LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION
LAGOON

No. 98380178101

PAID

Issued 06/19/98
Expires 12/19/98
Revenue Code 3157

FEES: $150.00

Establishment
TIMOTHY J MORROW
T9N R5E SEC 25 QTR NW
N 1/2 OF NW QTR
6701 W YANKEE HILL RD-DENTON

TOTAL $150.00

Permittee
TIMOTHY J MORROW
6701 W YANKEE HILL RD
DENTON NE 68339

Issued By Health Director
Lincoln-Lancaster County Health Department

007646

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 6701 W Yankee Hill Rd (no rural route) City Denton NE, Zip 68339

Legal Description N½ (1/4) NW (1/4) 25 (Section) 9N (Township) 5E (Range) ~~(Lot 36)~~ (Subdivision) 30 (Addition) I.T. (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 Timothy J Morrow Signature Timothy J Morrow

Address 6701 Yankee hill Rd City/State/Zip Denton Nebr 68339

☐ Check if owner designed system Home Phone 470-2626 Work Phone 430-0889

C. Contractor

Name Tim Morrow Company Name Tim Morrow Const + Remodeling

Address 6701 W Yankee hill Rd City/State/Zip Denton Nebr 68339

☐ Check if contractor designed system Work Phone 430-0889

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

Designer Name Dave Vogt Firm Vogt Excavating Work Phone 560-4267

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 6/18/98 Date frwd 6/19/98 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6-19-98 Date frwd ~~6/19/98~~ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 6-19-98 Date frwd 6-19-98 ACTION ☒ Approved ☐ Disapproved Signature Jim Rhoads

6/19/98 Need forms, signs, etc.

Installation Final Written Approval

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

Date JULY 16, 1998

Business Office Use Only

Date Rec'd 06/18/98
Amt Paid 150.00
Rec'd By _____ ~~Cash~~/Check No. 781

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

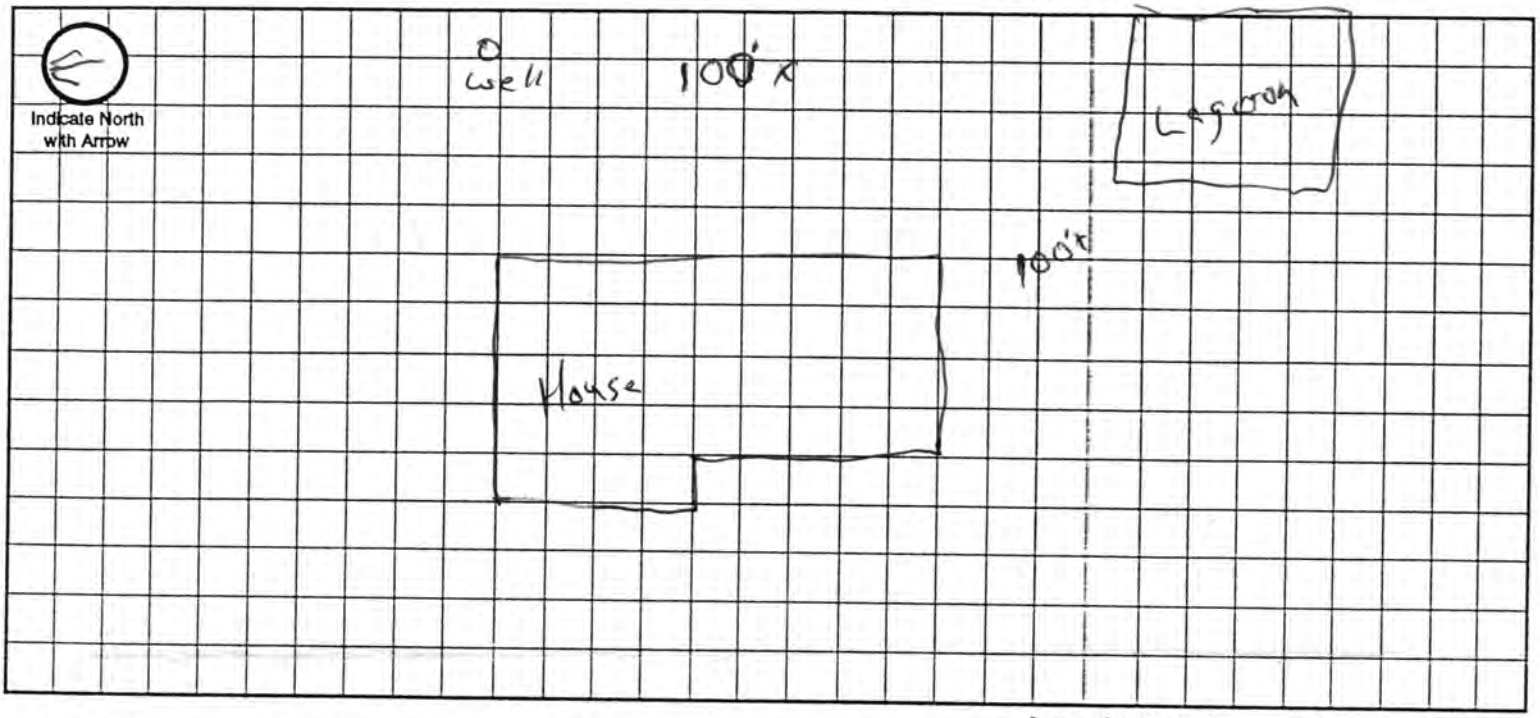
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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) 6701 W Yankeehill Rd City Denton Nebr NE, Zip 68339

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate _____ (min. per inch) Soil Type: _____ Land Slope: _____ %

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

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

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

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

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

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 Timothy J Morrow Date 6-18-98

Installer _____ Vogt TNT Excavating Date 6-18-98

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 6-19-98

System Location (Indicate correct number and street)

Address 6201 Yankee Hill Rd (no rural route) City Denton NE, Zip

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 18 in.
3. Distance between dwelling and ~~septic tank~~: _____ ft.
4. Number of clean-outs: 3 Lagoon
5. Distances to: well or suction line 134+ ft.
   stream 100+ ft.
   pressure line 20+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: _____
   Number of compartments: _____
2. Capacity: _____ 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: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

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

D. Absorption Field

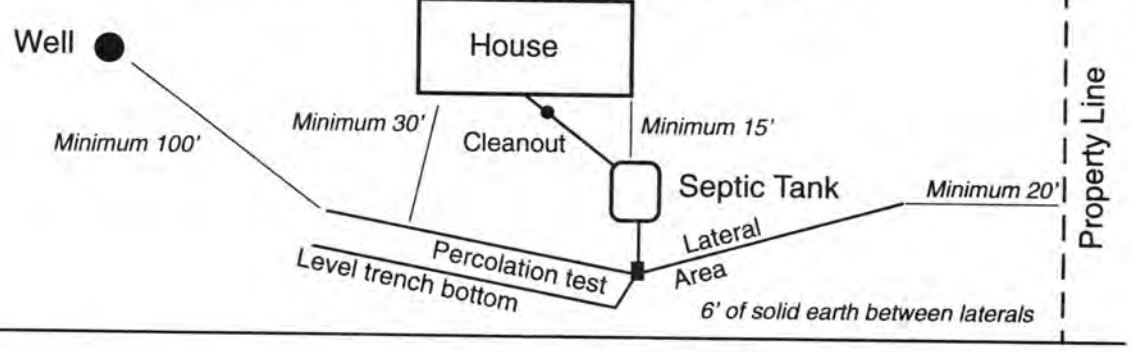
(Provide as-built drawings on back of this form)

1. Type: ❑ Half rounds ❑ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ❑ fiberglass ❑ plastic ❑ concrete
   ❑ other _____
2. Lateral lines: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ 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

SEP 2 4 2002

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

COPY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☐ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 6701 W. Yankee Hill Rd.

Parcel ID 03-25-100-007-000 (i.e. 99-99-999-999-999)

Twp 9N Range 5E Section 25 1/4 ___ 1/4 ___ Block ___ Lot ___ Addition ___

Directions to Property Denton Rd to S.W. 56th turn left, go south 1 mile to W. Yankee Hill Rd. turn right - go 2/3 mile to 6701 (on left side of road.)

Location of Well back yard - NE corner of house Tap Location: Inside ☐ Outside ☒

Location of Sewage System S.E of house Year Installed 1998

Site Hazards (dogs, etc.) no dogs

	NAME	ADDRESS	PHONE
Present Owner:	Tim + Jill Morrow	6701 W. Yankee Hill Rd. Denton, NE 68339	797-2627
Tenant/Buyer:	Dale + Camie Nitzel	RR1 Box 209 A Crete NE 68333	402-797-7797
Return to:	Judy Hitt	7141 A ST LINCOLN NE 68510	450-8254 434-3801 (Fax)

Signature of Applicant Timothy J Morrow Address 6701 W. Yankee Hill Rd. Denton, NE 68339 Date 9/13/02

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 9/26/02 Amount 200.00 Check No. 1006 Initials ___

DATA ENTRY Date ___/___/___ Case No. ___ Initials ___

PRELIMINARY STATUS--By Doug Smith **DATE:** 9/27/02

P21606-42

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 0.1 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: ___

See Attached Letter ☐

FINAL STATUS

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

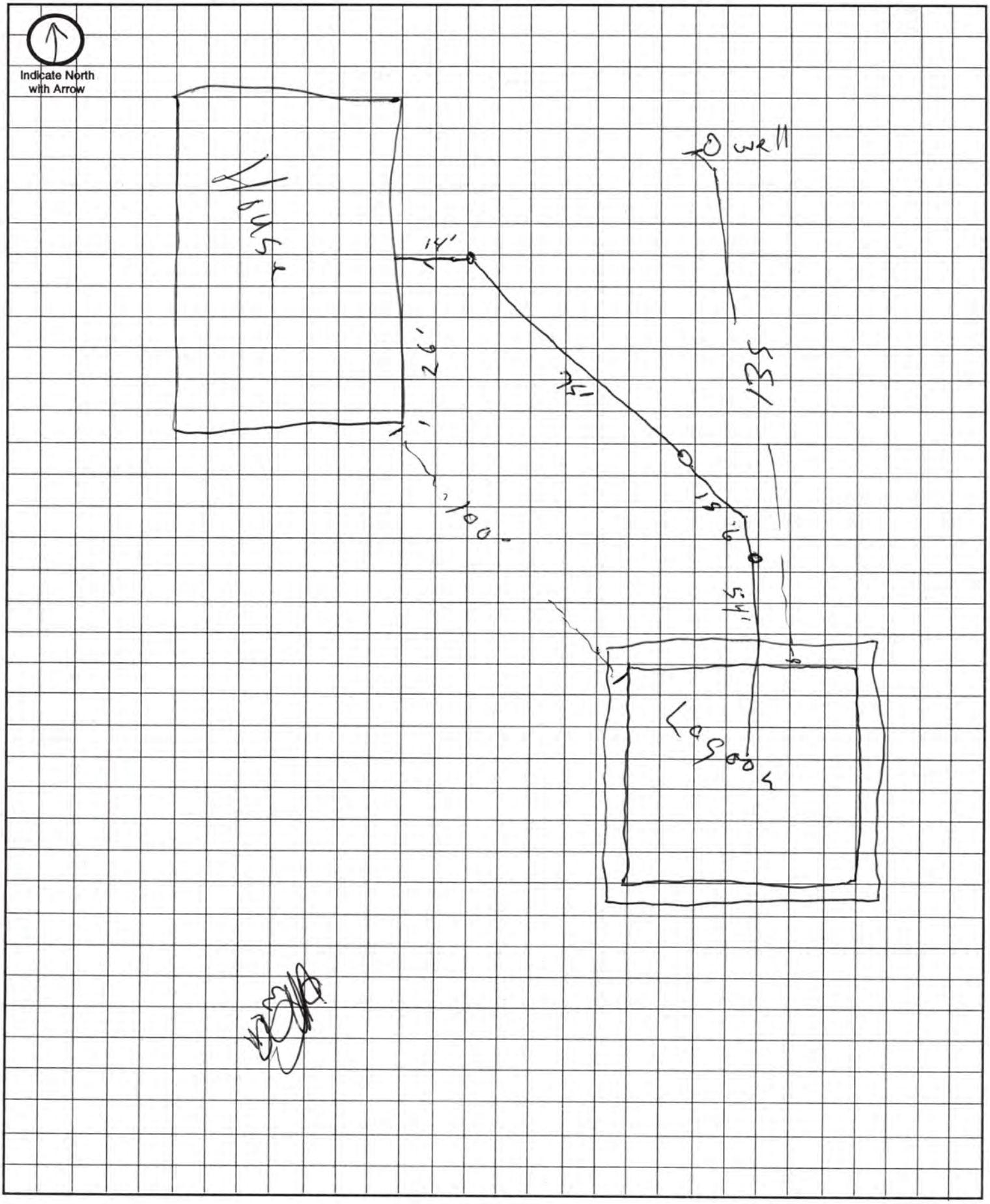
Approved by Doug Smith Date 10/01/02

Approval or disapproval is based on State and local 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 operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00

As Built Drawing



Approximate Scale: _____ft. = _____ grid line/s