LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 1981-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF PERMIT

NOVEMBER 11, 1983
THIS PERMIT EXPIRES

JAMES HOWERTON 539 BUTLER LINCOLN, NE 68521
ISSUED TO ADDRESS

T9N, R5E, SECTION 28
LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE NEW

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
P.S.	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

20109-0977

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 474-1541

A

FILING FEE: $ 60.00

FILE NO. 1981-C

DATE: 5-9-83

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

1. Legal description of property: Twp. 9 N ; Range 5E ; Section 28 ;
Block _____ : Lot _____ : Addition _____
Street Address _____

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
No. of Bedrooms 3 . Describe Residential Acreage for Private use.

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

4. Distance to public sewer: 10,000+ ft.

James A. Fowerton
Signature of Applicant (Owner or Lessee)

539 West Butler
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/11/83. Date Frwd. 5/11/83. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 5-11-83. Date Frwd. 5-11-83. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bowers

3. City or County Engineer: Date Rec'd 5/11/83. Date Frwd. 5/11/83. ACTION: Approved ☒ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 4/7/83 by: JMN
Date: 11/18/83 by: JMN
Date: ____/____/____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 11/14/97 By: Jerrold C. Hood

* PROVISIONAL

FORM 20105-0477
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: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9-N ; Range 5E ; Section & ¼ Section S½-SE-NE Sec. 28
Property Dimensions: 660± ft. x 1320± ft. Area: 20 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☒ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 5-6-83 to 5-7-83 . Weather: Precip. 1"± Temp. 60±.

OWNER: James A. Howerton
LINDA HOWERTON
Address: 539 West Butler
Lincoln, NEBR. 68521

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./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36	5-6	10AM	~~5-6~~	3PM	5-7	1:00	6	2:00	1¼	10	2¾	~~3.64~~ 3.64
2	36	"	"	"	"	"	1:05	6	2:05	Dry	10	2¾	~~3.64~~ 3.64
3	30	"	"	"	"	"	1:10	6	2:10	¼"	10	~~3¾~~	~~5.71~~ 5.71
4	24	"	"	"	"	"	1:15	6	2:15	Dry	10	2⅜	4.21
5	26	"	"	"	"	"	1:20	6	2:20	Dry	10	3	3.33
6	32	"	"	"	"	"	1:25	6	2:25	Dry	10	2⅝	3.81
7	36	"	"	"	"	"	1:30	6	2:30	Dry	10	1⅛	8.89
		Note: All Holes Refilled to 6" Level at least one Time.											
		After 1 hour, ~~1~~ hole at A Time was Filled to 3"											
		and a 10 minute Reading Taken.										L & M Above.	

Sum of Percolation Rates: ~~40.85~~ 33.23
Average of Rates: ~~3.87~~ 4.75
Mean of Rates: 6.11

James A Howerton, Geologist
Signature of Person Conducting Test
Address 3920 So 16th Lincoln, Ne. Home Phone 423-8711
Office 473-4701

(Do not write below this line)

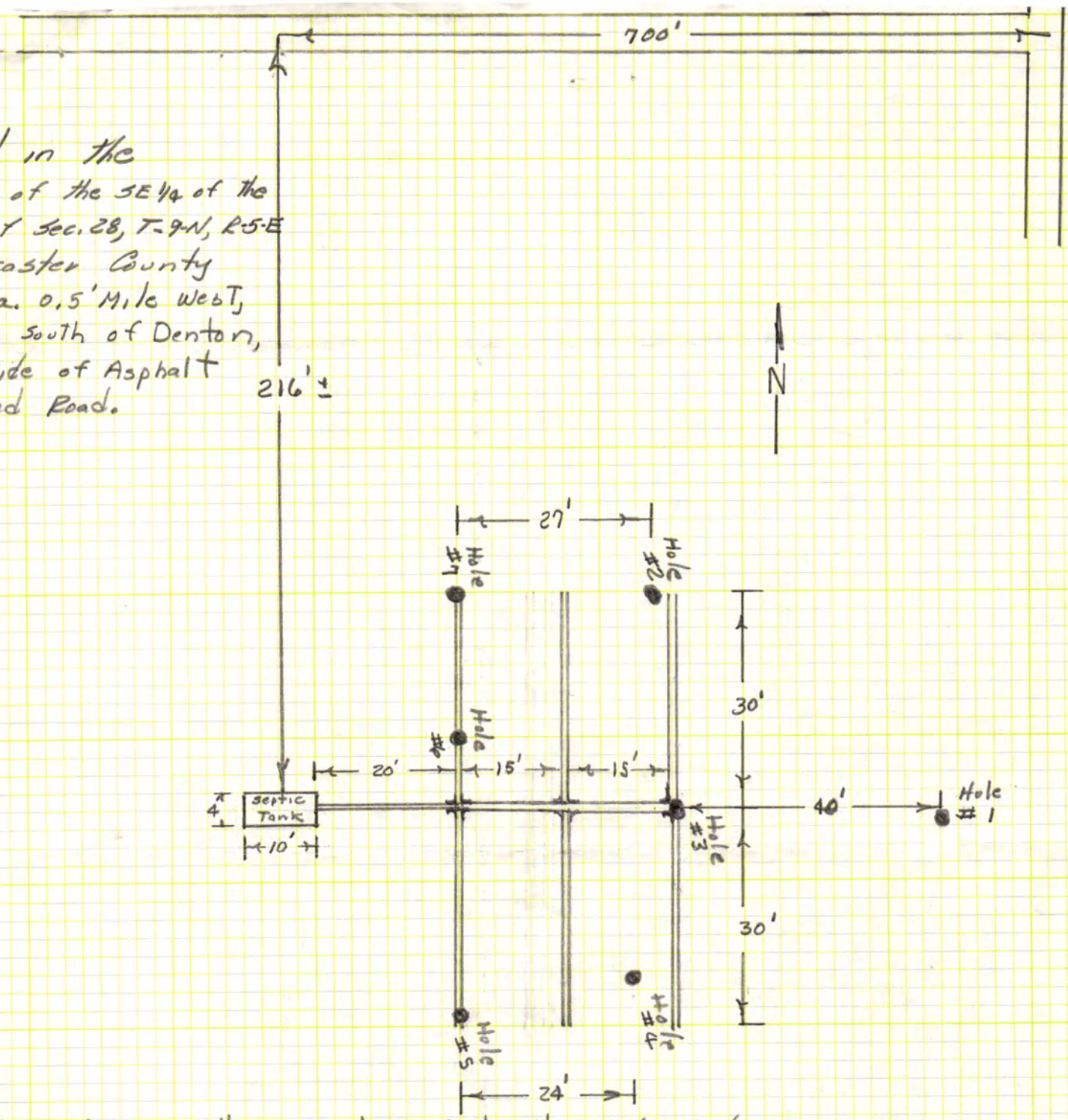
REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Dickenson Sandy Loam
Date: _____

Approved Percolation Rate (a)
A. 5 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

Located in the
South 1/2 of the SE 1/4 of the
NE 1/4 of Sec. 28, T-9-N, R-5-E
in Lancaster County
Nebraska. 0.5 Mile West,
1 1/2 Mile South of Denton,
West Side of Asphalt
Surfaced Road.



No.	Depth	Diameter	Sandy Silt	Fine Sand
Hole #1	3'	8"	0" - 14"	14" - 36"
Hole # 2	3'		0 - 10"	10" - 36"
Hole # 3	2'-6"		0 - 12"	12" - 30"
Hole # 4	2.0'		0 - 15"	15" - 24"
Hole # 5	2'-2"		0 - 14"	14" - 26"
Hole # 6	2'-8"		0 - 15"	15" - 32"
			"	10" - 36"

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

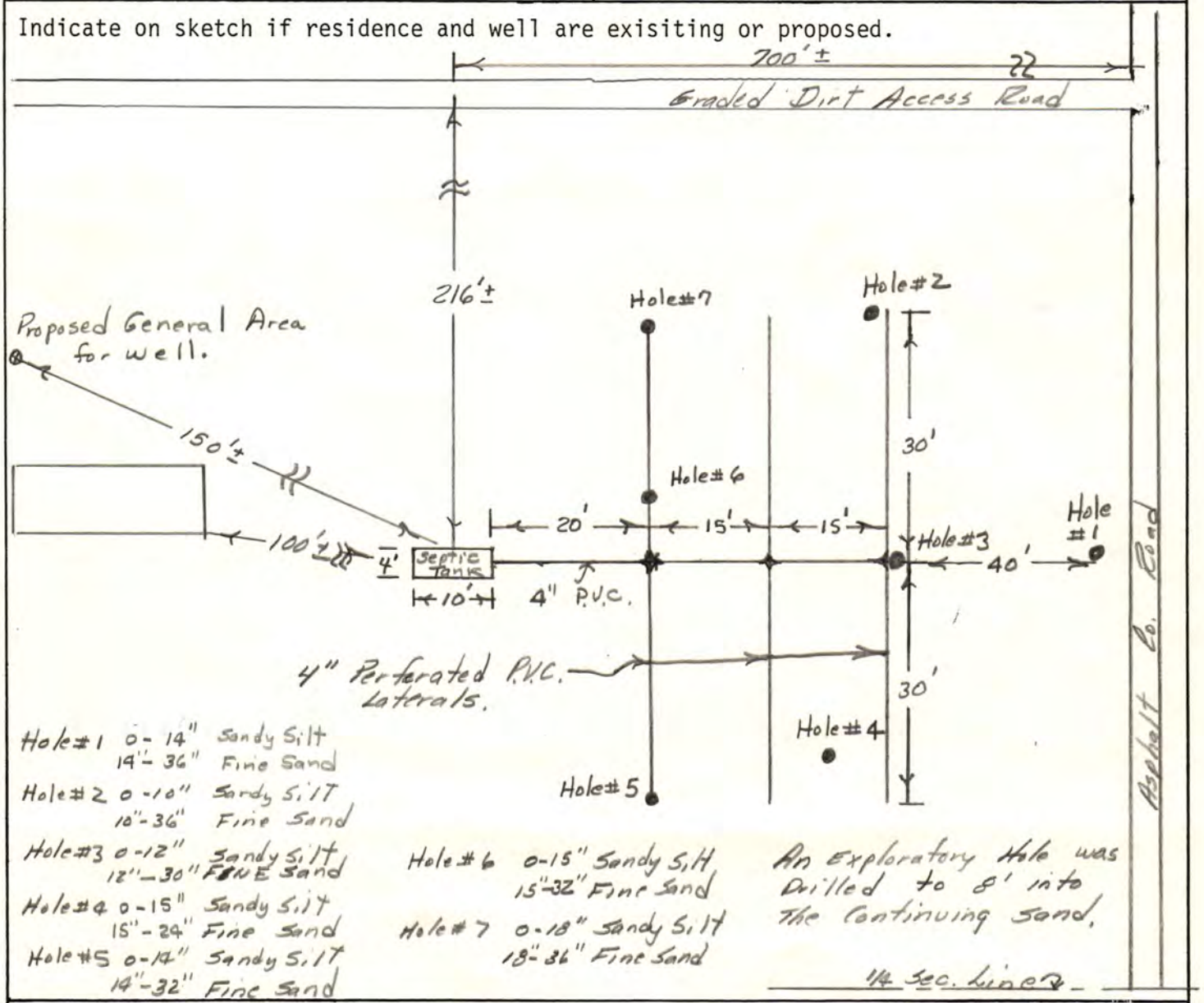
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.



Hole#1 0-14" Sandy Silt
14"-36" Fine Sand

Hole#2 0-10" Sandy Silt
10"-36" Fine Sand

Hole#3 0-12" Sandy Silt
12"-30" Fine Sand

Hole#4 0-15" Sandy Silt
15"-24" Fine Sand

Hole#5 0-14" Sandy Silt
14"-32" Fine Sand

Hole#6 0-15" Sandy Silt
15"-32" Fine Sand

Hole#7 0-18" Sandy Silt
18"-36" Fine Sand

An Exploratory Hole was drilled to 8' into the Continuing Sand.

¼ Sec. Line

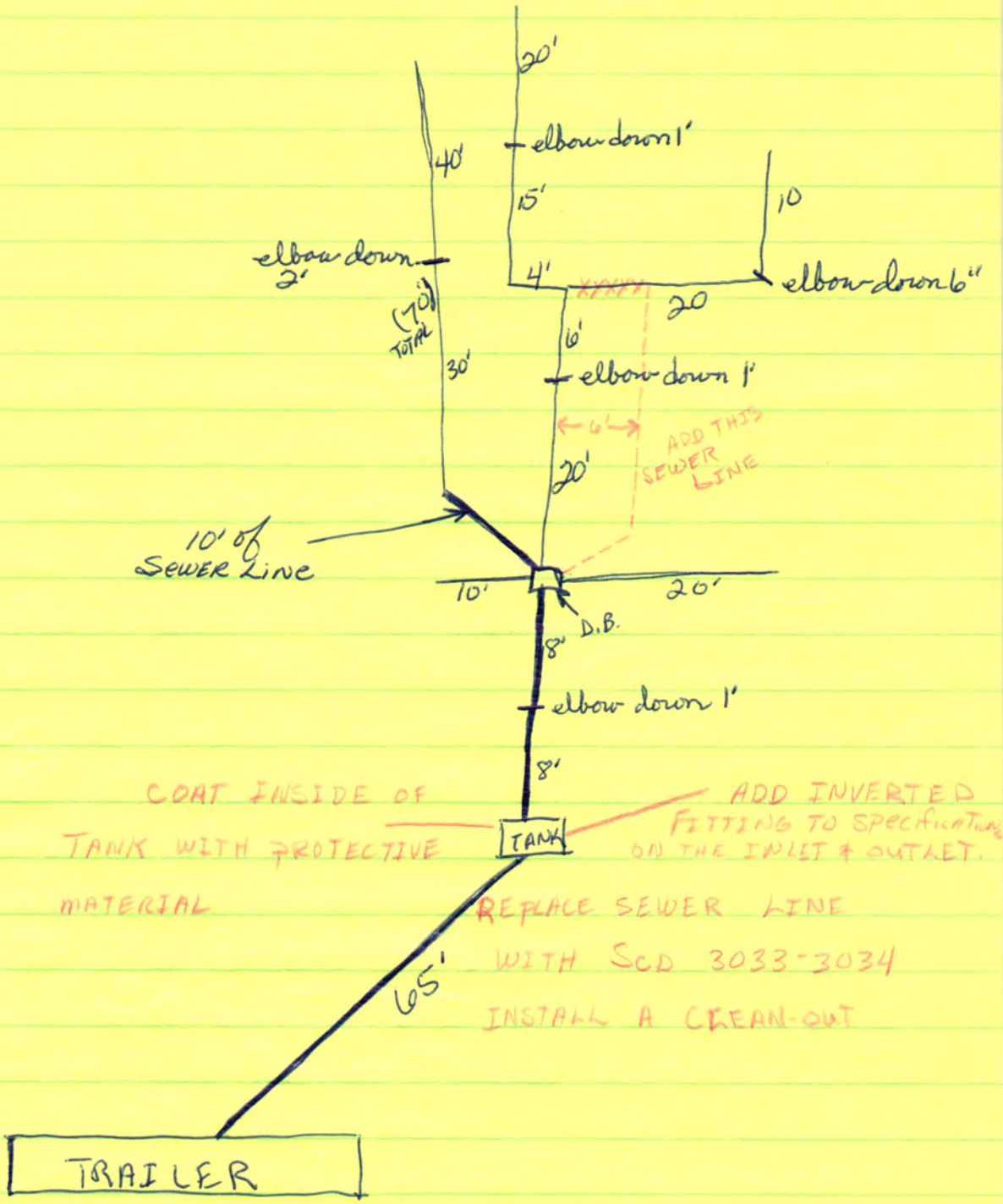
REVIEWING ACTION

Remarks: _____

Date: May 10, 1983

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 125 ft.
3. With a Trench Width of 36 in.
4. Total Area of Lateral needed 375 sq.ft.

Jerrold E. Hood
Signature of Reviewing Official


20'
elbow down 1"
40'
15'
10
elbow down 2"
4'
elbow down 6"
20
(70' TOTAL)
16'
30'
elbow down 1'
6'
ADD THIS SEWER LINE
20'
10' of SEWER LINE
10'
20'
D.B.
8'
elbow down 1'
8'
COAT INSIDE OF TANK WITH PROTECTIVE MATERIAL
TANK
ADD INVERTED FITTING TO SPECIFICATIONS ON THE INLET & OUTLET.
REPLACE SEWER LINE WITH SCD 3033-3034
INSTALL A CLEAN-OUT
65'
TRAILER
Pit
well

971118002

Lincoln-Lancaster County Health Department

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

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

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 $150.00. Allow two weeks for processing. Incomplete information will delay processing.

CR 3479

Legal Description of Property: Street Address S.W. 92nd ST.

Twp 9N Range 5E Section 28 1/4 ___ 1/4 ___ Block ___ Lot 23 Addition ___

Directions to Property South of Denton on paving, past rr tracks, 3rd home on west side

Location of Well By clothes line Tap Location: Inside ☐ Outside ☐

Location of Sewage System South of house Year Installed 1983

CR 26379
ACR 70935

	NAME	ADDRESS	PHONE
Present Owner:	James A Howerton	SW. 92nd ST	
Tenant/Buyer:	Marvin Russell		
Return to:	Cliff Rigg	3201 Pioneers	434 3600

Signature of Applicant Marvin D. Russell Address R2, Box 71 Sterling, NE 68443 Date 10/22/97

ACR 70935

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 10/21/97
Initials ___
Amount 150.00
Check No. 1891

DATA ENTRY

Date ___/___/___
Case No. ___
Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 10/22/97

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☒
Bacteria	☒ 0 /ml	☒ 3 /ml
Nitrate	☒ <0.1 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☒
Disapproved	☐

Additional Site Visits

Date 10/5/97 by L.C.H.
Date 11/13/97 by L.C.H.
Date 11/14/97 by L.C.H.

Comments: WELL HEAD IS PLASTIC ABOVE GROUND. CHECK FOR PERMIT ON SEPTIC SYSTEM. Well head replaced. 11/5/97 L.C.H.
11-12-97 Chlorine detected in water supply. CAN FIND NO EVIDENCE THAT SEPTIC PERMIT WAS ISSUED BUT ALL EVIDENCE IS THAT TERRY LYMAN, A NOW FORMER EMPLOYEE OF THE HEALTH DEPARTMENT INSPECTED THE INITIAL INSTALLATION. NO EVIDENCE OF MALFUNCTION. HENCE APPROVAL IS PROVISIONAL. ☐ See Attached Letter

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 11/17/97

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: 10-95

'97 NOV 6 PM 1:13

REPORTED

'97 NOV -5 P1:53

RECEIVED

COMPLETE INFORMATION BELOW

WATER MICROBIOLOGY

STATE LAB NO 1

FOR LABORATORY USE ONLY

DATE COLLECTED 11 (MO.) 5 (DAY) 97 (YEAR) 1:30 p.m. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION JAMES HAVERTON

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NE SECT 28 TWNSHP 9 N RANGE 5 E

TEST METHOD: X MEMBRANE FILTER

COLIFORM PURITY TEST FOR DRINKING

TOTAL COLIFORMS 3 PER 100

☐ THE WATER MEETS BACTERIOLOGICAL STANDARD

X ☒ 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

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

TEST(S) BY LB

FOR ACCOUNTING USE ONLY

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

LWB 96

OCT 24 1997

WATER CHEMISTRY

STATE LAB NO. 157-8785

FOR LABORATORY USE ONLY

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 VER
FOR ACCOUNTING USE ONLY

LWN 88

COMPLETE INFORMATION BELOW

DATE COLLECTED 10 (MO.) 22 (DAY) 97 (YEAR) 11:55 A.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION JAMES A. HAVERTON

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NE SECT 28 TWNSHP 9 N RANGE 5 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

97 OCT 23 PM 3 20

REPORTED

RECEIVED

WATER MICROBIOLOGY

STATE LAB NO 1425089

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 JB
FOR ACCOUNTING USE ONLY

LWB 96

COMPLETE INFORMATION BELOW

DATE COLLECTED 11 (MO.) 13 (DAY) 97 (YEAR) 12:22 P.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION JAMES HOWERTON

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NE SECT 28 TWNSHP 9 N RANGE 5 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE
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

97 NOV 14 PM 12 14

REPORTED

97 NOV 13 PM 3 42

RECEIVED

WATER MICROBIOLOGY

STATE LAB NO 1425126

COMPLETE INFORMATION BELOW

FOR LABORATORY USE ONLY

DATE COLLECTED 11 (MO.) 14 (DAY) 97 (YEAR) 11:55 AM (HOUR)

SAMPLE COLLECTED BY JERROLD HOOP

SAMPLE LOCATION JAMES HOWERTON

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NE SECT 28 TWNSHP 9 N RANGE 5 E

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

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

TEST(S) BY

FOR ACCOUNTING USE ONLY

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

LWB 91

RECEIVED '97 NOV 15 AM 4 03

REPORTED