# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

## PERMIT

Permit
SEWAGE INSTALLATION

No. 93380098701

Issued 05/11/93
Expires 11/11/93
Revenue Code 18754

Establishment
JEFF LAMBERT
T9N R6E SEC 10
LOT 44
5500 S FOLSOM STREET

FEES: $150.00

TOTAL $150.00

Permittee
JEFF LAMBERT
4440 S 57 ST
LINCOLN NE 68516

Issued By M. Jane Ford
Health Director

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

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: 471-7800

A

FILING FEE: $ 150.00

FILE NO. _____

DATE: 5-10-93

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:

1. Legal description of property: Twp. 9 North; Range 6E; Section 10;
   Block _____: Lot 44 I.T.: Addition S.E. 1/4
   Street Address 5500 So Folsom

2. Property Use: Residential ☒; Commercial ☐ Other Use ☐
   No. of Bedrooms 3. Describe _____

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

4. Distance to public sewer: ? ft.

Signature of Applicant (Owner or Lessee)

4440 South 57th Street
Address

(Do not write below this double line) 68516

1. Health Department: Date Rec'd. 5/10/93. Date Frwd. 5/11/93. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5/11/93. Date Frwd. 5/11/93. ACTION: Approved ☒ Disapproved ☐ Signature: Gary Spin
3. City or County Engineer: Date Rec'd. 5-11-93. Date Frwd. 5-11-93. ACTION: Approved ☒ Disapproved ☐ Signature: KD Mahrt

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 9-17-93 by: P.D.
Date: 9-21-93 by: P.D
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-22-93 By: Paul Hagman

FORM 23-43

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 9N ; Range 6E ; Section & ¼ Section SE 15.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: 5-3-93 to 5-4-93 . Weather: Precip. 0 Temp. 60°.

Test Taken At W. Old Cheney Rd And Folsom St. 1/10 mi. No. East Side

OWNER: Jeff Lambert
Address: 4440 S. 57th Lincoln, NE. 68516
489-7698

5100 - 1084

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" | 5-3 | 5:30 pm | 5-4 | 5:30 pm | 5-4 | 5:30 pm | 6" | 9:30 pm | 4¼" | 30m | 1¾" | |
| 2 | 36" | 5-3 | 5:30 pm | 5-4 | 5:30 pm | 5-4 | 5:30 pm | 6" | 9:30 pm | 4½" | 30m | 1½" | |
| 3 | 36" | 5-3 | 5:30 pm | 5-4 | 5:30 pm | 5-4 | 5:30 pm | 6" | 6:00 pm | 6" | 30m | 0" | |
| 4 | 36" | 5-3 | 5:30 pm | 5-4 | 5:30 pm | 5-4 | 5:30 pm | 6" | 6:00 pm | 6" | 30m | 0" | |
| 5 | 36" | 5-3 | 5:30 pm | 5-4 | 5:30 pm | 5-4 | 5:30 pm | 6" | 9:30 pm | 4⅜ | 30m | 1⅝" | |
| 6 | 36" | 5-3 | 5:30 pm | 5-4 | 5:30 pm | 5-4 | 5:30 pm | 6" | 9:30 pm | 4½" | 30m | 1½" | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Mike Hoagland
Signature of Person Conducting Test

Address 2700 Dawn Ave. Lincoln Phone 464-0638
Precast Products Inc.

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: May 7, 1993

Approved Percolation Rate (a)
A. 28 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

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

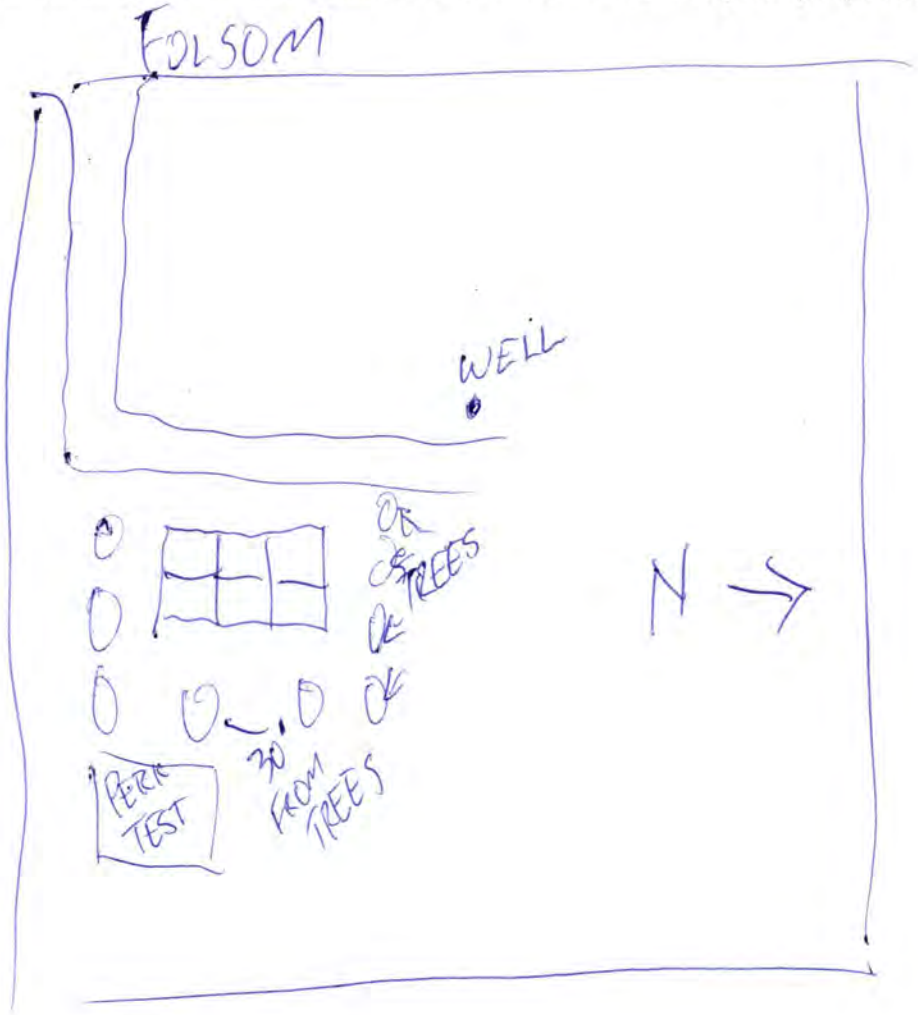
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

**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.




REVIEWING ACTION

Remarks: _____

Date: May 10, 1993

Minimum Design Requirement
1. Capacity of Septic Tank 1250 gals.
2. Total Length of Laterals 181 ft.
3. With a Trench Width of 48" in.
4. Total Area of Lateral needed 724 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

@ 4' requires 242' of Lateral

FORM 20104-0477
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
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**D**

DATE: _____

FILE NO. _____

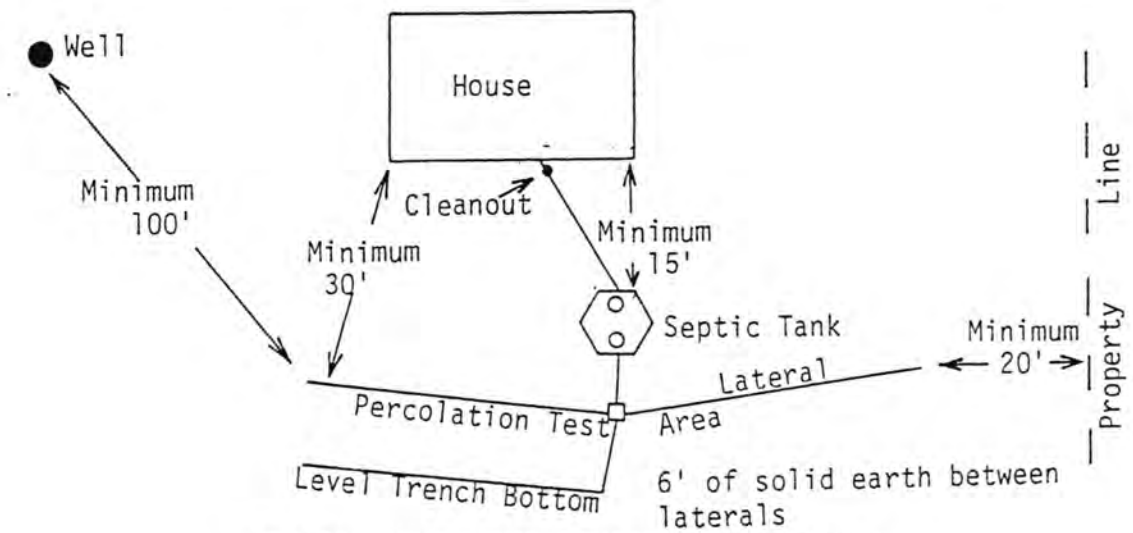
## SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Class 160 PVC Diameter 4 in.
2. Distance above basement floor — in., or below basement floor 18 in.
3. Distance between dwelling and septic tank 60 ft.
4. Number of clean-outs 1.
5. Distances to:
   Well or Suction Line _____ ft.; Stream — ft.; Pressure Line _____ ft.; Property Line 25' ft.

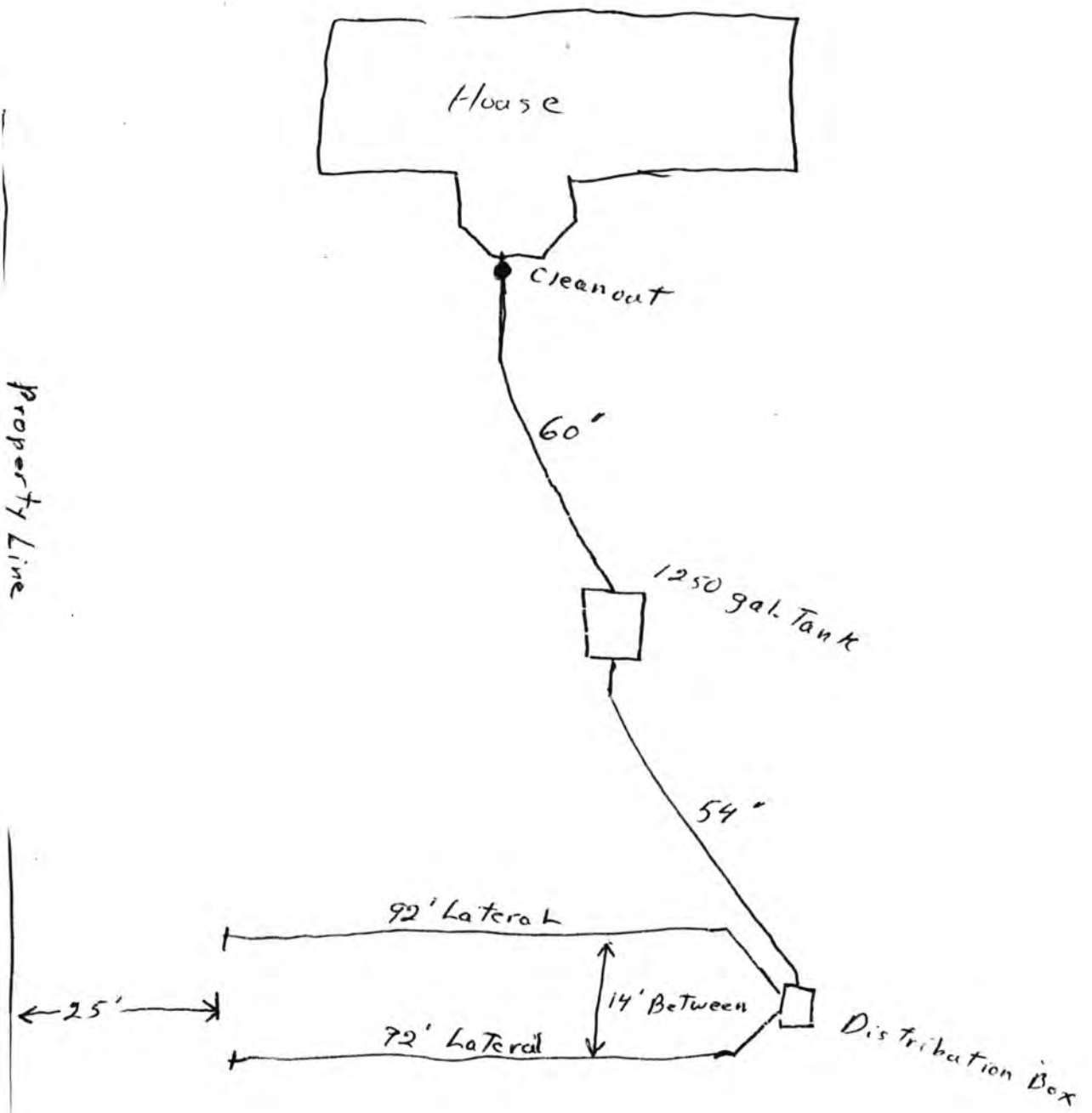
B. SEPTIC TANK:
1. Material concrete; No. of compartments 1.
2. Capacity 1250 gals.;
3. Factory Built: Yes ☒ No ☐
   (Company Precast)
4. Manholes: Over Inlet; diam. 8 in.
   Over Outlet; diam. 8 in.
   Riser Above ☐ Below ☒ Grade 10 in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 24 in.
8. Distances to:
   Well or Suction Line 200 ft.; Stream — ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Concrete; Number - available outlets 5.
2. Factory Built: Yes ☒ No ☐
   (Company Precast)
3. Distance from Septic Tank 54 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
   Diameter of Half Round 20" or Perforated Pipe _____.
   Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other _____.
2. Lateral Lines:
   Number 2; Length of each line 92, 92, _____, _____, _____ ft.;
   Total length of laterals 184 ft.;
   Distance between lateral lines 14 ft.
3. Trench dimensions: Width 4 ft.;
   Slope 9" in/100 ft.; Average Depth 39 in.
4. Filter Material: gravel
   Depth of Material 24" in.
5. Distances to:
   Well or Suction Line _____ ft.; Stream — ft.; Pressure Line _____ ft.; Property Line 25' ft.




TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


North
House
Cleanout
60'
1250 gal. Tank
54'
92' Lateral
14' Between
25'
72' Lateral
Distribution Box
Property Line

# 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.

Legal Description of Property: Street Address 5500 S Folsom St Lincoln NE

Twp 9 Range 6 Section 10 1/4 SE 1/4 Block ___ Lot 44 Addition LINCOLN LANCASTER CTY NE

Directions to Property 1st house north of Old Chevy on Folsom St East Side, Sits back off of the Road

Location of Well Located by SM Bldg NW of house Tap Location: Inside ☐ Outside ☒ By Mobile Bldg.

Location of Sewage System East Side of House Year Installed 1993

| | NAME | ADDRESS | PHONE |
|---|---|---|---|
| Present Owner: | Richard Watheye | 5500 S Folsom St Lincoln, NE 68523 | 402-420-7382 |
| Tenant/Buyer: | Adam + Lynn Ostrem | 8990 Co. Rd. 37 Blair, NE 68008 | 402-533-8293 |
| Return to: | Jim Thomas Home Realtime | 4444 O St Lincoln, NE 68510 | 402-432-4414 |

Signature of Applicant John Thomas Address 4444 O St Lincoln, NE 68510 Date 10/26/99

### HEALTH DEPARTMENT USE ONLY

**RECEIVED**

Date 10/28/99
Initials lo
Amount 150.00
Check No. 3101

**DATA ENTRY**

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

**PRELIMINARY STATUS--By** John Thomas **DATE:** 11/1/99

| WATER SYSTEM: | Approved | Disapproved |
|---|---|---|
| Construction | ☑ | ☐ |
| Bacteria | ☑ 0 /ml | ☐ ____ /ml |
| Nitrate | ☑ .7 ppm | ☐ ____ ppm |

**SEWAGE SYSTEM**

Approved ☑
Provisional ☐
Disapproved ☐

**Additional Site Visits**

Date ___/___/___ by ___
Date ___/___/___ by ___
Date ___/___/___ by ___

**Comments:** If the septic tank has not been pumped recently it should be checked to see if it is necessary.

See Attached Letter ☐

**FINAL STATUS**

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

Approved by John Thomas Date 11/4/99

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

1/-1 P8340-17