METHOD: USEPA METHOD 353.2

NITRATE ANALYSIS FOR DRINKING WATER

NITRATE — N less than 0.1 mg/l

NOT TESTED BECAUSE OF:
☐ INSUFFICIENT AMOUNT ☐ DAMAGE ☐ IMPROPER CONTAINER

TEST(S) BY

FOR ACCOUNTING USE ONLY

LWN 88

WATER MICROBIOLOGY

STATE LAB NO. 148-14263

COMPLETE INFORMATION BELOW

DATE COLLECTED 7-15-98 2:15
MO. DAY YEAR HOUR

SAMPLE COLLECTED BY P. DROTZMANN

SAMPLE LOCATION Cunningham; 11150 Stagecoach LANE,

PROPERTY LEGAL DESCRIPTION: COUNTY _____

QRTR SW SECT 31 TWNSHP 8 N S RANGE 8 E W

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:
LCCHD
3140 N ST
LINCOLN NE 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

FOR LABORATORY USE ONLY

TEST METHOD: ☐ MEMBRANE FILTER ☐ MPN

COLIFORM PURITY TEST FOR DRINKING WATER

TOTAL COLIFORMS 0 PER 100 ML.

☒ THE WATER MEETS BACTERIOLOGICAL STANDARD
☐ WATER DOES NOT MEET BACTERIOLOGICAL STANDARD
☐ RESULTS MAY BE INVALID DUE TO EXCESSIVE AGE*
*SAMPLES RECEIVED BETWEEN 30-48 HRS. AFTER COLLECTION

SAMPLE NOT ANALYZED BECAUSE OF:
☐ EXCESSIVE AGE ☐ INSUFFICIENT AMOUNT
☐ DAMAGE ☐ IMPROPER CONTAINER

TEST METHOD: NIPDWR 141.27

THIS IS A 2 PARAMETER
COMBINATION TEST REQUEST

TEST(S) BY AB

FOR ACCOUNTING USE ONLY

LWB 95

REPORTED JUL 16 PM 2 17

RECEIVED JUL 15 PM 3 47

'98 JUL 17 PM 3 55 REPORTED

'98 JUL 15 PM 3 48 RECEIVED

COMPLETE INFORMATION BELOW

WATER CHEMISTRY

STATE LAB NO. 158-6109

FOR LABORATORY USE ONLY

TEST METHOD: USEPA METHOD 353.2

DATE COLLECTED 7-15-98 (MO. DAY) 2:15 (YEAR HOUR)

SAMPLE COLLECTED BY P. DROTZMANN

SAMPLE LOCATION Cunningham; 11150 Stagecoach

PROPERTY LEGAL DESCRIPTION: COUNTY LANC,

QRTR SW SECT 31 TWNSHP 8 N S RANGE 8 E W

NITRATE ANALYSIS FOR DRINKING WATER

NITRATE – N Less than 0.1 mg/l

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:

LLCHD
3140 N ST.
LINCOLN NE 68510

NOT TESTED BECAUSE OF:
☐ INSUFFICIENT AMOUNT
☐ DAMAGE
☐ IMPROPER CONTAINER

THIS IS A 2 PARAMETER
COMBINATION TEST REQUEST

TEST(S) BY VL
FOR ACCOUNTING USE ONLY

LWN 88

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502