LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 91380071401

Issued 06/10/91
Expires 12/10/91

ESTABLISHMENT

FRAN THOMPSON
T9N R6E SEC 19
YANKEE HILL LAKE 1ST BLK 2 LOT 7

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

FRAN THOMPSON
2732 KIPLING CI
LINCOLN NE 68516

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
6/13/91	PAID

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

RECEIVED JUN 0 7 1991

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: 6-3-91

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 6 East; Section 19;
Block 2: Lot 7: Addition 1st Addition YANKEE HILL LAKE
Street Address S.W. Hunters Place & W. Deercrest Drive. SUBDIVISION

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.

Ivan Thompson
Signature of Applicant (Owner or Lessee)

2732 Kipling Circle
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/10/91. Date Frwd. 6/10/91. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 6-10-91. Date Frwd. 6-10-91. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bauma

3. City or County Engineer: Date Rec'd. 06/10/91. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Floyd Wiemers

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10/18/91 by: D.E.H.
Date: 10/18/91 by: J.C.N.
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11/8/91 By: Jerrold C. Nood

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 9 ; Range 6 ; Section & ¼ Section 19 NW
Property Dimensions: 386 ft. x 457 ft. Area: 3.02 acres. (Attach appr. Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 5-30-91 to 5-31-91 . Weather: Cloudy Precip. TRACE Temp. 86 .

OWNER: James Ryan, & Frances A Thompson
Address: 2732 Kipling Circle
Lincoln, Ne. 68516

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	5-30-	11:00 AM	5-31	11:30	5-31	11:30 AM	24	12:00	24½	30 min	½	
2										24¾		¾	
3										24⅞		⅞	
4										24¾		¾	
5										24½		½	
6										24½		½	

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

Eugene L Ryan
Signature of Person Conducting Test

Address Box 77 Denton Ne 68339 Phone 797-3555

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 48 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: June 10, 1991

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 ☒

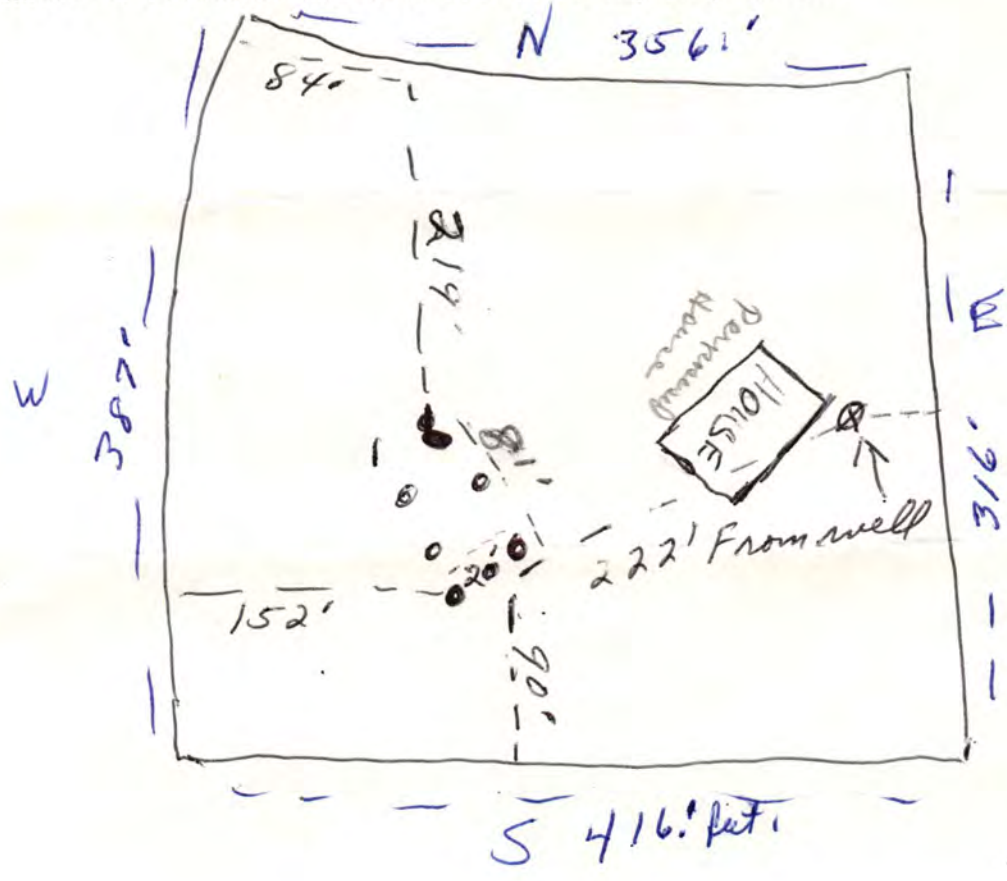
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

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: June 10, 1991

Minimum Design Requirement 1000
1. Capacity of Septic Tank ~~1250~~ gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed ~~1000~~ 916 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

RECEIVED NOV 0 8 1991

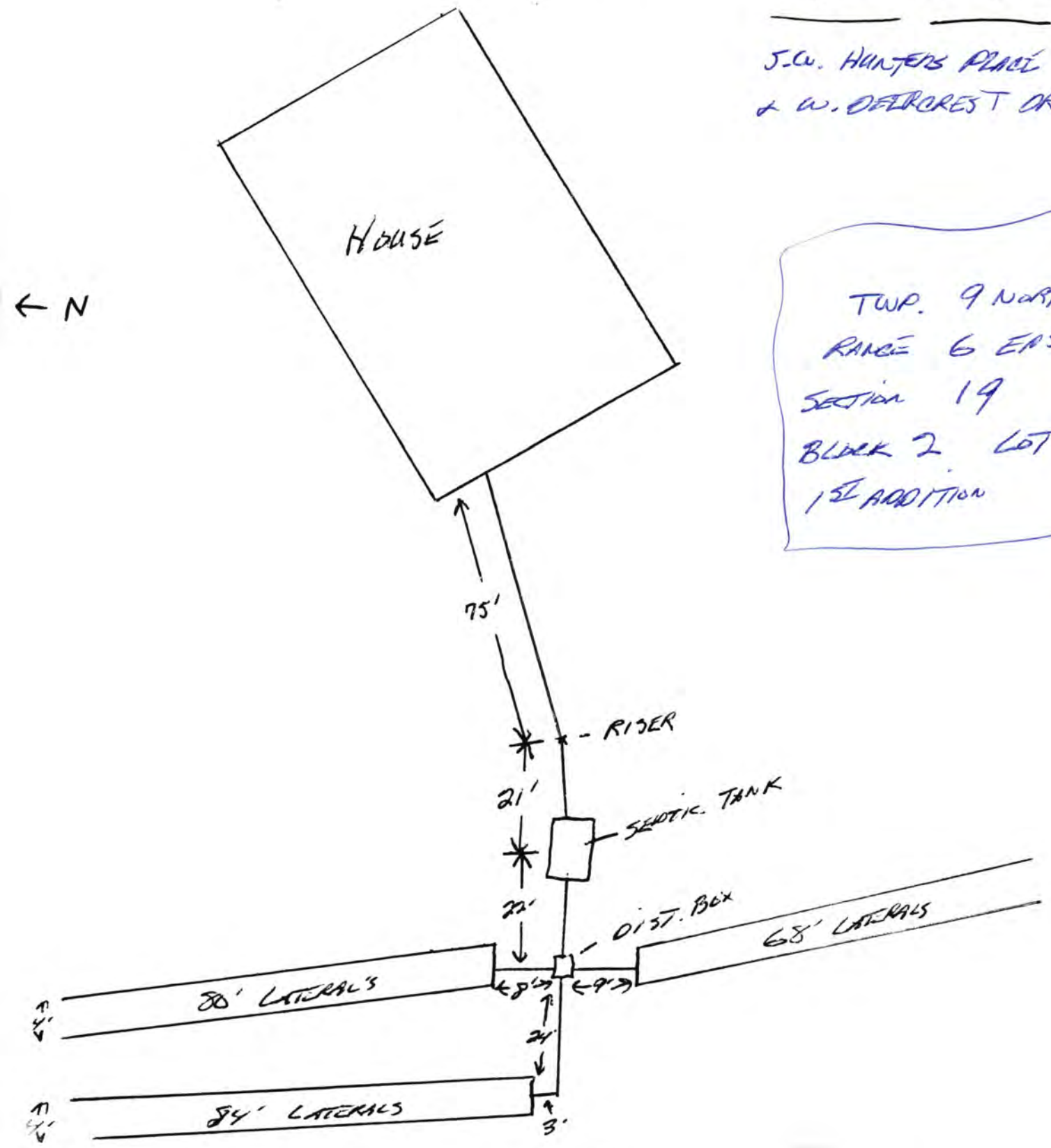
Earnest Pump Co.

WELL DRILLING & REPAIR
P. O. BOX H 400 2ND ST.
MILFORD, NE 68405
(402) 761-2281

RYAN THOMPSON

J.W. HUNTERS PLACE
& W. DEERCREST DRIVE

TWP. 9 NORTH
RANGE 6 EAST
SECTION 19
BLOCK 2 LOT 7
1ST ADDITION



REFINANCING CLOSING DATE: 5/3/93

207

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 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

Legal Description of Property: Street Address 5301 W. Deercrest Drive

Twp 9N. Range 6E. Section 19 1/4 ___ 1/4 ___ Block 2 Lot 7 Addition 1st Addition

Directions to Property West on Denton Rd approximately 3 miles to S.W. 56th St., South on gravel road to top of 1st hill, East into Yankee Hill Estates (house is grey w/3-door garage)

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

Location of Sewage System West side of house (white pipe) Year Installed 1991

	NAME	ADDRESS	PHONE
Present Owner:	J.R. & Fran Thompson	5301 W. Deercrest Drive Denton, NE 68339	797-5301
Tenant/Buyer:			
Return to:	LEADER FEDERAL (Att: Margaret or Linda)	5000 Central Park Dr. - Suite 101 Lincoln, NE 68508	467-5302

Signature of Applicant Fran Thompson Address 5301 W. Deercrest Dr. Date 4 / 21 / 93

Denton, NE 68339

HEALTH DEPARTMENT USE ONLY

Date Received 04 / 22 / 93 Received $150.00 Check ☒ Cash ☐ #2784

PRELIMINARY STATUS--By Jerrold Hood **DATE:** 4 / 23 / 93

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ <01 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 Jerrold C. Hood R.E.H.S. Date 4 / 28 / 93

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.

058

006

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 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

#2899 ☐ 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 5301 W. Deercrest Drive

Twp 9N Range 6E Section 19 1/4 1/4 Block 2 Lot 7 Addition 1st Addition

Directions to Property West on Denton Rd. approx. 3 mi. At SW 56th St turn south on gravel rd. to top of first hill. Turn east into Yankee Hill Estates (house is grey w/3-door white garages)

Location of Well east side of home Tap Location: Inside ☐ Outside ☒

Location of Sewage System west side of home (white pipe) Year Installed 1991

	NAME	ADDRESS	PHONE
Present Owner:	J. Ryan & Fran Thompson	5301 W. Deercrest Dr. Denton, NE 68339	797-5301
Tenant/Buyer:			
Return to:	RESIDENTIAL MORTGAGE SERVICES, INC. - LINCOLN 5635 O STREET LINCOLN, NE 68505		

Signature of Applicant Fran Thompson Address 5301 W. Deercrest Dr. Denton, NE 68339 Date 2/24/94

HEALTH DEPARTMENT USE ONLY

Date Received 12/25/94 Received $150.00 Check ☒ Cash ☐

#2899

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 2/28/94

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☒	Date__/__/__ by____
Bacteria	☒ 0 /ml	☐ ____ /ml	Provisional ☐	Date__/__/__ by____
Nitrate	☒ 0.1 ppm	☐ ____ ppm	Disapproved ☐	Date__/__/__ by____

Comments: NOTE: SPOTTY SNOW COVER AT TIME OF INSPECTION, HEAVY IN PLACES, BARE GROUND IN OTHER PLACES.

See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 3/2/94

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.