Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE SYSTEM REPAIR
COST < $400--NO FEE REQUIRED

Permit # 02390072701

Issued 06/25/02
Expires 12/25/02
Revenue Code 3157

Establishment

JOEL GROSS
T9N R6E SEC 3
4130 SW 2 ST

FEES:

TOTAL: $.00

Permittee

JOEL GROSS
4130 SW 2 ST
LINCOLN NE 68522

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002540

023900727

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☒ Municipal Code 24.38 ☐ County Resolution Number 2832

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☐ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 9N Range 6E Section 3 1/4 Section _____
   Block _____ Lot _____ Addition _____
   Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address 4130 SW 2nd Lincoln NE 68522

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 2 Describe _____

3. **Type of Present Individual Disposal System** ☒ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** infiltrator System

5. **Work to be done by:** ☒ owner ☐ contractor's name _____

6. **Estimated project:** (a) Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Joel Gross Address 4130 SW 2nd Phone 402-421-8241
Applicant Signature (owner or lessee) JG

Please include the permit fee ($100) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 6/24/02 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Wood

Site visits
Date 06/24/02 By DS
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 07/10/02 By DS

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 06/25/02 Amount 0 Check No. NA Initials LO

White - Division Copy Pink - Business Office Revised 9/00

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

B

Permit Number: 02390072

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 4130 SW 2nd (no rural route) City Lincoln NE NE, Zip 68522

Owner Joel Gross Addresss Same

Soil Type (SCS): _____ Percolation Rate: _____ min./inch

Date of Tests 6/22 to 6/23 Weather: Precipitation None Temperature 90 is L

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	24"	6-22	7:45	6:22	12:45	6/23	9:14	14	6/23	6/30	16	4	16/9
2							9/5	15		6/31	16	4	16/7
3							9/6	13		6/32	16	4	16/4
4							9/7	12		6/33	16	5	16/5
5							9/8	21		6:34	16	5	16/5
6							9/9	18		6:35	16	5	16/6

Person Conducting Percolation Tests

Name: Joel Gross

Phone: 402-421-8241

Address 4130 SW 2nd
Lincoln NE 68522

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

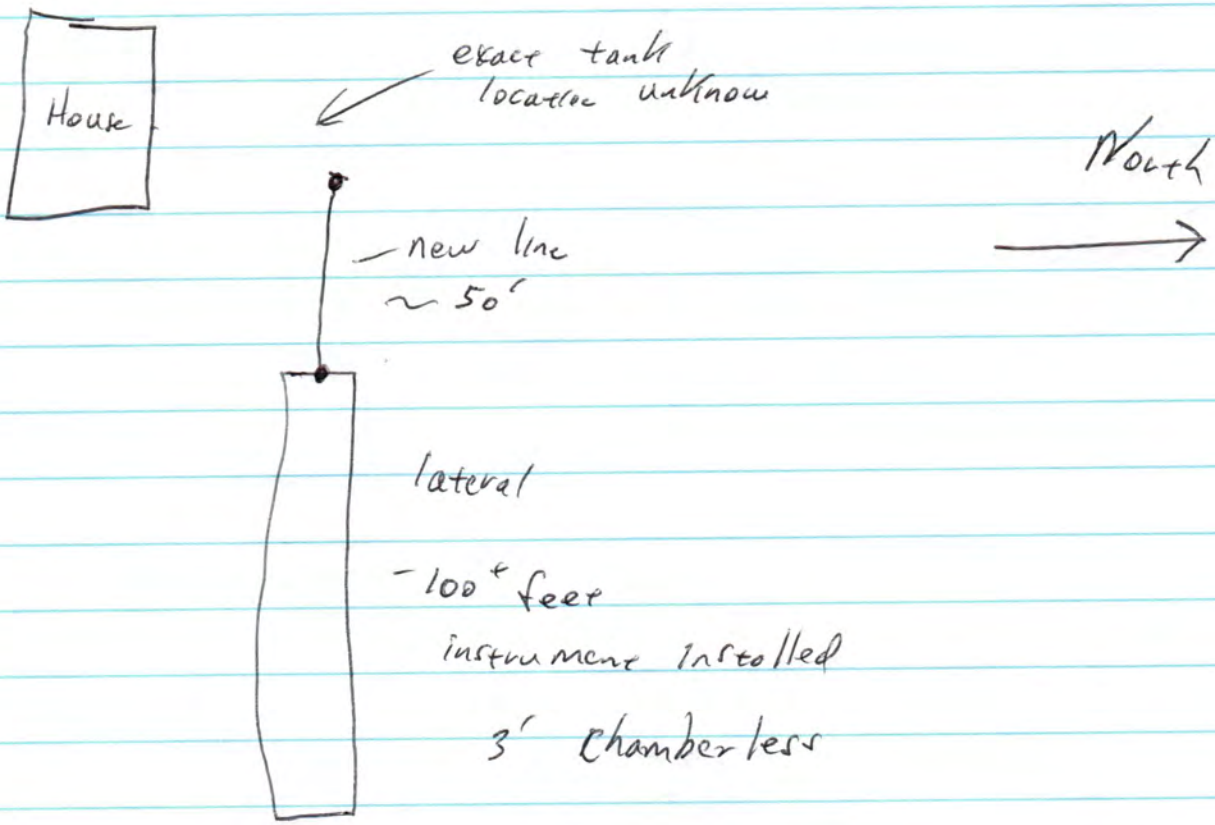
Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

4130 SW 2nd

SW 2nd



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) ~~471-7000~~ 471-8023 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

This form must be completed and returned to request

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County

☒ Evaluation of the Individual Water System Date: Oct 23 1992 #

☒ Evaluation of the Sewage Disposal System ☐ Enclosed is ~~$75.00~~ 150

Legal Description of Property: TWP. 9N; RANGE 6E; SECTION SE¼ S3; BLOCK ___

LOT 11; ADDITION _____; Street Address 4130 SW 2nd Street

Directions to Property Proceed to SW 2 - turn North (Brick house on right hand side of road w/ orange signs in front of it

Location of Well East side of house Tap Location: Inside ☒ Outside ☒

Location of Sewage System Back side of house Year Installed ?

	NAME	ADDRESS	PHONE
Present Owner:	Joyce L. Schaback	4130 SW 2nd Street	423 0922
Tenant/Buyer:			
Return to:	Mimi Cotton	#3737 So 27 St	4320227

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

Signature of Applicant Mimi Cotton Address 3737 So 27 St 68502

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HEALTH DEPARTMENT USE ONLY $150.00

Date Received OCTOBER 23, 1992 Received ~~$75.00~~ Check ☐ Cash ☒

PRELIMINARY STATUS--DATE OCTOBER 23, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:	SITE VISIT:
Construction	☐	☒	Approved: ☐	Date 10/23/92 by L.C.H.
Bacteria	☒ 0.0 12/24/92	☐	Provisional: ☒	Date 12/2/92 by L.C.H.
Nitrate 5.3ppm	☒	☐	Disapproved: ☐	Date 12/22/92 by L.C.H. Doc mgt Cate

Comments: WELL AND SEPTIC SYSTEM ARE TOO CLOSE TOGETHER. WELL IS IN A BELOW GROUND ROOM OFF OF THE BASEMENT. No SANITARY SEAL ON WELL CASING. New well dug old well abandoned 12/2/92 L.C.H. Septic tank in front abandoned 12/22/92. SEPTIC SYSTEM PREDATES REGULATIONS HENCE PROVISIONAL APPROVAL. NO EVIDENCE OF MALFUNCTION See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Doug Amsel DATE 12/24/92

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

Lincoln-Lancaster County He[illegible] Department

3140 "N" Street, Lincoln, Nebraska 6851[illegible]

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER/LOAN A[illegible]

This form must be completed and returned 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.

☐ Evaluation of the Individual Water System ☐ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 4130 SW 2nd

Twp 9N Range 6E Section 3 1/4 ___ 1/4 ___ Block N ½ Lot 11 Addition Love's

Directions to Property Hwy 2 West to Pioneers West on Pioneers to South West 2nd turn north - 2nd house on the right

Location of Well West of House Tap Location: Inside ☐ Outside ☒

Location of Sewage System North, East Corner of House - 6 years Year Installed 1995

	NAME	ADDRESS	PHONE
Present Owner:	Tom T. + Lisa H. Co Hon	4130 Southwest 2nd Lincoln, NE 68522	423-7180
Tenant/Buyer:	Joel C. + Lori H. Gross	411 North Bell Lincoln, NE 68528	475-2972
Return to:	State Title Services, Inc.	PO Box 85355 Lincoln, NE 68501	434-5020

FIRST FEDERAL KAREN HAHM 473-6100 FAX

Signature of Applicant Joel Gross Address 1111 Old Cheney Date 5/3/95

HEALTH DEPARTMENT USE ONLY

Date Received 5/8/95 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Jerrold Hood **DATE:** 5/9/95

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☐	Approved ☐	Date 5/10/95 by J.C.H.
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date 5/11/95 by J.C.H.
Nitrate	☒ 1.0 ppm	☐ ___ ppm	Disapproved ☒	Date ___/___/___ by ___

Comments: SLIGHT LEAK AT END OF LATERAL. 5/10/95 Not at end but in middle. J.C.H. 5/11/95 Repairs Made by J.C.H. PROVISIONAL APPROVAL ON SEWAGE SYSTEM BECAUSE IT PREDATES REGULATIONS AND INSPECTIONS. See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 5/12/95

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.