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. 91380072501

Issued 07/01/91
Expires 01/01/92

ESTABLISHMENT

CHUCK STOKES
T9N R6E SEC 21
RIDGEWOOD ESTATES BLK 7 LOT 2

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

CHUCK STOKES
2001 W WINFIELD CT
LINCOLN NE 68523

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
7/3/91	PAID

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

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: $_____

FILE NO._____

DATE: 7-1-91

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. 9N ; Range 6E ; Section 21 ;
   Block 7 : Lot 2 : Addition RIDGEWOOD ESTATES
   Street Address _____

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

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

4. Distance to public sewer: NA ft.

Chuck Stokes
Signature of Applicant (Owner or Lessee)

2001 W Winfield Ct
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/1/91. Date Frwd. 7/1/91. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 7/1/91. Date Frwd. 7/1/91. ACTION: Approved ☒ Disapproved ☐ Signature: Mel Goddard

3. City or County Engineer: Date Rec'd. 7-1-91. Date Frwd. 7-1-91. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7/18/91 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7/18/91 By: Jerrold C. Wood

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

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: Block 7 Lot 2 Ridgewood

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: 326 ft. x 326 ft. Area: 3 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☑ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 4-29-91 to 4-30-91. Weather: Partly Cloudy Precip. TRACE Temp. 56.

OWNER: CHUCK STOKES
Address: 2001 W WINNFIELD
LINCOLN, NE 68523

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	4-29-91	1200p	4-30-91	12:30p	4-30-91	4:00p	24	4:30p	25	30 min	1"	
2										25⅛		1⅛"	
3										24¾		¾"	
4										25		1"	
5										25½		1½"	
6										24⅞		⅞"	

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

Eugene L Rozac
Signature of Person Conducting Test

Address Box 77 Denton Ne. 68339 Phone 797-3555

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

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 ☒

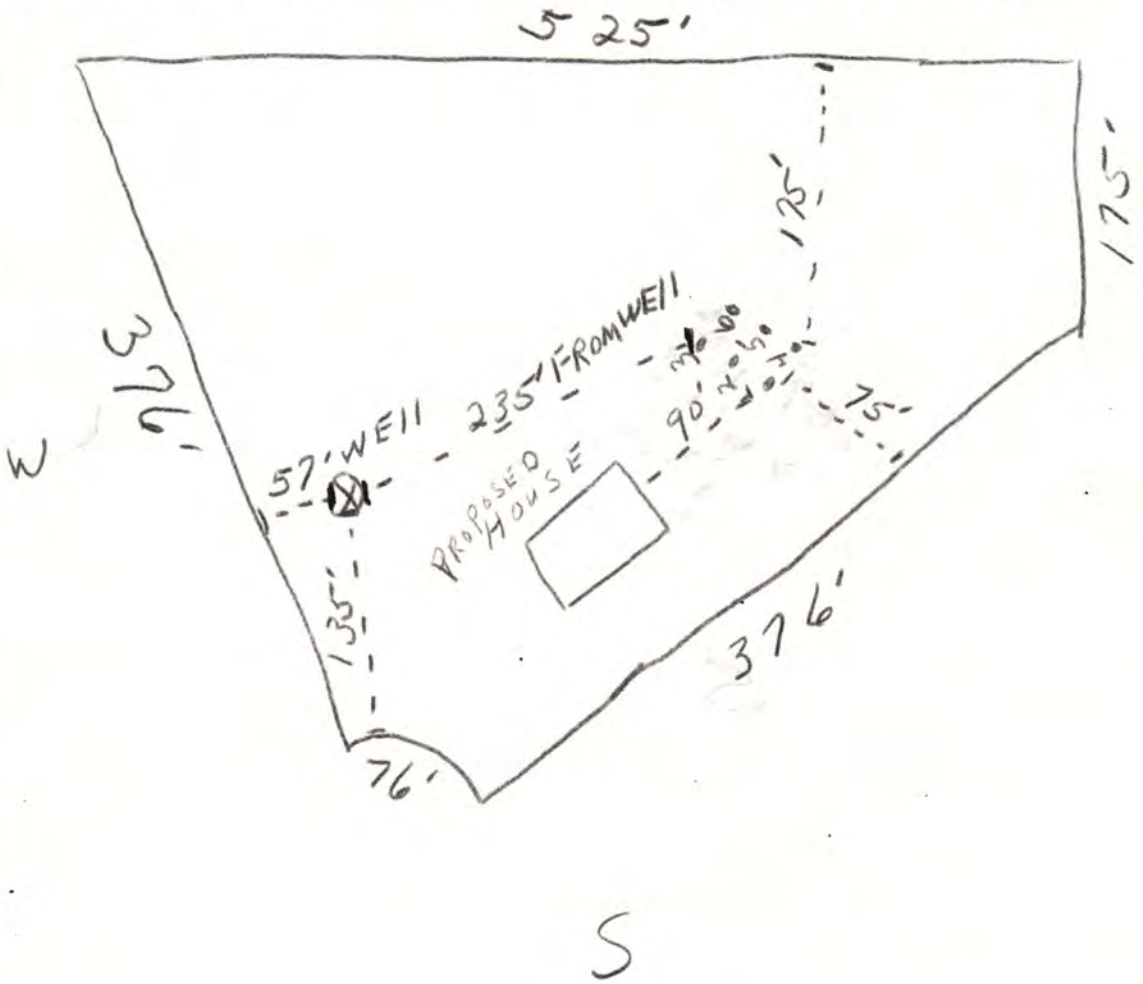
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO._____

Indicate on sketch if residence and well are existing or proposed.



REVIEWING ACTION

Remarks:_____

_____

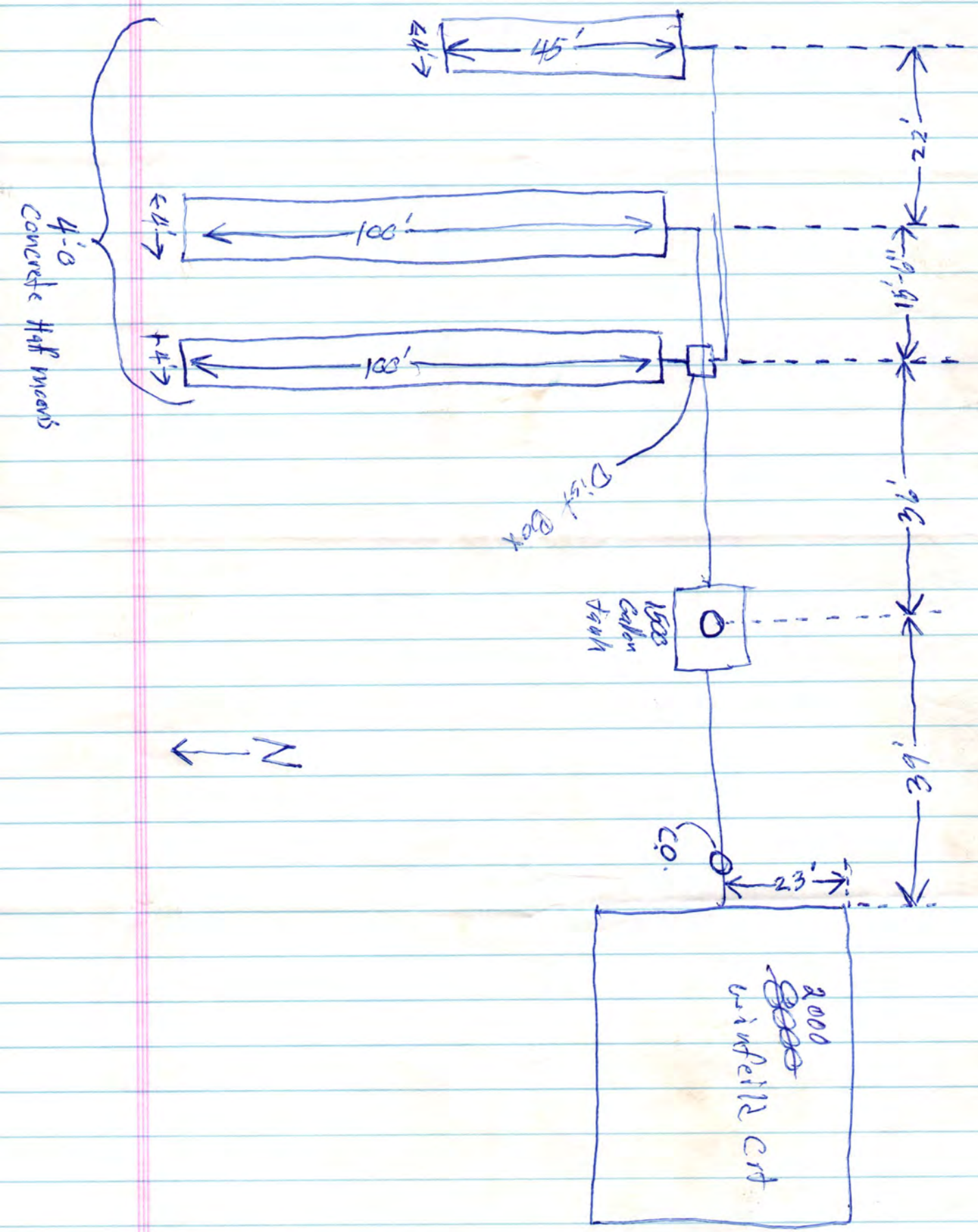
Date:_____

Minimum Design Requirement
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 967 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

9/6/21

2000 Westfield Ct



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: 11/18/91

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

Legal Description of Property: TWP. 9N ; RANGE 6E ; SECTION 21 ; BLOCK 7

LOT 2 ; ADDITION RIDGEWOOD ESTS; Street Address 2000 WEST WINFIELD COURT

Directions to Property _____

_____

Location of Well WEST OF HOUSE Tap Location: Inside ☐ Outside ☒

Location of Sewage System NORTHEAST OF HOUSE Year Installed 1991

	NAME	ADDRESS	PHONE
Present Owner:	MICHAEL & MARY JO BRATTON	2000 WEST WINFIELD CT.	423-5463
Tenant/Buyer:			
Return to:			

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

Signature of Applicant _____ Address _____

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HEALTH DEPARTMENT USE ONLY

Date Received NOVEMBER 18, 1991 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 11/18/91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 11/18/91 by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date _____ by ____
Nitrate 0.1 PPM	☒	☐	Disapproved:	☐	Date _____ by ____

Comments: _____

_____

_____ See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Jerrold C. Hood R.S. DATE NOVEMBER 20, 1991

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

002

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Legal Description of Property: TWP. 9N; RANGE 6E; SECTION 21; BLOCK 2

LOT 2; ADDITION Ridgewood Estates; Street Address 2000 W. Winfield Ct.

Directions to Property South on Pioneers Blvd. to W. Denton Rd. - West to S.W. 27th - South to Ridgewood Estates

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

Location of Sewage System So. of House Year Installed 1991

	NAME	ADDRESS	PHONE
Present Owner:	Michael & Mary Jo Bratton	2000 W. Winfield Ct.	4235463
Tenant/Buyer:			
Return to:			

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

Signature of Applicant Mary Jo Bratton Address above

HEALTH DEPARTMENT USE ONLY

Date Received NOVEMBER 18, 1991 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 11/18/91

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒	☐
Nitrate	0.1 PPM ☒	☐

SEWAGE SYSTEM:
Approved: ☒
Provisional: ☐
Disapproved: ☐

SITE VISIT:
Date 11/18/91 by J.C.A.
Date _____ by _____
Date _____ by _____

Comments: FILL IN DIRT AROUND LIGHT DEPRESSION AROUND WELL AND ANY WITHIN 10 FEET. TIGHTEN BOLTS IN WELL CAP.

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☒

SEWAGE DISPOSAL SYSTEM: Approved: ☒ Provisional Approval: ☐

APPROVED BY Jerrold E. Hood, R.S. DATE NOVEMBER 20, 1991

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- Standards for A Private Well in Nebraska
INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

FG.4120