# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

NON TRANSFERABLE

## PERMIT

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 97380165001

Issued 09/05/97
Expires 03/05/98
Revenue Code 18754

Establishment
RONALD BULLER
T9N R5E SEC 2
RIDGE PARK BLK 4 LOT 8

FEES: $150.00

Permittee
RONALD BULLER
1926 W MULBERRY CT
LINCOLN NE 68522

TOTAL $150.00

Issued By M. Jane Ford
Health Director

5215

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

**A**

Permit Number:

# Sewage Disposal System

## Request for Site Clearance and Permit

**Include Form B, Form C and Applicable Fees with this Application.**

☒ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

**PLEASE PRINT OR TYPE**

### A. System Location (Indicate correct number and street)

Address 7250 W Ranger Ridge Rd (no rural route) City Lincoln NE, Zip

Legal Description 2 ~~North~~ +9N 5E RIDGE PARK 4 8
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude Latitude

☐ Check if system mail address is not the same as the owner's address

### B. Owner

Name Ronald J. Buller Signature

Address 1926 W. Mulberry Ct City/State/Zip Lincoln Ne 68522

☐ Check if owner designed system Home Phone 402-438-1643 Work Phone Home

### C. Contractor

Name Ronald J. Buller Company Name

Address Same City/State/Zip

☐ Check if contractor designed system Work Phone

### D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name Firm Work Phone

### E. This System Will Serve a

☐ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub YES (NO)

☐ Commercial Establishment/Other Facility Specify

Design flow in gallons per day Type of Wastewater: ☒ Domestic ☐ Non-Domestic.

***DO NOT WRITE BELOW THIS LINE***

### Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 2832

1. **Health Department** Date rec'd 9/4/97 Date frwd 9/4/97 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 9/4/97 Date frwd 9/4/97 **ACTION** ☒ Approved ☐ Disapproved Signature Larry Spain
3. **City or County Engineer** Date rec'd 9-4-97 Date frwd 9-4-97 **ACTION** ☒ Approved ☐ Disapproved Signature Larry V. Worrell

System must be out of artificially created 100 year flood, L.C.H.

### Installation Final Written Approval

By Jerrold C. Hood R.E.H.S.

Date JUNE 26th 1998

***Business Office Use Only***

Date Rec'd 9/3/97 3173

Amt Paid $150.00

Rec'd By LL Cash/Check No. 2496

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

**B**

Permit Number:

# Sewage Disposal System

## Soil Absorption Test Data Report
## Annex to Application

PLEASE PRINT OR TYPE

### System Location (Indicate correct number and street)

Address West 49th & VanDorn (no rural route) City Lincoln NE, Zip

Owner Robert Butler Address 192-6 W. Mulberry 438-1643

Soil Type (SCS): Wymore Silty Clay Loam Percolation Rate: 30 min./inch

Date of Tests 8/15/97 to 8/16/97 Weather: Precipitation Temperature

### Percolation Test Data Table

| A. | B. | C. D. E. F. Pre-Saturation Period | | | | G. H. I. J. K. Percolation Readings | | | | | L. M. N. Results | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Start | | End | | Start | | | End | | | | |
| Hole No. | Hole Depth (in) | Date (Mo/Da) | Time (Hr/Min) | Date (Mo/Da) | Time (Hr/Min) | Date (Mo/Da) | Time (Hr/Min) | Water Lev (in.) | Date (Mo/Da) | Time (Hr/Min) | Elapsed Time (Min) | Water Level Drop (in) | Percolation Rates (Min/in) |
| 1 | 28 | 8/15 | 10:00 | 8/16 | 10:00 | 8/16 | 1:00 | 6 | 8/16 | 1:30 | 30 | 1 1/8 | 27MIN/IN |
| 2 | 29 | " | 10:00 | " | 10:00 | | " | " | " | " | | 1 | 30MIN/IN |
| 3 | 30 | | 10:00 | | 10:00 | " | | | | | | 1" | 30MIN/IN |
| 4 | 30 | " | 10:00 | " | 10:00 | | " | " | " | " | | 3/4 | 40MIN/IN |
| 5 | 28 | | 10:00 | | 10:00 | " | " | " | | | | 1 1/4 | 24MIN/IN |
| 6 | 27 | " | 10:00 | " | 10:00 | | " | " | " | " | | 1 1/8 | 27MIN/IN |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

### Person Conducting Percolation Tests

Name: John Stuthmyer

Phone: 430-6023

Address

Sum of Percolation Rates:

Average of Rates:

Rate Used for Calculation: 30 MIN/IN

DO NOT WRITE BELOW THIS LINE

### Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date SEPTEMBER 3, 1997

FORM 23-101 10-96

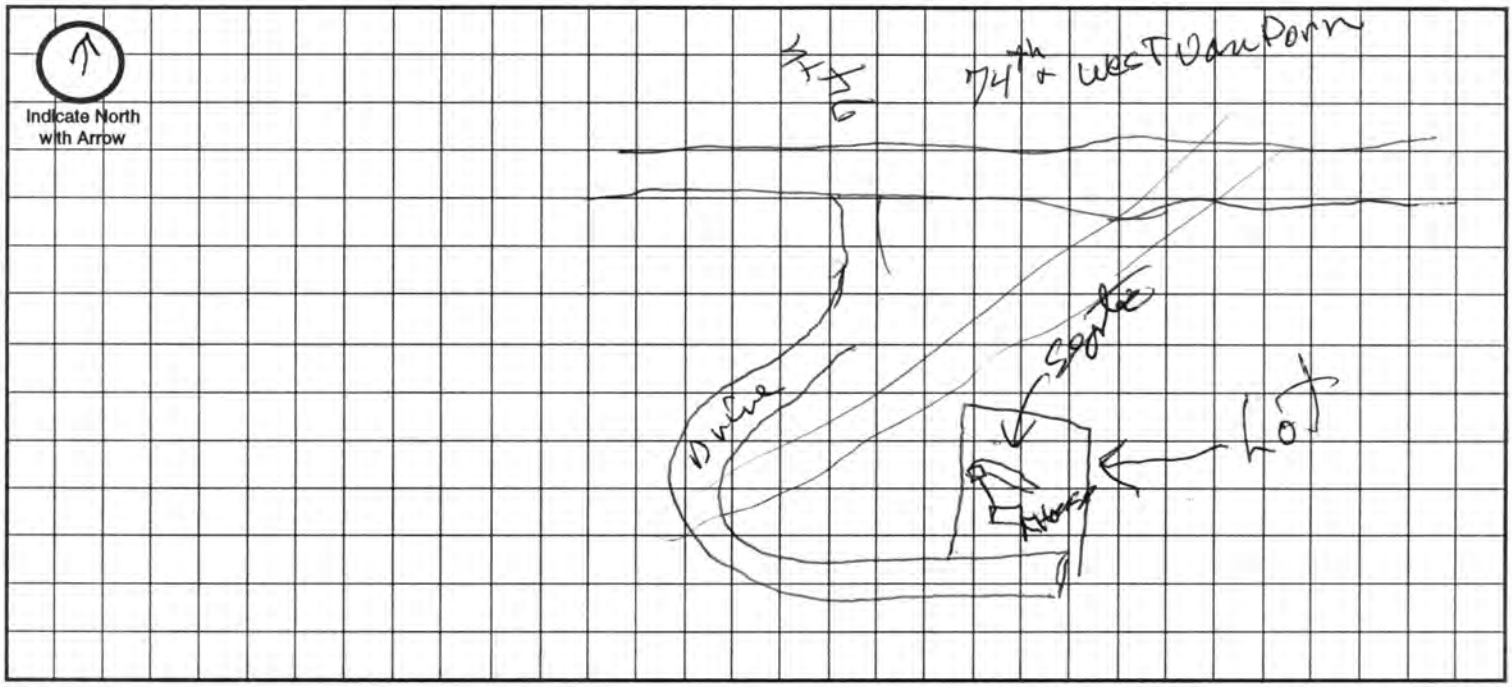
**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

**C**

Permit Number:

# Sewage Disposal System
## Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.




**Approximate Scale:** _____ ft. = _____ grid line/s

## A. System Location (Indicate correct number and street)

Address (no rural route) _____ City _____ NE, Zip _____

## B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

## C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 30 (min. per inch) Soil Type: ~~Silt~~ Wymore Silty Clay Loam Land Slope: _____ %

Type of Absorption System: ☐ Trench ☐ Bed ☐ Other _____

Total Square Feet of Field Required: 750 sq. ft.

Type of Lateral: ☒ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: _____

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 188 ft. Number of Trenches _____ Trench Width 4 ft

## D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

| Distance From | Private Well | Public Well | Surface Water | Gound Water | Pressure Water Lines | Property Lines | Foundations Yours | Foundations Neighbors | All Other Setbacks |
|---|---|---|---|---|---|---|---|---|---|
| Tank (ft) | 50 ☐ | 500 ☐ | 50 ☐ | NA ☐ | 25 ☐ | 20 ☐ | 15 ☐ | 25 ☐ | ☐ |
| Field (ft) | 100 ☐ | 500 ☐ | 50 ☐ | 4 ☐ | 30 ☐ | 20 ☐ | 30 ☐ | 40 ☐ | ☐ |
| Lagoon (ft) | 100 ☐ | 500 ☐ | 50 ☐ | N/A ☐ | 30 ☐ | 50 ☐ | 100 ☐ | 200 ☐ | ☐ |

## E. Required Signatures

Home Building Contractor Ronald J. Buller Date _____

Installer John Stalmaster Date 8-29-97

FORM 23-102 10-96

**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

**D**

Permit Number:

# Sewage Disposal System

## As Built Plans & Specifications

Date 6 26 98

**System Location (Indicate correct number and street)**

Address 7250 RANGER RIDGE (no rural route) City LINCOLN NE, Zip

## A. Building Sewer

1. Material: CLASS160 PVC sch 40
   Diameter: 4" in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 36 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line ____ ft.
   property line 100+ ft.

## B. Septic Tank

1. Material: CONCRETE
   Number of compartments: 1
2. Capacity: 1200 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter ____ in.
   Over outlet, diameter ____ in.
   Riser: ☐ above ☐ below grade ____ in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 24 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line ____ ft.
   Property line 100+ ft.

## C. Distribution Box

1. Material: CONCRETE
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 9 ft.

## D. Absorption Field

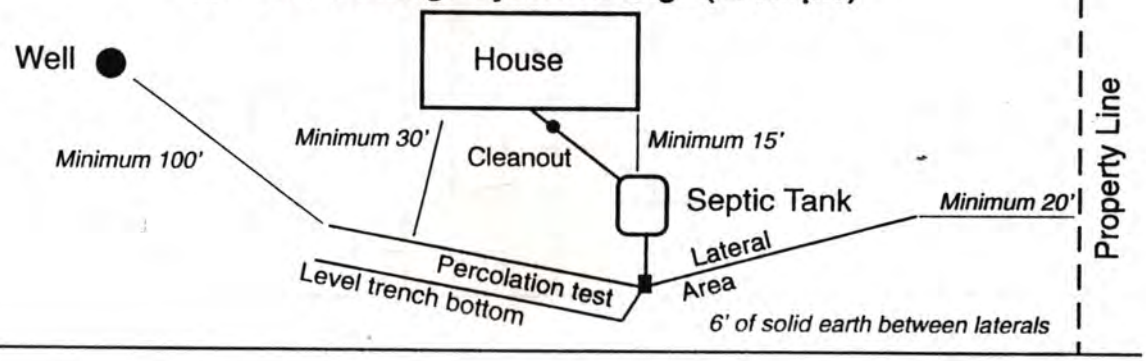
*(Provide as-built drawings on back of this form)*

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: ____
   or perforated pipe: ✓
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other INFILTRATOR
2. Lateral lines: Number 2
   Length of each line: 100 ft. 100 ft.
   ____ ft. ____ ft., ____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 2" in/100 ft.
   Average depth 25 in
4. Filter material: ROAD GRAVEL
   Depth of material 23 in.
5. Distances to: Well or suction line 100+ ft.
   Stream ____ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

Indicate North with Arrow

**Complete "As Built" drawing on back of this form.**

**Individual Sewage System Design (Example)**




FORM 23-103 10-96

# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

## PERMIT

Permit

WATER WELL

No. 97400066601

Issued 10/29/97
Expires 04/29/98
Revenue Code 19851

Establishment

RONALD J BULLER
T9N R5E SEC 2
RIDGE PARK BLK 4 LOT 8
7250 W RANGER RIDGE RD

FEES: $75.00

PAID

TOTAL $75.00

Permittee

RONALD J BULLER
1926 W MULBERRY CT
LINCOLN NE 68522

Gregg Wright MD.

Issued By ~~M. Jane Ford~~
Health Director

5381

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street ● Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit No. 9740006666

ID # G-094327

SW 74 & Van Dorn

# Request for Site Clearance and Permit for Individual Water Well

The undersigned hereby requests:

- ☒ Site Clearance and Permit to construct a new individual water well - $75.00
- ☐ Annual Permit for an existing well - $50.00
- ☐ Permit to repair or alter existing well involving opening of well - $25.00

1. Well Site Address 7250 W Ranger Ridge Rd City _____, NE Zip _____
(No Rural Route Please)
Legal description of property:
Twp 9N; Range 5E; Section 2; Block 4; Lot 8; Addition Ridge Park

2. Well use: ☒ Residential; ☐ Commercial; ☐ Other; Describe: _____

3. Distance to Public Water Supply _____ feet.

Signature of Owner Ronald J. Buller

Print Name Ronald J. Buller
Current Address 1926 W Mulberry Ct
Lincoln Ne 68522
Current Home Phone 438-1643
Work Phone _____

Signature of Contractor _____

Print Name Mosen Well Drilling
Address Hickman Ne
_____
Home Phone _____
Work Phone _____
Cellular Phone _____

Sewage Permit Applied for: ☒ Yes ☐ No ☐ Not applicable

**Please Submit Permit Fee with This Request**
**Please Do Not Write Below This Line**

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Approval Process: Lincoln Municipal Code 8.44

1. Health Department — Date received 10/29/97, Date forwarded 10/29/97 — ACTION ☒ Approved ☐ Disapproved — Signature: Jerrold C. Hood
2. Building & Safety — Date received 10/29/97, Date forwarded 10/29/97 — ACTION ☒ Approved ☐ Disapproved — Signature: [illegible]
3. City Engineer — Date received 10/29/97, Date forwarded 10/29/97 — ACTION ☒ Approved ☐ Disapproved — Signature: [illegible]

**REMARKS OR REASONS FOR DISAPPROVAL:** _____

**Site Visits:**
Date: 2/16/99 By Jerrold C. Hood
Date: ___/___/___ By _____
Date: ___/___/___ By _____

**Installation Final Written Approval**
By: Jerrold C. Hood
Date: 2/22/99

Nitrate Level <0.1 mg/L
Chloride Level _____ mg/L
Bacteriological Analysis Satisfactory
Yes X No ____
Other _____

***Business Office Use Only***
Date Rec'd: 10/29/97
Amt Paid: $ 75.00
Rec'd By ____ Cash/Check No. 2558

**Distribution:**
White - Health Dept. Lt. Green - Engineer Lt. Blue - Bldg Inspector

JAN 1 3 1998

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13553
FILE NO. 9740000666

State # G-84327

Lincoln-Lancaster County
HEALTH DEPARTMENT
3140 "N" STREET LINCOLN, NE 68510-1514

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 2 T. 9 R. 5 Block 4 Lot 8 Addition RIDGE PARK ADDITION, 7250 W. RANGER RIDGE RD.

Owner RON BULLER Address 1926 W. MULBERRY CT., LINCOLN, NE 68522

| LOG OF WELL | |
|---|---|
| Depth ft. --to-- | Description |
| 0- 40 | YEL & BRN CLAY |
| 40- 95 | BLUE CLAY |
| 95-100 | BLUE & BLACK CLAY |
| 100-105 | LIGHT BRN CLAY |
| 105-125 | SANDY BLUE SHALE & FINE SS |
| 125-130 | RED & BRN SHALE |
| 130-160 | SILTY & SANDY BLUE SHALE |
| 160-200 | VERY FINE BRN SS |
| 220-215 | MED FINE BRN SS |
| 215-230 | MED TO MED CRS BRN SS - |
| | SOME DARK BRN |
| | |
| | |
| | |

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER
Depth (from ground level), Ft. 218'
Date Completed 9/26/97

Casing: Length, Ft. 208' ; Dia. In. 4"
Wall Thickness, Inc. .214 ; type PVC

Screen: Length, Ft. 10' Dia. In. 4"
Type PVC WOP , slot Size .025

Drop Pipe: Length, Ft. 100 Dia. In. 1 1/4"

Water Level, Surface to top of water, Ft.:
Static 76', Pumping 85'

Yield: 100 ggm, Measured ☒ , Est. ☐
Chlorination Completed Yes ☒ No ☐

The above information including "Log of Well" is a true record of the job performed by me.

Driller [signature] (Signed)

Address P. O. BOX 308 Hickman, Nebraska 68372-0308

Date 9 JANUARY 1998

REMARKS NITRATE NITROGEN < 0.1 ppm. BACTERIOLOGICAL O.K.

DO NOT WRITE BELOW THIS DOUBLE LINE

Health Department forwarded copy of record to Nebraska Conservation and Survey Department for Scientific Record ☒

form 23-4

3-1-99

**LLCHD -- Well Data Entry** #G-094327

**Permit Number:** 9740006666 **ID Number:** G-094327 **Date Abandoned:**

**Lat Deg:** **Min:** **Sec:** **Lng Deg:** **Min:** **Sec:** **Elev:**

**Township:** 9 **Range:** 5 **Section:** 2 **Quarter:** **Quarter/Quarter:**

**Blk:** 4 **Lot:** 8 **Addition:** Ridge Park ADD

**House No:** 7250 **Dir:** W **St. Name:** Ranger Ridge **St. Type** RD **Suf:**

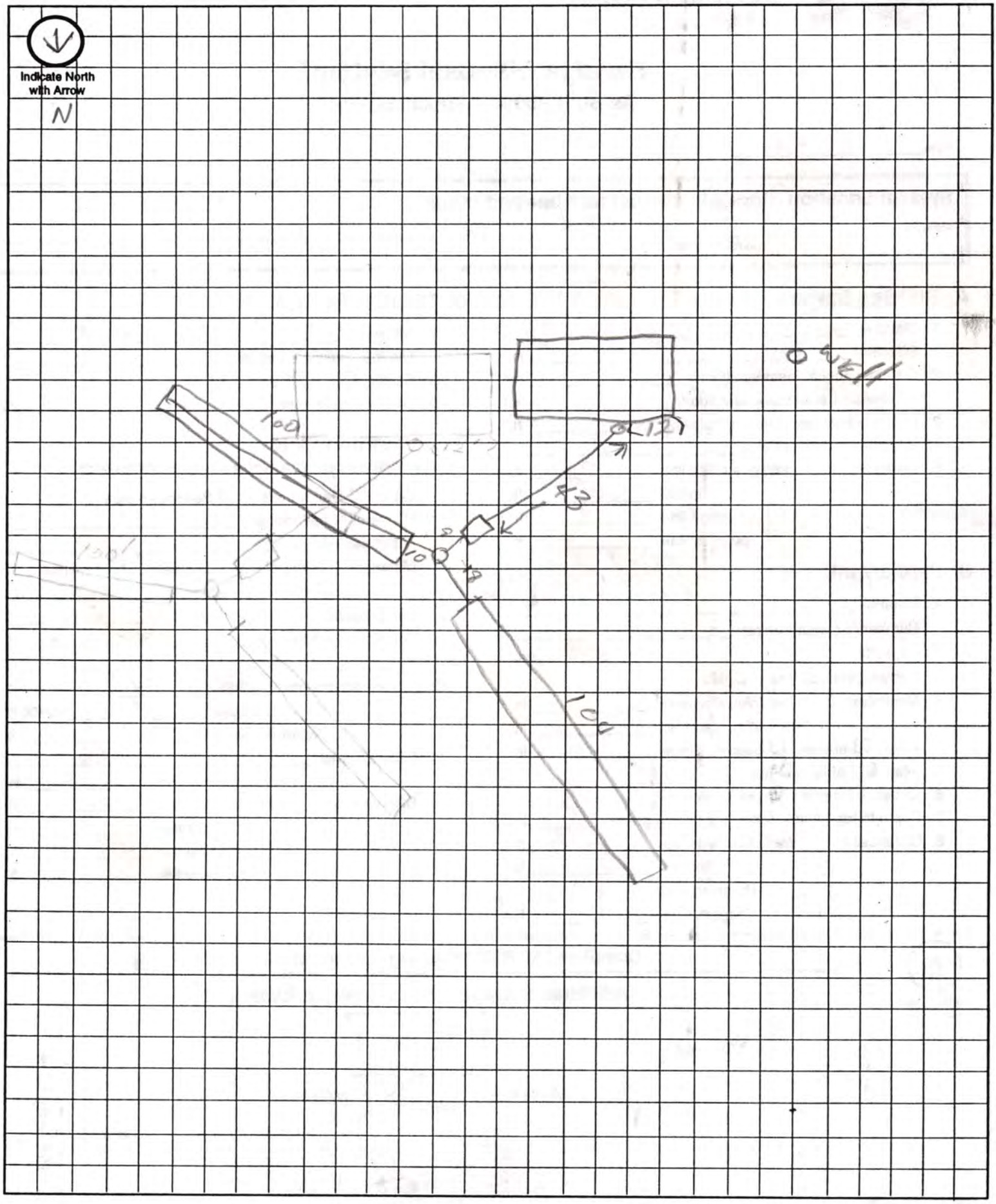
**Well Use:** R **Applicant:** Ronald J. Buller

**Owner:** Ronald J. Buller **Drlr:** Moser Well Drilling

**Drl Method:** Rty **Date Cmpltd:** 09/26/97 **Well Depth:** 218 **Cs Lngth:** 208 **Cs Dia:** 4

**Cs. Type:** PVC **Screen Length:** 10 **Static Lvl:** 76 **Pumping Lvl:** 85 **Yield:** 100

# As Built Drawing




Approximate Scale: _____ ft. = _____ grid line/s