LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

PERMIT

Permit

SEWAGE INSTALLATION

No. 96380150801

Issued 10/30/96
Expires 05/01/97
Revenue Code 19754

Establishment

MICHAEL BOETTCHER
T9N R6E SEC 21
BURR OAKS SUBDIVISIO BLK 2 LOT 4

FEES: $150.00

TOTAL $150.00

Permittee

MICHAEL BOETTCHER
5021 LARKWOOD RD
LINCOLN NE 68516

Issued By M. Jane Ford
Health Director

2755

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $ 150.00 #2114
10/30/96 ls

FILE NO. _____

DATE: 30 October '96

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 2 : Lot 4 : Addition Burr Oaks Subdivision
   Street Address 1400 West Burr Oaks Road LLCN
2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4 . Describe _____
3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☒ ~~Agoon~~
4. Distance to public sewer: N/A ft.

John Ballis Construction for Michael Boettcher
Signature of Applicant (Owner or Lessee)

6712 Hickory Crest Ct. Lincoln, NE 68516
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/30/96. Date Frwd. 10/30/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 10/30/96. Date Frwd. 10/30/96. ACTION: Approved ☒ Disapproved ☐ Signature: TK
3. City or County Engineer: Date Rec'd. 10-30-96. Date Frwd. 10-30-96. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 12/16/96 by: J. C.
Date: 12/17/96 by: J. C.
Date: 12/17/96 by: J. C. 3 Laterals ~~Sewer Lines + Distribution Box~~ 2 Manifolds

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12/23/96 By: Jerrold C. Hood

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

FORM 23-43

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
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $_____

FILE NO._____

DATE: 29 Oct 96

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 2 : Lot 4 : Addition Burr OAKS Subdivision LLCN
   Street Address 1400 West Burr OAKS Road LLCN

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4 . Describe 2500 sq ft Ranch

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

4. Distance to public sewer: N/A ft.

Michael G. Boettcher
Signature of Applicant (Owner or Lessee)

5021 Litchwood Rd Lincoln, Ne 68516
Address

(Do not write below this double line)

1. Health Department: Date Rec'd._____. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature:_____

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd._____. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature:_____

3. City or County Engineer : Date Rec'd._____. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature:_____

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date:_____by:_____
Date:_____by:_____
Date:_____by:_____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date:_____By:_____

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

1400 W Burr Oak FILE NO. _____

PROPERTY WHERE SOIL TESTED: Lot 4 Blk 2 Burr Oaks

Location: Township 9N ; Range 6E ; Section & ¼ Section 21.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 10-29 to 10-30-96. Weather: Precip. — Temp. 35°.

OWNER: Mike & Charlene Boettcher

Address: % John Rollis 6712 Hickory Crest Circle

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	30	10-29	4:00	10-30	7:10	10-30	9:40	5 3/4	10:10	6 1/4	30	1/2	60 MIN/IN
2								10 3/4		11 1/2		3/4	40 MIN/IN
3								12		12 1/2		1/2	60 MIN/IN
4								13 1/8		13 7/8		3/4	40 MIN/IN
5								11 7/8		12 3/8		1/2	60 MIN/IN
6								4 3/4		10 1/4		1/2	60 MIN/IN

Larry Schwarck
Signature of Person Conducting Test

Address 8200 old Cheney Rd Phone 489 7294

Sum of Percolation Rates: _____
Average of Rates: 53 MIN/IN
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: November 22, 1996

Approved Percolation Rate (a)
A. 53 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 ☐

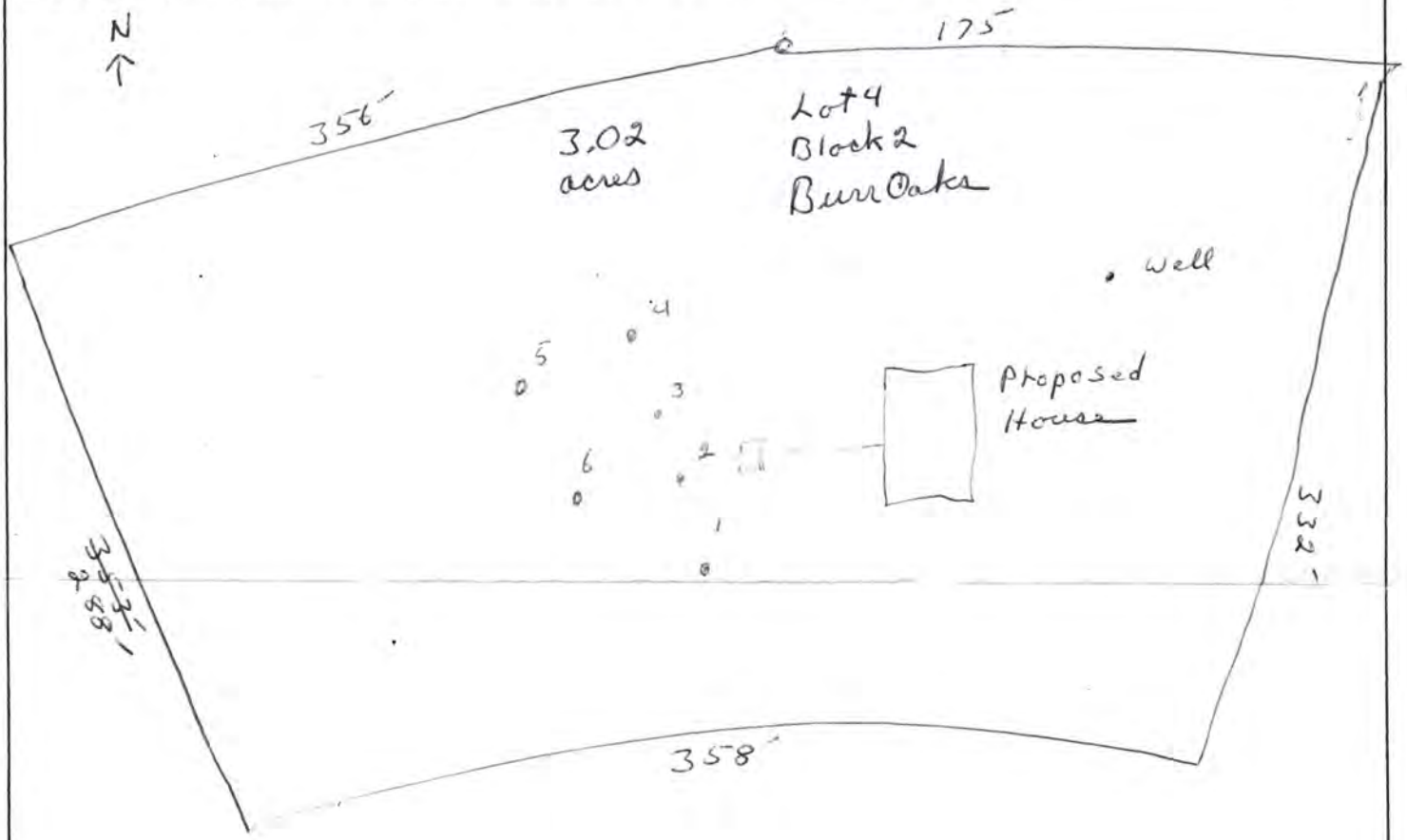
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

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: November 22, 1996

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 1250 sq.ft.

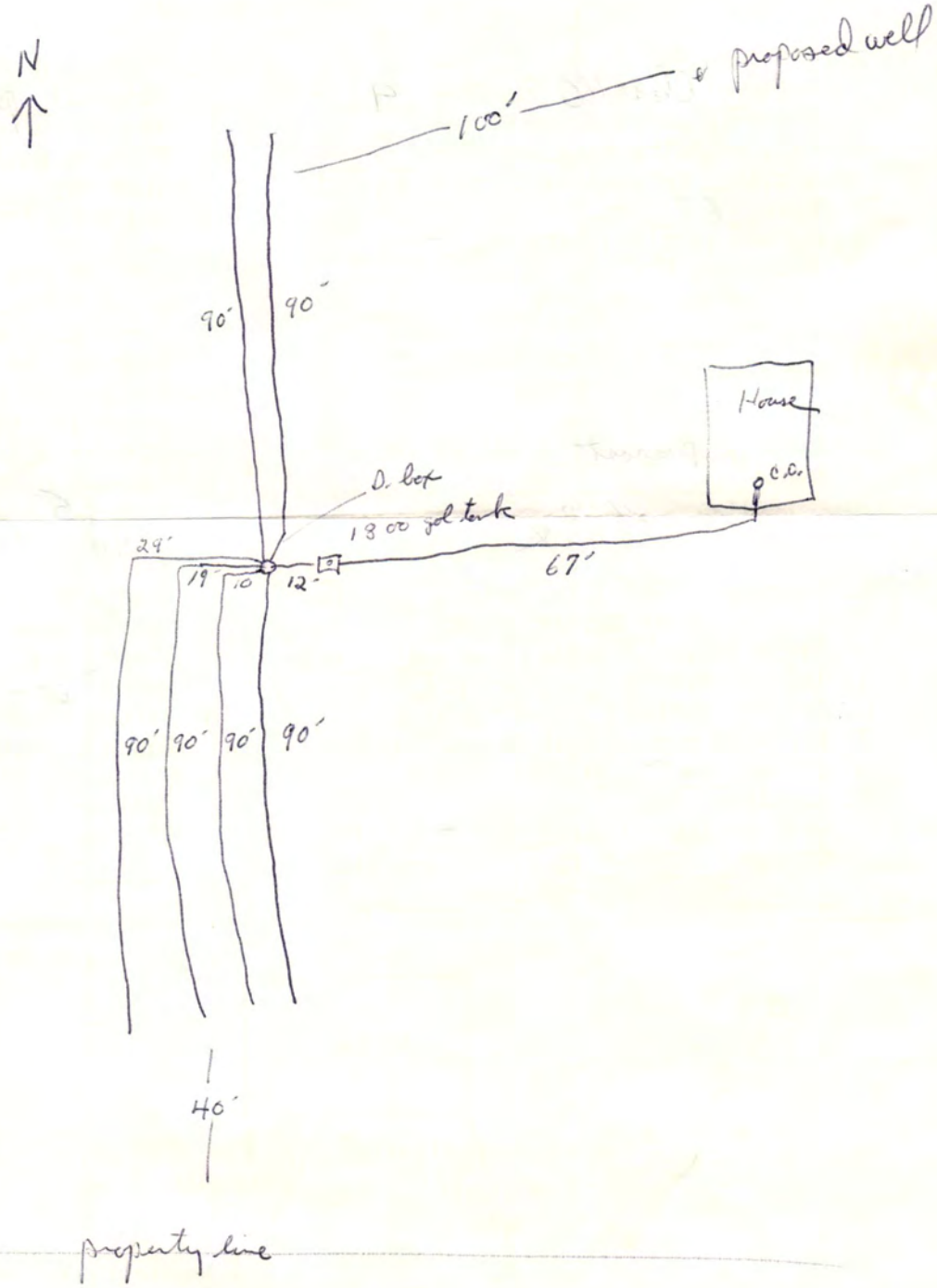
Jerrold C. Hood
Signature of Reviewing Official

12-17-96

1400 SW Bern Oaks Rd

Lot 4 Blk 2

Larry Schwarck



APR 2 8 1997

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13553
FILE NO. 9640603496

Lincoln-Lancaster County
HEALTH DEPARTMENT
3140 "N" STREET LINCOLN, NE 68510-1514

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 21 T. 9N R. 6E Block 2 Lot 4 Addition BURR OAKS

Owner Mike Boetcher Address

LOG OF WELL	
Depth Ft. to	Description
0 1'	Top soil
1' - 22'	brown clay
22' - 26'	gray - brown clay
26' - 28'	white & yellow clay (some sand)
28' - 41'	white clay
41' - 43'	sandstone (yellow) (med)
43' - 49'	white clay
49' - 54'	sandstone (brown) (fine to med)
54' - 56'	gray clay
56' - 65'	sandstone (brown) (fine to med)
65' - 72'	gray clay
72' - 86'	sandstone (brown) (fine)
86' - 110'	sandstone (brown) (med)
110' - 125'	sandstone (brown) (very course)
125' - 144'	sandstone (brown) (med)

WELL COMPLETION RECORD

Drilling Method: MUD ROTARY
Depth (from ground level), Ft. 150'
Date Completed 12/27/96

Casing: Length, Ft. 140'; Dia. In. 4"
Wall Thickness, Inc. .214; type PVC 200

Screen: Length, Ft. 10' Dia. In. 4"
Type PVC Sch. 40, slot Size .018

Drop Pipe: Length, Ft. 120' Dia. In. 1 1/4"

Water Level. Surface to top of water, Ft.:
Static 68', Pumping 80'

Yield: 20 ggm, Measured ☒ , Est. ☐
Chlorination Completed Yes ☒ No ☐

The above information including "Log of Well" is a true record of the job performed by me.

Driller Rick Bell
(Signed)

REMARKS WELL SEALED WITH BENTONITE (HOLEPLUG)

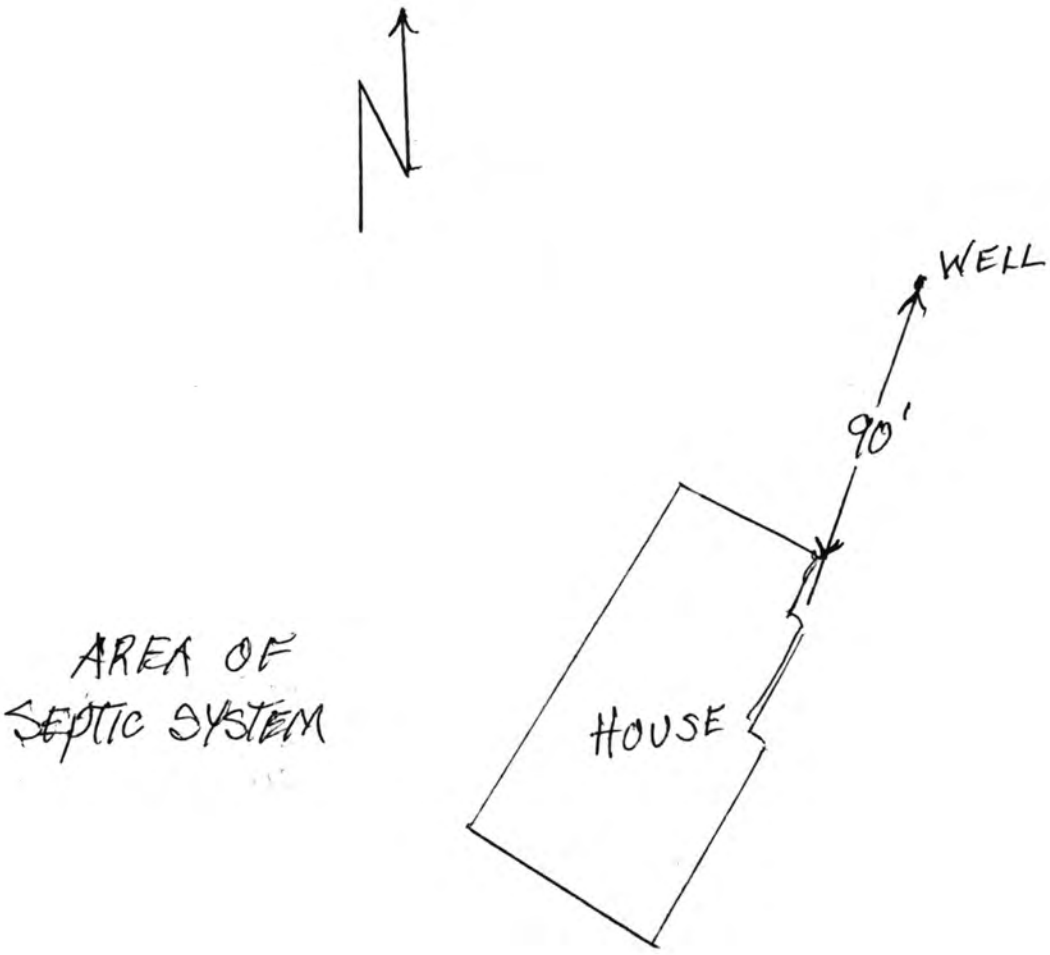
Address 2796 W. MILFORD RD
MILFORD, NE 68405

Date 4-24-97

DO NOT WRITE BELOW THIS DOUBLE LINE

Health Department forwarded copy of record to Nebraska Conservation and Survey Department for Scientific Record ☒

FORM 23-4


N
WELL
90'
AREA OF
SEPTIC SYSTEM
HOUSE