CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 1243

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

JUNE 15, 1978 — THIS LICENSE OR PERMIT EXPIRES

Kustom Kreations, Charles Aron, Pres., 1720 S.W. 50th St., Lincoln, NE — LICENSEE OR PERMITTEE / ADDRESS

T9N, R6E, Section 21, Block 7, Lot 4, Addition Ridgewood — NAME OF ESTABLISHMENT, IF ANY / ADDRESS

CLOSED

REMARKS: NON-TRANSFERABLE

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

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

SERIAL NO.	DATE	AMOUNT
624-1535		

APPLICATION

HEALTH

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 1243

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

DATE: 12-14-77

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

1. Legal description of property: Twp. 9N ; Range 6E ; Section 21
Block 7 ; Lot 4 ; Addition RIDGEWOOD
Street Address _____

2. Property Use: Residential ☒ ; Commercial ☐
No. of Bedrooms 4 . Describe: _____
Other Use ☐
Describe: _____

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

4. Distance to public sewer: 3 MILES ft.

KUSTOM KREATIONS LTD by Charles E. Aken President
Signature of Applicant (Owner or Lessee) Builder

1720 S.W. 50th LINCOLN 68532
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 12/14/77. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 12/14/77. Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 12/14/77. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 12/14/77. Signature: Robert Sass

3. City ~~or County~~ Engineer: Date Rec'd. 12-15-77. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 12-15-77. Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL Provisional approval only, experimental system.

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1243

DATE: 12-14-77

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 appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N ; Range 6E ; Section 21 ; Block 7 ; Lot 4 ; Addition RIDGEWOOD .
Street Address .

2. Property Use: Residential [X]; Commercial [ ]
No. of Bedrooms 4
Describe:
Other Use
Describe:

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

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Kaston Kreations Ltd. by Charles E. Horn President, Builder
Signature of Applicant (owner or lessee)

1720 S.W. 50th Lincoln 68532
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 5-15-78 by: jw
Date: 5-17-78 by: jw
Date: by:

3. Date: Approved [X]; Disapproved [ ] 12/14/77
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL*
Date: 5-17-78 by: James Nkevicka

* Provisional approval only experimental system.

(73) 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 474-1541)

FILE NO. 243

PROPERTY WHERE SOIL TESTED:
Location: Township 9N : Range 6E
Section & ¼ Sect. 21
Property Dimensions: ____ ft. x ____ ft.
Area: ____ acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Lot 4 Blk 7 Ridgewood

Owner: David M. and Sharon K. Zeilinger
Address: Lincoln, Nebraska

Dates of Tests: ____ to ____. Weather: Precip. ____ Temp. ____

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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	36"	11-28										0	
2	36"	11-28										0	
3	36"	11-28										0	
4	36"	11-28										0	
5	36"	11-28										0	
6	36"	11-28										0	
												0	

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

Charles E. Olson
Signature of Person Conducting Test

Address 1720 SW 50th
Phone 475-9072

(Do not write below this line)

REVIEWING ACTION

REMARKS: Pawnee Clay Loam (S.C.S.)

DATE: December 14,

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

Gerald C. Hood
Signature of Reviewing Official

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
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: 5-17-78

FILE NO. _____

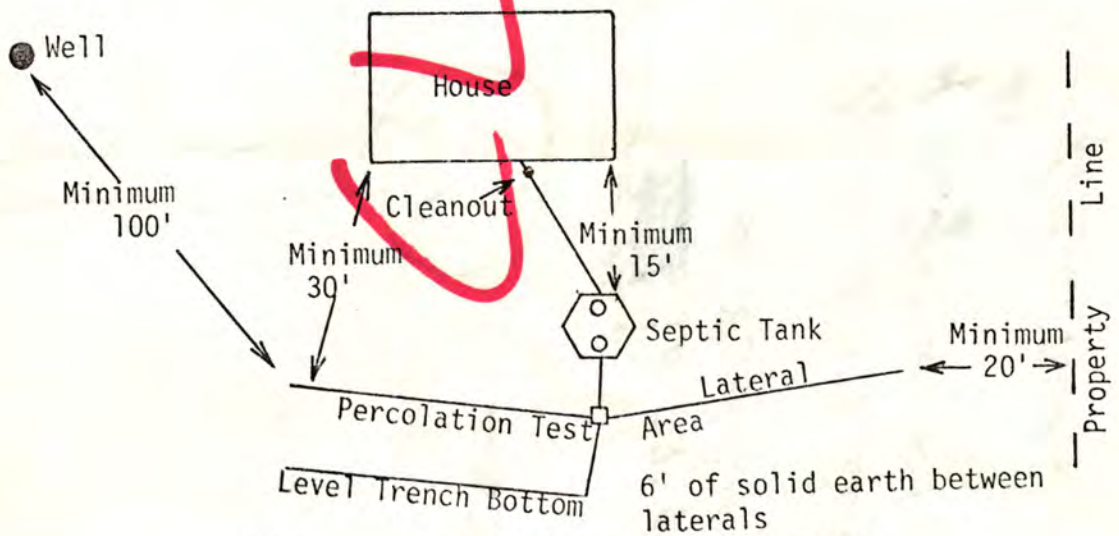
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material CI + Plas; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 121 ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line 90' ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

B. SEPTIC TANK:
1. Material CONCRETE; No. of compartments 1.
2. Capacity 1500 gals.;
3. Factory Built: Yes ☑ No ☐
(Company PRECAST)
4. Manholes: Over Inlet; diam. ____ in.
Over Outlet; diam. ____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☑ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
7. Depth of top of tank below finished grade 12 in.
8. Distances to:
Well or Suction Line 165' ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line 150 ft.

C. DISTRIBUTION BOX:
1. Material CONCRETE; Number - available outlets ____.
2. Factory Built: Yes ☑ No ☐
(Company PRE CAST)
3. Distance from Septic Tank 10 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☑ Perforated Pipe ☐
Diameter of Half Round 12 or Perforated Pipe ____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☑ ; other ____.
2. Lateral Lines:
Number 2; Length of each line 100, 100, ____, ____, ____ ft.;
Total length of laterals 200 ft.;
Distance between lateral lines ____ ft.
3. Trench dimensions: Width 7 ft.;
Slope 0 in/100 ft.; Average Depth 36 in.
4. Filter Material: sand + gravel
Depth of Material 30 in.
5. Distances to:
Well or Suction Line 185 ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line 40 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

001

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 2161 W. WINFIELD

Twp 9N Range 6E Section 21 1/4 ___ 1/4 ___ Block 7 Lot 4 Addition RIDGEWOOD

Directions to Property _____

Location of Well _____ Tap Location: Inside ☐ Outside ☒

Location of Sewage System _____ Year Installed 1978

	NAME	ADDRESS	PHONE
Present Owner:	DAVE & SHARON ZEILINGER	~~2161 W. WINFIELD~~ 8401 S.W. 25 - LINCOLN	423-3019
Tenant/Buyer:	THOMAS E & BARBARA J CLUGSE	3122 Q ST	474-6116
Return to:	COLUMBUS FEDERAL c/o JO LEWIS	770 N. CUTNER SUITE 125 PO BOX 5866 LINCOLN	464-4444

Signature of Applicant Barbara J Clugse Address 3122 Q ST LINCOLN NE 68503 Date 5/11/94

HEALTH DEPARTMENT USE ONLY

Date Received 5/11/94 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Gerald C. Hood **DATE:** 5/12/94

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☐	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☒	Date ___/___/___ by ___
Nitrate	☒ 1.2 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: PROVISIONAL APPROVAL ON SEWAGE SYSTEM BECAUSE IT IS CONSIDERED EXPERIMENTAL. NO EVIDENCE OF MALFUNCTION IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY THEN 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 Gerald C. Hood R.E.H.S. Date 5/16/94

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.

9711112003. RAH.

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 63618

Legal Description of Property: Street Address 2101 W WINFIELD CT 68523.

CR 2534 Twp 9N Range 6E Section 21 1/4 ___ 1/4 ___ Block 7 Lot 4 Addition RIDGEWOOD

Directions to Property 1/2 mile west Cornhusker on Denton Rd. 1/2 mile So. on SW 27th. Follow gravel until ends. (See WINFIELD ct)

Location of Well N.W. Front Door Tap Location: Inside ☐ Outside ☐

Location of Sewage System EAST SIDE Slope Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	Thomas E Wurgs	2101 W Winfield ct	421-6751
		NBC Banking	488-5495
CR 26235 Tenant/Buyer:	Bob Brant	RIP PO Box 82408	434 4841
		Lincoln NE 68501	
Return to:			

Signature of Applicant [signature] Address 2101 W Winfield ct Lincoln NE 68523 Date 10/7/97

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 10/7/97
Initials es
Amount 150.00 ✓
Check No. 2329 ✓

DATA ENTRY

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

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 10/8/97

11-7-97 rm
11/3/97 by J.C.H. too much Cl.

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☒
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 3.1 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☐
Disapproved	☒

Additional Site Visits

Date 10/13/97 by J.C.H.
Date 10/21/97 by J.C.H. TOO MUCH Cl.
Date 10/24/97 by rm

10-29-97 rm

Comments: WELL CAP IS BROKEN. CLEANOUT IN SEWER LINE IS BROKEN. NEEDS TO BE REPAIRED AND RECAPPED. SEPTIC TANK SHOULD BE CHECKED TO SEE IF IT IS IN NEED OF PUMPING. EXPERIMENTAL SYSTEM. Repairs done 10/13/97 J.C.H. See Attached Letter ☐

FINAL STATUS PROVISION APPROVAL ON SEWAGE SYSTEM BECAUSE IT IS OF AN EXPERIMENTAL VARIETY, NO EVIDENCE OF MALFUNCTION.

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

Approved by Jerrold C. Hood R.E.H.S. Date 11/10/97

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.

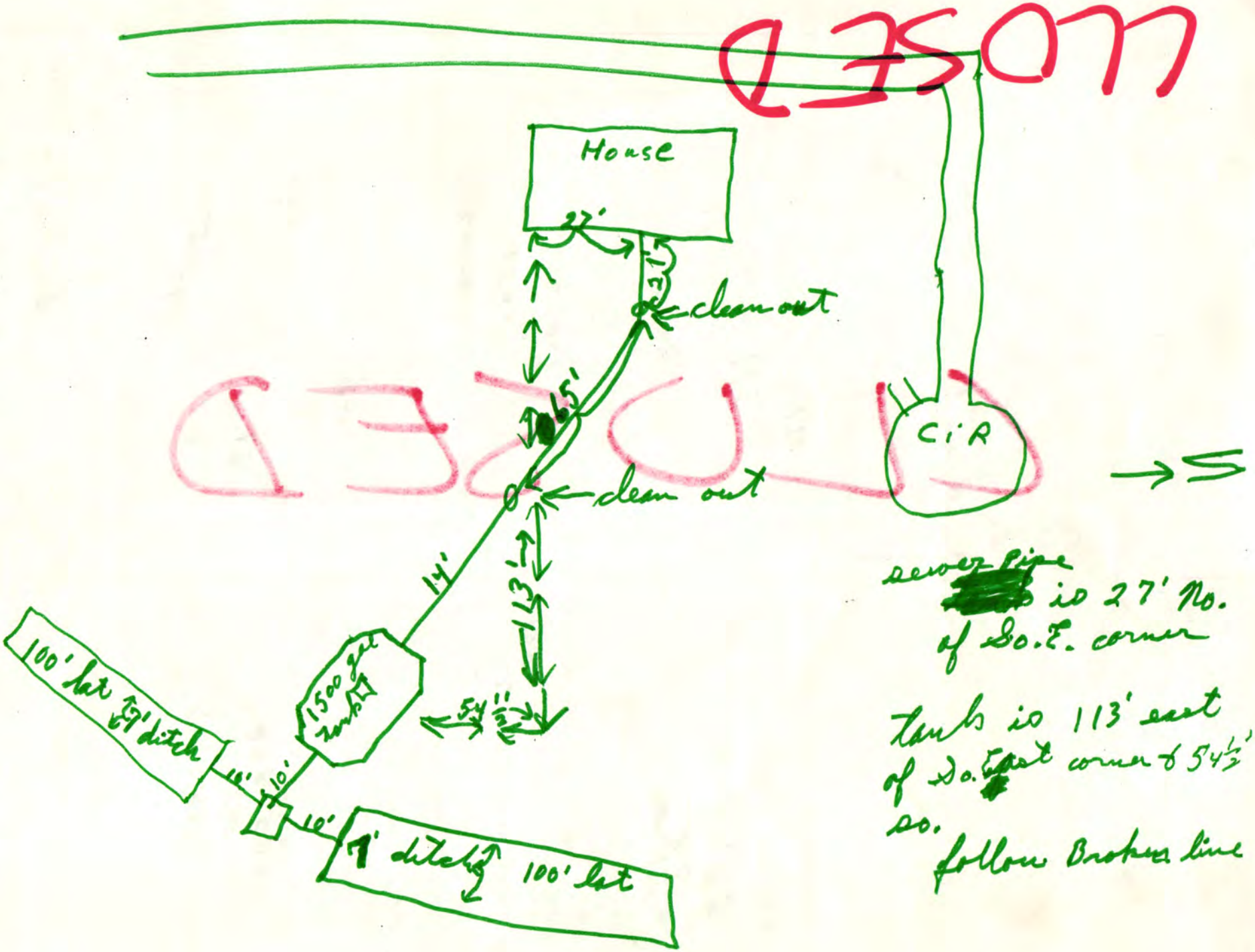
White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 10-95

AS BUILT DRAWING OF SYSTEM

INSTALLER Emil Burnett

DATE 5-12-78



sewer line is 27' No. of So. E. corner

tank is 113' east of So. East corner & 54½' so. follow Broken line