Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

000514

(402) 441-8000

Permit SEWAGE INSTALLATION
LAGOON

Permit # 03380261601

Issued 04/11/03
Expires 10/11/03
Revenue Code 3157

Establishment CHARLES BAUM
T9N R5E SEC 21
LOT 29IT
9600 W 3 ST-DENTON

FEES: $200.00

Permittee CHARLES BAUM
9600 W 3 ST
DENTON NE 68339

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

A

Permit Number: 03380261601

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 9600 NW 35T. (no rural route) City DenTon NE, Zip 68339 SEC. 22

Legal Description NW LOT 158 NW 22-9-5 (1/4 / 1/4 / Section / Township / Range) Subdivision Addition Block Lot

LAGOON SEC. 21 HOUSE LOC. LOCATION 2ND T 158 T.

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner Charles Baum

Name 9600 NW 35T. Signature Charles L Baum

Address 9600 W 35T. City/State/Zip DenTon Ne. 68339.

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name Lloyd Jakoubek. Company Name Raymond Contracting.

Address 12800 NW 70Th. City/State/Zip Raymond Ne. 68428

☐ Check if contractor designed system Work Phone 890-6009.

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 4 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 4/11/03 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature Jerrold A. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 4-11-03 Date frwd 4-11-03 ACTION ☒ Approved ☐ Disapproved Signature Charlotte Jess
3. **City or County Engineer** Date rec'd 4-14-03 Date frwd 4-14-03 ACTION ☒ Approved ☐ Disapproved Signature Don Pahl

Line + Lagoon, Need d" + fence 4/16/03 (4/18/03)

Installation Final Written Approval

By _____

Date 10/27/03

Business Office Use Only
Date Rec'd 4/11/03
Amt Paid 200.00
Rec'd By CW Cash/Check No. 4857

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: 03380261601

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

797-2066

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 9600 W 3rd (no rural route) City Denton, NE NE, Zip 68339

Owner Chuck Baum Addresss 9600 W 3rd

Soil Type (SCS): Wymore Silty Clay WTC2 Percolation Rate: 51 min./inch

Date of Tests 3/3/03 to 3/4/03 Weather: Precipitation Lite snow 3/4/03 Temperature 50° - 10°

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	30	3/3	11:45	3/3	3:45	3/4	11:30	6	3/4	3:30	30 m.	5/8"	.63 47
2	34	3/3	"	3/3	"	3/4	11:30	6	3/4	"	30 m.	3/4	.75 40
3	26	3/3	"	3/3	"	3/4	"	6	3/4	"	30 mi	1/2	.50 60
4	30	3/3	"	3/3	"	3/4	"	6	3/4	"	30 mi	1/2	.50 60
5	28	3/3	"	3/3	"	3/4	"	6	3/4	"	30 mi	3/4	.75 40
6	28	3/3	"	3/3	"	3/4	"	6	3/4	"	30 mi	1/2"	.50 60
7	28	3/3	11:45	3/3	3:45	3/4	11:30	6	3/4	3:30	30 min	0	
8	32	3/3	"	3/3	"	3/4	"	6	3/4	"	30 min	0	

Person Conducting Percolation Tests

Name: Terri Jakoubek

Phone: 783-2663

Address 12800 NW 70th

Raymond Ne. 68428

Raymond Contracting

Sum of Percolation Rates: 307 ÷ 6

Average of Rates: 51

Rate Used for Calculation: 5 Bed Room 1750 gpd

1750 ÷ 4 = 437.50 Foot of HLD.

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks LAGOON MUST BE SEALED

Signature of Reviewing Official Jerold C. Hood R.E.H.S. Date 4/11/03

FORM 23-101 10-96

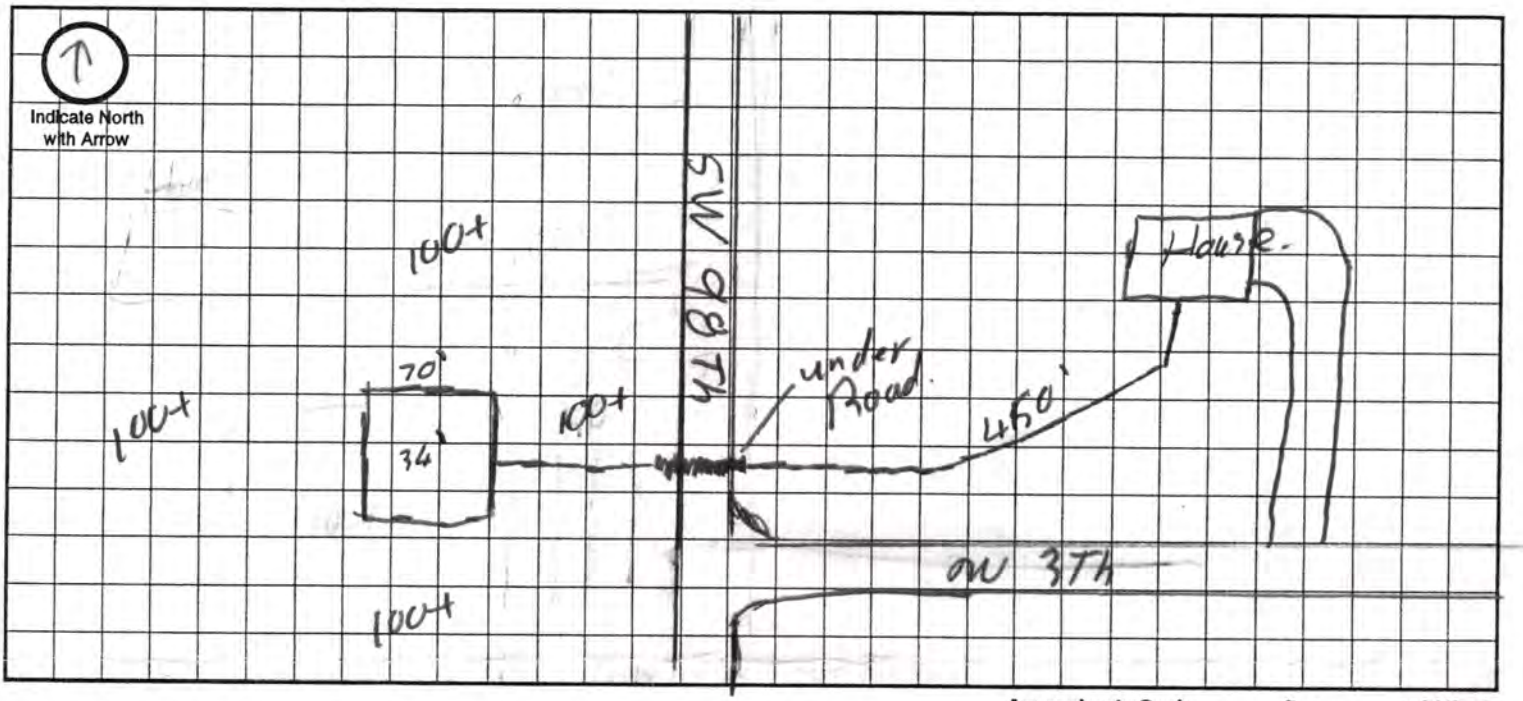
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 03380261601

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) 9600 SW 37th City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other 1500 gallon

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

Percolation Rate 51 (min. per inch) Soil Type: WTC2. Land Slope: 3-7% %

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

Total Square Feet of Field Required: 1750 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: Eq 36 H-10 Hi-capacity.

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

Total Length of Laterals 440 ft. Number of Trenches 4 Trench Width 4' 110' Long.

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 _____ Date _____

Installer Lloyd Gabouth Date 3/4/03.

FORM 23-102 10-96

Lloyd 890-6009

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

D

Permit Number: 033802616O1

Sewage Disposal System

As Built Plans & Specifications

Date 4/14/03 4/16/03

System Location (Indicate correct number and street)

Address 9600 oW 35T (no rural route) City Denton NE, Zip 68339.

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. ~~Distance between dwelling and septic tank:~~ _____ ft.
4. Number of clean-outs: 9
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 15 ft.

B. Septic Tank

1. Material: concrete.
   Number of compartments: one
2. Capacity: 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade AT grade in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 16 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: _____
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

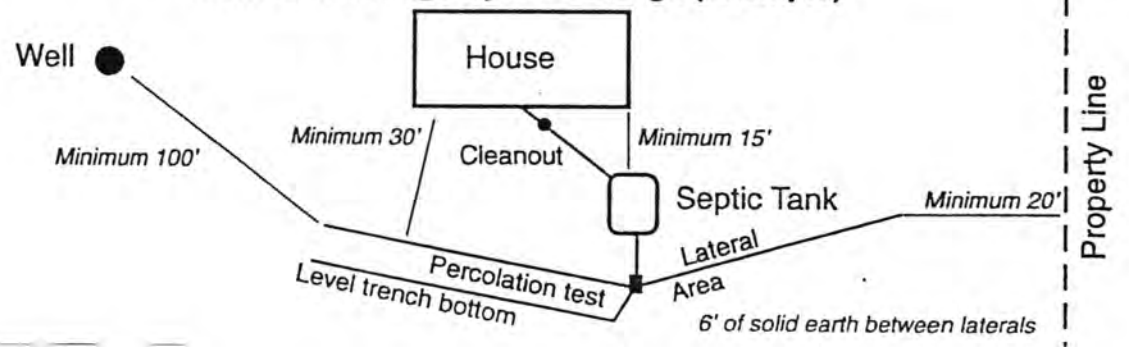
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: Eq 36 H10 Hi capmity.
   or perforated pipe: _____
   Material: ☒ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 110 ft. 110 ft.
   _____ ft. 110 ft., 110 ft.
3. Trench dimensions: Width 4 ft.
   Slope Flat in/100 ft.
   Average depth 34" in
4. Filter material: Dirt
   Depth of material _____ in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

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

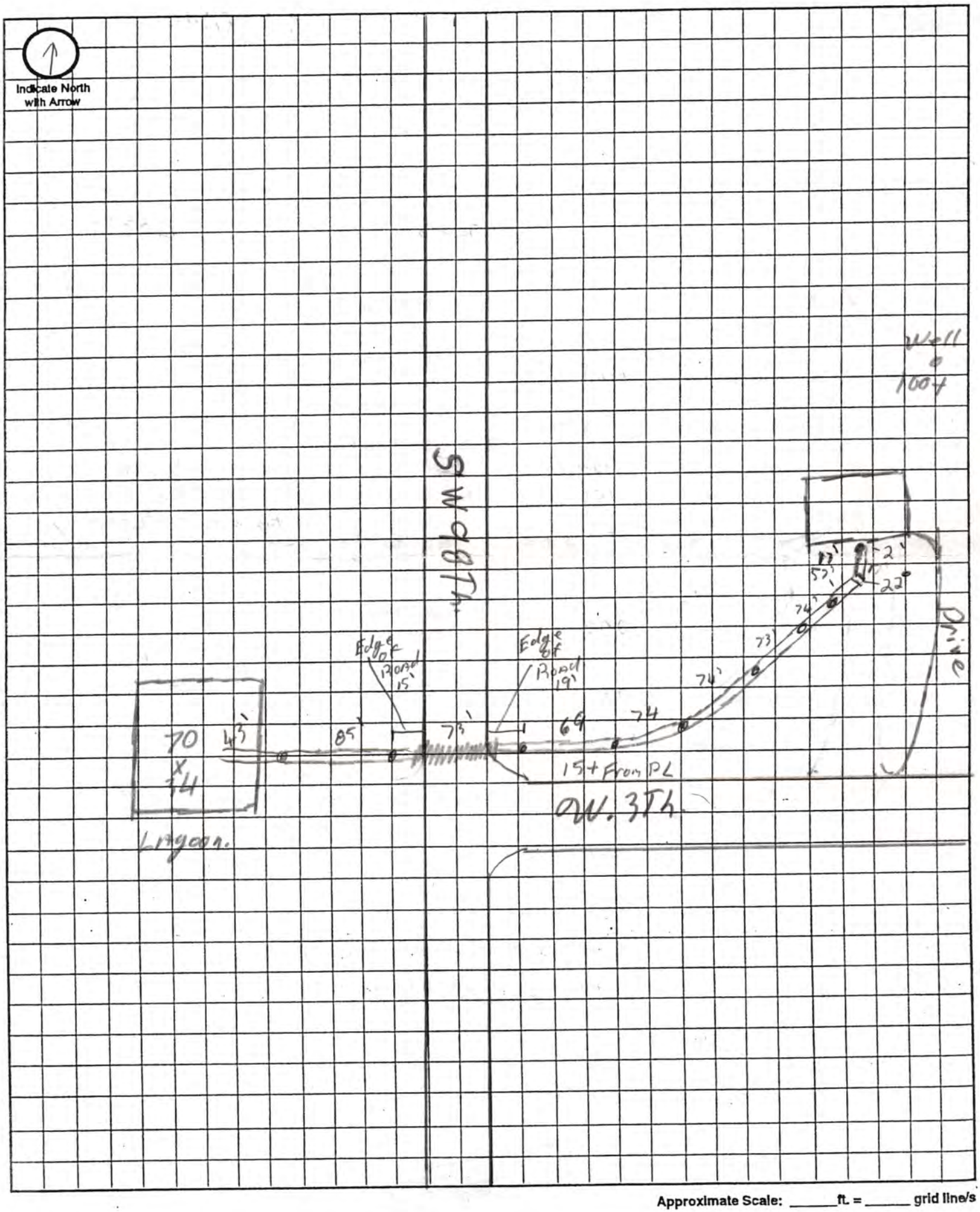
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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

033802616

441-7681

UTILITY PERMIT NO. 650

LANCASTER COUNTY ENGINEERING DEPARTMENT
444 CHERRYCREEK ROAD, BUILDING C
LINCOLN, NEBRASKA 68528

C-03-0146

FILED
APR 10 2003
LANCASTER COUNTY CLERK

Application to Construct Utilities
on County Right-of-Way

DATE: 4/9/03

Application is hereby made to LANCASTER COUNTY ENGINEERING DEPARTMENT by: Lloyd J. Jakoubek

NAME: Raymond Contracting. Chuck Baum PHONE: 890-6009

ADDRESS: 9600 NW 3rd.
Denton Ne 68339

To construct a utility or utilities on County right-of-way as follows:

LEGAL DESCRIPTION: Lot 158 NW 22-9-5 To
Lot 29 NE 21-9-5

TYPE OF UTILITY TO BE CONSTRUCTED:

Water or Irrigation	____	Pipe Size and Type	(Encasement class 160 Sleeve 6")
Sewer	X	Pipe Size and Type	class 160 4"
Electric	____	Voltage	____
Natural Gas	____	Pipe Size and Type	____
Other	____		

PROPOSED METHOD OF INSTALLATION:

Open Trench	X	Width	24"	Depth	3'-4'
Continuous Bore	X yes	Size	8"	Depth	3'-4'
Encasement Pipe	X	Size	6"	Type	160 Class

NAME AND ADDRESS OF CONTRACTOR PERFORMING THE WORK (If Applicable):

Raymond Contracting. Lloyd J. Jakoubek
12800 NW 70th. Raymond Ne. 68428

UTILITY PERMIT REQUIREMENTS

1) The applicant shall furnish Lancaster Engineering Department (444 Cherrycreek Road, Building C, Lincoln, NE 68528) with a Certificate of Insurance in accordance with the insurance requirements contained in this permit before starting any work on County right-of-way.

2) The applicant, or his contractor, shall contact the local utility companies and request location of any buried utilities. Damage to any utilities, either on County right-of-way or adjacent to County right-of-way, shall be repaired at the expense of the applicant or his contractor.

3) Future road construction work could necessitate relocation of utilities. Those utility relocation costs shall be borne by the utility owner.

4) Areas disturbed by construction shall be restored to pre-construction condition as much as practical. This includes compaction of the backfill to a density equal to or greater than the surrounding soil, replacing road and driveway surfacing materials lost during construction, and seeding of the disturbed areas.

5) Trees in the right-of-way shall be preserved wherever possible. Trees and brush removed to facilitate construction shall be properly disposed of.

6) Paved road crossings shall be dry bored.

7) All trenches shall be backfilled the same day trench was excavated except for the portion where the work is to be continued the next day. The portion left open for work continuation shall be protected by barricades with flashing lights at night. No open trenches in the roadway will be allowed overnight.

8) All barricading, flagmen, warning signs, etc. shall conform to the current *Manual on Uniform Traffic Control Devices*.

9) No equipment shall be left unattended on public right-of-way. No tranches shall be left open after working hours. No equipment shall block traffic control devices. If necessary, flagmen shall be required.

(TO BE FILLED IN BY COUNTY PERSONNEL)

Encasement Requirements: 6" encasement pipe for sewer line. Encasement pipe to extend from toe of foreslope to toe of foreslope

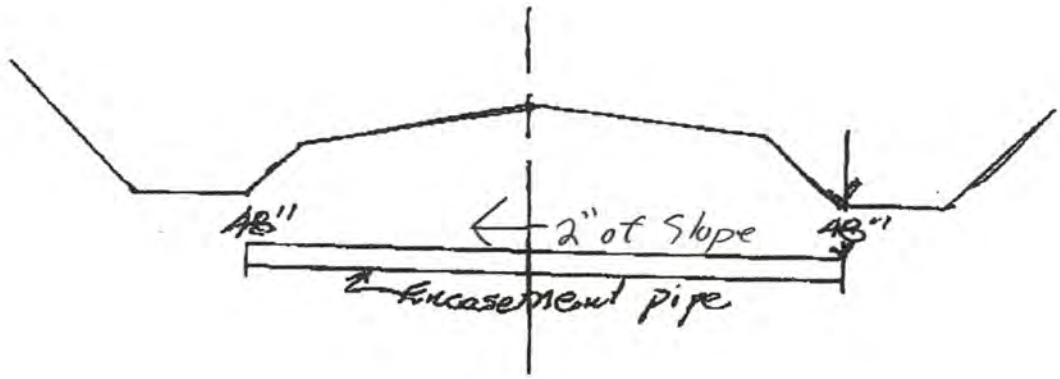
Barricade, Signing and Flagging Requirements: See attached traffic control plan

Methods of Installation: Road crossing to be dry bored. Open trench installation on remainder of road right-of-way

Minimum Cover Provided in Road Ditches: 48"

Other Requirements:

UTILITY PERMIT REQUIREMENTS



TYPICAL CROSS SECTION OF ROAD CROSSING
(Proposed by Applicant)

NOTES:

1) This type of crossing to be made at all public roads.

2) Within traveled portion of unimproved roadways, all open cut crossings to be backfilled with material excavated from trench. No sand or crushed rock backfill will be allowed. Backfill density to be equal to or greater than surrounding soil.

3) Paved road crossings shall be dry bored.

4) Roads may be closed for a maximum of 12 hours. No trench shall be left open overnight.

5) Three Type III barricades w/Type A flashing lights shall be placed on each side of construction site. "Road Closed" (R11-2) signs shall be mounted on the middle barricade on each side of the construction site. At the nearest intersection each way from crossing a "Road Closed _____ Miles ahead -- Local Traffic Only" (R11-3) sign shall be placed.

6) All pipe and encasements to conform with State Highway Standards.

I (We) agree to construct the Sewer (utility) in accordance with the permit requirements and the provisions included as a part of this permit.

COMPANY: Raymond Contracting

SIGNED BY: Lloyd J. Gabler

DATE: 4/9/03

EXECUTION BY LANCASTER COUNTY

The above application is hereby approved subject to the requirements and provisions of the permit.

APPROVED and dated this 15 day of April, 2003 by the Lancaster County Board of Commissioners.

LANCASTER COUNTY BOARD OF COMMISSIONERS

Bernice Hess

Chairperson

APPROVED as to form
this 15th day of April, 2003

David W. Johnson Jr

for County Attorney

REVIEWED this 10th day of April

Lancaster County Surveyor

INSURANCE FOR CONSTRUCTING UTILITIES ON COUNTY RIGHT-OF-WAY

The Contractor shall indemnify and save harmless LANCASTER COUNTY, Nebraska from and against all losses, claims, damages, and expenses, including attorney's fees, arising out of or resulting from the performance of the Contract that results in bodily injury, sickness, disease, death, or to injury to or destruction of tangible property, including the loss of use resulting therefrom and is caused in whole or in part by the Contractor, any subcontractor, any directly or indirectly employed by any of them or anyone for whose acts any of them may be liable. This section will not require the Contractor to indemnify or hold harmless LANCASTER COUNTY for any losses, claims, damages, and expenses arising out of or resulting from the negligence of LANCASTER COUNTY, Nebraska.

Contractor shall not commence work under this Contract until he has obtained all insurance required under this Section and such insurance has been approved by LANCASTER COUNTY, nor shall the Contractor allow any subcontractor to commence work on his subcontract until all similar insurance required of the subcontractor has been so obtained and approved.

A. Workman's Compensation Insurance and Employer's Liability Insurance

The Contractor shall take out and maintain during the life of this Contract the applicable statutory Workmen's Compensation Insurance with an insurance company authorized to write such insurance in this state covering all his employees, and in the case of any work sublet, the Contractor shall require the subcontractor similarly to provide statutory Workmen's Compensation Insurance for the latter's employees. The Contractor shall take out and maintain during the life of this Contract, Employer's Liability Insurance with a limit of $100,000 in an insurance company authorized to write such insurance in all states where the Contractor will have employees located in the performance of this Contract, and the Contractor shall require each of his subcontractors similarly to maintain common law liability insurance on his employees.

State	Statutory
Applicable Federal	Statutory
Employer's Liability	$100,000

B. Public Liability Insurance

1. The Contractor shall maintain during the life of this Contract, Public Liability Insurance, naming and protecting him and LANCASTER COUNTY, its officials, employees and volunteers as insureds, against claims for damages resulting from (a) bodily injury, including wrongful death, (b) personal injury liability, and (c) property damage which may arise from operations under this Contract whether such operations be by himself or by any subcontractor or anyone directly or indirectly employed by either of them. The minimum acceptable limits of liability to be proved by such insurance shall be as follows:

a. Bodily Injury and Property Damage	$1,000,000 Each Occurrence $2,000,000 Aggregate
b. Personal Injury Damage	$1,000,000 Each Occurrence
c. Contractual Liability	$1,000,000 Each Occurrence
d. Products Liability and Completed Operations	$1,000,000 Each Occurrence

2. The Public Liability insurance required by the preceding paragraph shall include the following extensions of coverage:

a. The coverage shall be provided under a Commercial General Liability form or similar thereto.

b. X.C.U. Coverage - If the Contract requires any work procedures involving blasting, excavating, tunneling or other underground work, the liability coverage shall include Standard Blasting or Explosion Coverage, Standard Collapse Coverage, and Standard Underground Coverages commonly referred to as XCU Property Damage Liability.

c. The property damage coverage shall include a Broad Form Property Damage Endorsement or similar thereto.

d. Contractual Liability coverage shall be included.

e. Products Liability and/or Completed Operations coverage shall be included.

f. Personal Injury Liability coverage shall be included.

C. Automobile Liability Insurance

The Contractor shall take out and maintain during the life of the Contract such Automobile Liability Insurance as shall protect him against claims for damages resulting from bodily injury, including wrongful death, and property damage which may arise from the operations of any owned, hired, or non-owned automobiles used by or for him in any capacity in connection with the carrying out of this Contract. The minimum acceptable limits of liability to be provided by such Automobile Liability Insurance shall be as follows:

Bodily Injury and Property Damage — $1,000,000 Combined Single Limit

D. Builder's Risk Insurance (For Building Construction Contracts Only)

Unless otherwise specified where buildings are to be constructed under this Contract, the Contractor shall provide and maintain fire, extended coverage, vandalism, and malicious mischief insurance, covering such building in an amount equal to one-hundred percent (100%) of the Contract amount (minimum), as specified herein.

Losses, if any, shall be made payable to LANCASTER COUNTY and Contractor as their interest may appear. A Certificate of Insurance evidencing such insurance coverage shall be filed with LANCASTER COUNTY by the time work on the building begins and such insurance shall be subjected the approval of LANCASTER COUNTY.

E. Minimum Scope of Insurance

All Liability Insurance policies shall be written on an "occurrence" basis only. All insurance coverages are to be placed with insurers authorized to do business in the State of Nebraska, and must be placed with an insurer that has an A.M. Best's Rating of no less than A:VII unless specific approval has been granted by LANCASTER COUNTY.

F. Certificate of Insurance

All Certificates of Insurance shall be filed with LANCASTER COUNTY on the standard ACORD CERTIFICATE OF INSURANCE form showing the specific limits of insurance coverage required by the preceding sections A, B, C, D, and showing LANCASTER COUNTY is an additional insured. Such certificate shall specifically state that insurance policies are to be endorsed to require the insurer to provide LANCASTER COUNTY thirty (30) days notice of cancellation, non-renewal or any material reduction of insurance coverage.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/10/2003

PRODUCER (402)434-7200 FAX (402)434-7272
UNICO Group, Inc.
4435 "O" Street
P. O. Box 30275
Lincoln, NE 68510

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED Raymond Contracting Inc.
12800 NW 70th St
Raymond, NE 68428

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A Allied (Nationwide)	00035
INSURER B	
INSURER C	
INSURER D	
INSURER E	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER POLICY PRO-JECT LOC	ACPMCT07211083937	03/13/2003	03/13/2004	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 2,000,000 $
A		AUTOMOBILE LIABILITY [X] ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS	ACPBA7211083937	03/13/2003	03/13/29/2	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $
		GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EA ACC AGG	$ $ $
		EXCESS/UMBRELLA LIABILITY OCCUR CLAIMS MADE DEDUCTIBLE RETENTION $				EACH OCCURRENCE AGGREGATE	$ $ $ $ $
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	ACPWC7211083937	03/13/2002	03/13/2003	WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 100,000 $ 100,000 $ 500,000
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

General Liability Additional Insured: Lancaster County Nebraska

CERTIFICATE HOLDER

Lancaster County
555 So. 10th St.
Lincoln, NE 68508

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Andrew Drake/ALD

ACORD 25 (2001/08)

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.