CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 290

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — February 10, 1972

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

Richard E. Reeves — 1611 Susan Circle

LICENSEE OR PERMITTEE — ADDRESS

T9N; R6E; Sec. 16; Bl. 3; Lot 7; Gateway Western Estates —

NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: Non-Transferable

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
110.15 624-1535	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

FORM HD-32(67) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 290

DATE: _____

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N; Range 6E; Section 16;
Block 3; Lot 7; Addition Western Estates
Street Address 16TH STREET.

2. Property Use: Residential ____ [X]; Commercial ____ [ ]
No. of Bed Rooms 3 Describe: _____
Other Use None [ ]
Describe: _____

3. Type of Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Plans and Specifications of Proposed System. (See FORM HD-32a(67) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT, attached hereto.)

Richard E. Keever
Signature of Applicant (owner or lessee)

1611 Susan Circle, Lincoln
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 30.00

2. Date Site Clearance _____

3. Site Visits:
Date: 4/13/73 by: L. N.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 8/10/72
by: Jerrold C. Hood

5. BUREAU OF LICENSES & PERMITS
Date Notified: _____
Date Issued: _____ Serial _____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 4/13/73 by: Jerrold C. Hood

FORM HD-30(67) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 290

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described herein:

1. Legal description of property: Twp. 9N; Range 6E; Section 16;
Block 3; Lot 7; Addition GATEWAY Western Estates
Street Address SIXTEENTH STREET.

2. Property Use: Residential YES ☒; Commercial _____ ☐
No. of Bedrooms 3. Describe: _____
Other Use NONE ☐
Describe: _____

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

4. Distance to public sewer: 2 MILES ft.

Richard E. Rowe
Signature of Applicant (owner or lessee)

1611 SUSAN CIRCLE, LINCOLN
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/10/72. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 8/10/72. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 8-10-72. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 8-10-72 Signature: Chas Seals BS

3. City Engineer: Date Rec'd. _____. ACTION: Approved ☐ Disapproved ☑
Date Frwd. 8-10-72. Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

FINAL ACTION ON SITE CLEARANCE: Approved ☒ Disapproved ☐

Date Applicant Notified: 7-13-73 Signature James

FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 290

PROPERTY WHERE SOIL TESTED:
Location: Township 9N Range 6E
Section & ¼ Sect. 16
Property Dimensions: 502 ft. x 230 ft.
Area: 3.5 acres. (Attach sketch of property showing hole location).

Owner: BRIAN BLOUET
Address SOUTH 14TH STREET LINCOLN, 1

Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: August 9, 1972 to August 10, 1972 Weather: Precip. WET Temp 60° F.

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				
Hole 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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	28"	8-9	3:55	8-9	6:05	8-10	9:00	4"	8:30	4"	30	1"	30
2	30"	8-9	3:55	8-9	6:05	8-10	9:00	5½"	8:30	4"	30	2"	15
3	30"	8-9	3:55	8-9	6:05	8-10	9:00	5½"	8:30	4"	30	2"	15
4	30"	8-9	3:55	8-9	6:05	8-10	9:00	5½"	8:30	4"	30	2"	15
5	30"	8-9	3:55	8-9	6:05	8-10	9:00	5½"	8:30	4"	30	2"	15
6	30"	8-9	3:55	8-9	6:05	8-10	9:00	4"	8:30	4½"	30	1½"	22½

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

Robert E. Rasor
Signature of Person Conducting Test

Address 1611 Susan Circle, Lincoln
Phone: 488-5108

(Do not write below this line)

REVIEWING ACTION

REMARKS:

Approved Percolation Rate(s)
A. 17 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: August 10, 1972

Gerrold C. Hood
Signature of Reviewing Official

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 290

SPECIFICATIONS

DATE: _____

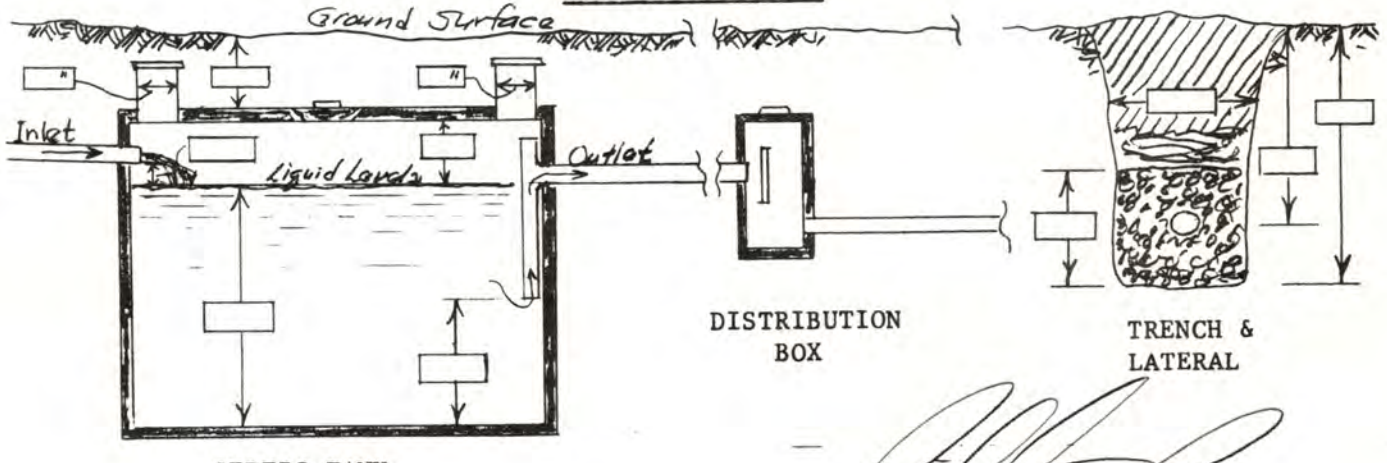
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank 30 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments _____.
2. Capacity _____gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

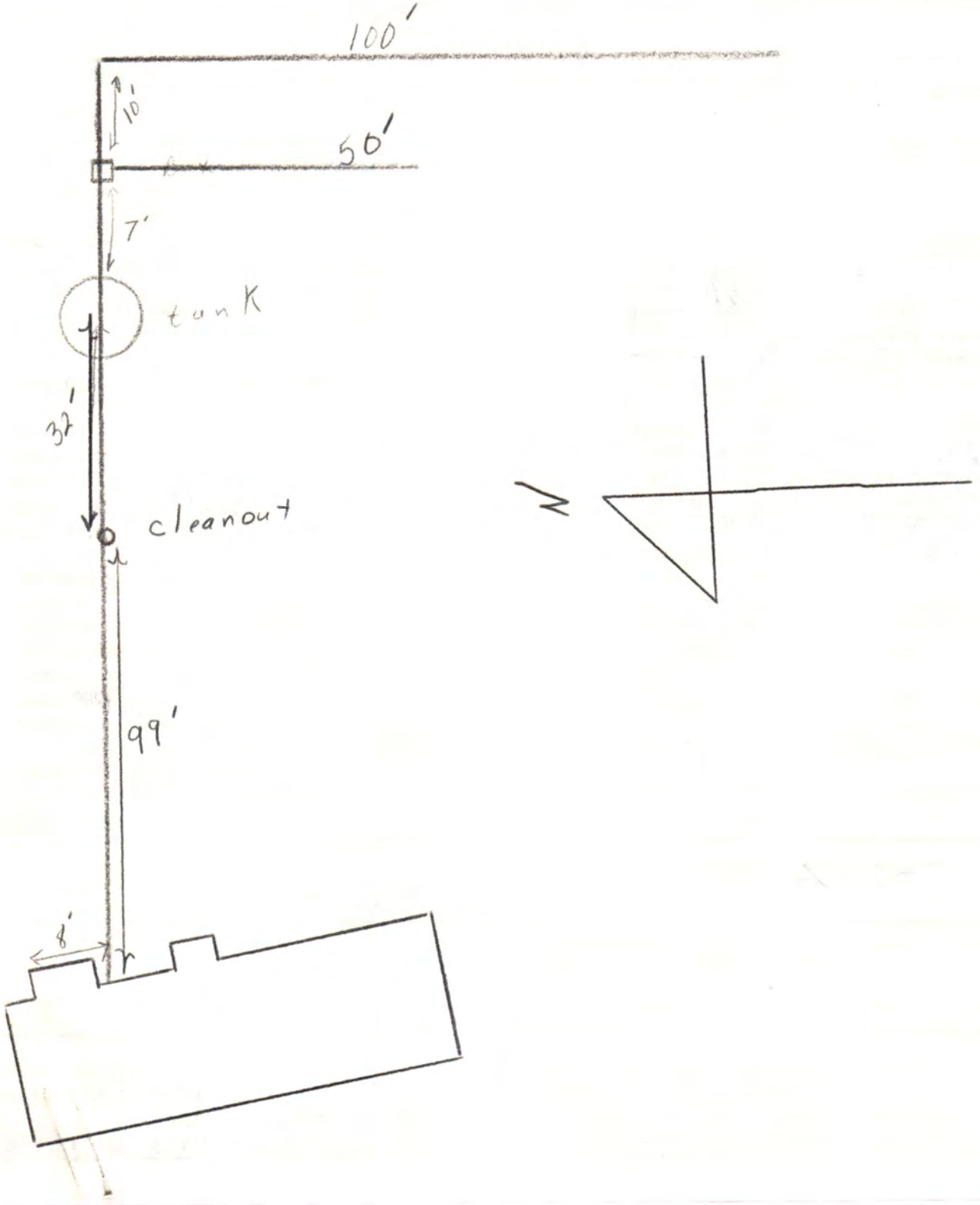
C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____)
No ☐
3. Dimension: Length ____in.; Width ___in.
Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: half moon
2. Lateral Lines: Depth below grade 6 in.
Number 2; Length of each line 50 ft
Total length of Laterals 149 ft.;
Slope ____in/100 ft. Diameter of pipe ____ in.; Shape half moon
Material: concrete ☐; fiber ~~asbestos~~ ☒; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.;
Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



John E. Reeves
Signature of Applicant


100'
10'
50'
7'
tank
32'
cleanout
99'
8'
N

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

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

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 11-30-89

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $75.00 #150.00

Legal Description of Property: TWP. 9N; RANGE 6E; SECTION 16; BLOCK 3

LOT 7; ADDITION GATEWAY WESTERN ESTATES; Street Address 6705 S.W. 16th L.L.C.N

Directions to Property GO TO 14th & OLD CHENEY, CONT. WEST ON OLD CHENEY, CROSS THE BY PASS CONTINUE TO PAVED ROAD - TURN SOUTH ~~GO~~ GO ABOUT ¼ MILE, TURN RIGHT, I BELIEVE ON WESTRIDGE ROAD, GO ABOUT ¼ MILE, THEN TURN SOUTH GO ABOUT A BLOCK OR SO, HOUSE WILL BE TO RIGHT, WITH A "HOME" REALTY SIGN

Location of Well ? Tap Location: Inside ☐ Outside ☐

Location of Sewage System ? Year Installed 1973

	NAME	ADDRESS	PHONE
Present Owner:	?		
Tenant/Buyer:	Rodney OYER	1029 GALLOWAY AV	
Return to:	"	"	

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

Signature of Applicant Paul Elgert agent Address 6105 "O" St.

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HEALTH DEPARTMENT USE ONLY #150.00

Date Received 11-30-89 Received ~~$75.00~~ Check ☒ Cash ☐

PRELIMINARY STATUS--DATE DECEMBER 4, 1989

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 12/4/89 by CH
Bacteria	☒	☐	Provisional:	☐	Date _____ by ____
Nitrate	☒	☐	Disapproved:	☐	Date _____ by ____

Comments: IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY (AND IT DOESN'T APPEAR TO HAVE BEEN) IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Charles E. Hood, R.S. DATE DECEMBER 7, 1989

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

C OLL 10/15/99
P 12220-14

99 102 1002 ldf

Lincoln-Lancaster County Health Department

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

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

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

LCR 869

Legal Description of Property: Street Address 6705 S.W. 16th & Lincoln, NE 68523-9233

Twp 9N Range 6E Section 16 1/4 ___ 1/4 ___ Block 3 Lot 7 Addition Gateway Western Estates LLCN

Directions to Property ¼ mile North SW 16th & West Denton Rd

Location of Well S.W. of House Tap Location: Inside ☐ Outside ☐

Location of Sewage System N east of House Year Installed 1972

	NAME	ADDRESS	PHONE
Present Owner:	Rodney Dreyer	6705 S.W. 16th 68523	423-8668
Tenant/Buyer:	Steve Kim McKay	4144 S. 48th Lincoln, NE	483-4441
Return to:	Cheryl Oldham (State Title)	1023 Lincoln Mall Lincoln, NE 68508	434-5039

Signature of Applicant Steve McKay Address 4144 S. 48th Lincoln, NE Date 10/14/99

HEALTH DEPARTMENT USE ONLY

Date Received 10/14/99 ✓ Received $150.00 ✓ Check ☒ #1453 Cash ☐

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 10/15/99

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☒	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ 2.6 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: IF THE SEPTIC TANK HAS NOT BEEN DUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 10/20/99

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.