CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 7269

INDIVIDUAL SEWAGE DISPOSAL SYSTEM — August 27, 1978

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

Joseph W. Splichal — 422 Eastbrough Lane, Lincoln, NE 68505

LICENSEE OR PERMITTEE — ADDRESS

T9N, R6E, Section 21, Block 8, Lot 2, Addition Ridgewood

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	110.16	148.14	6-2

624-1535

SERIAL NO. — DATE — AMOUNT

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 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: 474-1541

A

FILING FEE: $ 30.00

FILE NO. 1269

DATE: FEB 27 1978

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. ~~29~~ 9N; Range ~~26~~ 6E; Section 24;
   Block 8 : Lot 2 : Addition Ridge Wood
   Street Address 7701 S.W 22

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

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐ SOIL TEST TO BE RUN + WITNESSED

4. Distance to public sewer: NONE ft.

David W Splichal
Signature of Applicant (Owner or Lessee)

422 Eastbrough Lane 68505
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 2/27/78. Date Frwd. 2/27/78. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 2-27-78 Date Frwd. 2-27-78. ACTION: Approved ☒ Disapproved ☐ Signature: Harry N. Hayward

3. City ~~or County~~ Engineer : Date Rec'd. 2-27-78. Date Frwd. 2-27-78. ACTION: Approved ☒ Disapproved ☐ Signature: A Amy

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 8-28-78 by: GJW
Date: 9/1/78 by: D.C.H.
Date: / / by:

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/29/78 By: Jerrold C. Hood

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

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

SEP 23 1978

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: SEPT 20 1978

FILE NO. _____

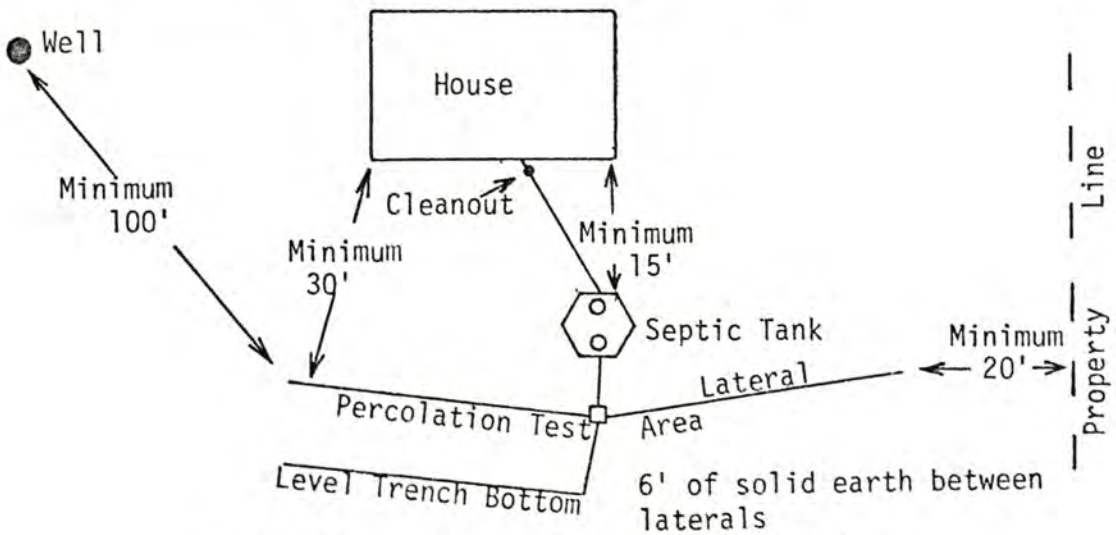
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material _____; Diameter _____ in.
2. Distance above basement floor NO BASEMENT in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 36 ft.
4. Number of clean-outs 3.
5. Distances to:
Well or Suction Line 110 ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material CONCRETE; No. of compartments _____.
2. Capacity 1000 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 24" in.
8. Distances to:
Well or Suction Line 150 ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material PLASTIC; Number - available outlets 7.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank 13 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or
Perforated Pipe 4" .
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 4 ; Length of each line 80, 90, 40, 50, _____ ft.;
Total length of laterals 260 ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 3 ft.;
Slope _____ in/100 ft.; Average Depth _____ in.
4. Filter Material: SAND
Depth of Material 11" in.
5. Distances to:
Well or Suction Line 110 ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: Dec 6 1978

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☒ Evaluation of the Individual Water Supply
☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 9 ; Range 6 E. P m; Section 21 ;
Block 8 ; Lot 2 ; Addition Ridgewood .
Street Address 7701 S.W. 22 .
Directions on how to get to property S.W. 27 Denton Rd. south ½ mile turn east, second Road turn north last house West side .
Location of well N.E. of House .
Where is tap: Inside ☒ Outside ☒ .

	NAME	ADDRESS	PHONE
Present Owner:	Joseph W. Splichal	7701 SW 22	423-3617
Tenant:			
Lending Agency:	State Federal	South 40 - South St	

(Do not write below double lines)

Health Department: Date Received 12-6-78
Received $45.00 Check ☒ Cash ☐
Site Visits: Date 12-6-78 by RM
Date ____ by ____
Date ____ by ____

Joseph W Splichal
Signature of Applicant

7701 S.W. 22
Address

PRELIMINARY STATUS -- DATE 12-6-78

Water System:
Approved ☒ Disapproved ☐

Sewage Disposal System:
Approved ☒ Provisional Approval ☐
Disapproved ☐

Corrections Required or Reasons for Disapproval ____

☐ See Attached Letter.

FINAL APPROVAL -- DATE 12-7-78

Water System ☒ . Sewage Disposal System ☒ . By Ronald Mynatt

Form Number 20215-0878

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 7701 SW 22

Twp 9 Range 6 Section 21 1/4 SW 1/4 ___ Block 8 Lot 2 Addition Ridgewood

Directions to Property _____

Location of Well N/E of house Tap Location: Inside ☐ Outside ☒ X

Location of Sewage System S/E of house Year Installed 1979

	NAME	ADDRESS	PHONE
Present Owner:	Joseph W. Splichal	7701 SW 22 Lincoln NE 68523	423-3617 W.441-8873
Tenant/Buyer:			
Return to:	Joseph W. Splichal	7701 SW 22 Lincoln NE 68523	423-3617

Signature of Applicant Joseph W Splichal Address 7701 SW 22 Lincoln NE 68523 Date 4 / 20 / 93

HEALTH DEPARTMENT USE ONLY

Date Received 4 / 20 / 93 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Jerald Hood **DATE:** 4 / 20 / 93

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☐	Approved ☒	Date___/___/___by____
Bacteria	☒ 0 /ml	☐ ____/ml	Provisional ☐	Date___/___/___by____
Nitrate	☒ 2.4 ppm	☐ ____ppm	Disapproved ☐	Date___/___/___by____

Comments: _____

_____ See Attached Letter ☐

FINAL STATUS

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

Approved by _____ Date ____/____/____

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.

054

AS BUILT DRAWING OF SYSTEM

DATE Sept. 20 1978 INSTALLER Joseph W Splichal
Mel. Gagner

o - CLEANOUT

N

WELL

