LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET ENVIRONMENTAL HEALTH DIVISION (402) 441-8000

NON TRANSFERABLE Lincoln, NE 68510-1514

PERMIT

No. 95380127901

AGE INSTALLATION

Issued 03/01/95
Expires 09/01/95
Revenue Code 18754

Establishment

MANZITTO INC
T9N R7E SEC 1

FEES: $150.00

TOTAL $150.00

Permittee

MANZITTO INC
3341 PIONEERS BLVD
LINCOLN NE 68506

Issued By M. Jane Ford
Health Director

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
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

A

FILING FEE: $_____

FILE NO._____

DATE: 2-24-95

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 7E ; Section 1 ; 5 ACRES
   Block _____ : Lot 14 I.t. : ~~Addition~~ So. 1/2 of S.W. 1/4
   Street Address 10500 Pioneer Blvd

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. ~~WILL INSTALL WHATEVER SOIL PERCOLATION TEST INDICATES~~

Manzitto INC. Signature of Applicant (Owner or Lessee)

3341 Pioneer BLVD.
Address

430-8220
483-2302

(Do not write below this double line)

1. Health Department: Date Rec'd. 2/24/95. Date Frwd. 2/27/95. ACTION: Approved ☑ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 2-28-95. Date Frwd. 2-28-95. ACTION: Approved ☑ Disapproved ☐ Signature: [signature]

3. City or County Engineer: Date Rec'd. 2-27-95. Date Frwd. 2-27-95. ACTION: Approved ☐ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7/31/95 by: D. C.H. sewer line
Date: 8/9/95 by: D. C.H.
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8/9/95 By: Jerrold C. Hood

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

FORM 23 43

* EXPERIMENTAL SYSTEM
HENCE APPROVAL IS PROVISIONAL

JUL 18 1995

FORM: 20222-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN, NEBRASKA 68502
PHONE: 471-7800

FILING FEE $ 75.00

FILE NO. _____

DATE: 7-17-95

The undersigned hereby requests: Site Clearance and Permit to construct a new individual water well ☑ ; Permit existing well ☐ ; well repair or alteration involving opening of well ☐ ; in conformance with appropriate ordinance, as described herein:

1. Legal description of property: Twp. 9N : Range 7E : Section S ½ OF SW 1/4 Section 1
   Block _____ : Lot 147.T. : Addition _____
2. Well use: Residential ☑ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: 1,000 Ft.
4. Intended use of well Residential

*East of Firethorn

Signature of Applicant (owner or lessee)

3341 Pioneer BLVD
Address

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 7/19/95. Date Frwd. 7/19/95. Action: Approved ☒ Disapproved ☐ Signature: Gerald C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 7/19/95. Date Frwd. 7/19/95. Action: Approved ☒ Disapproved ☐ Signature: _____
3. City or County Engineers: Date Rec'd 7/19/95. Date Frwd. _____. Action: Approved ☐ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 8/10/95 by J.C. Hood
Date: _____ by _____
Date: _____ by _____

Nitrate Level <0.1 PPM
Bacteriological Analysis Satisfactory
Yes ☒ No ☐

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8/15/95 By: J.C. Hood

Health Department copy: White
Engineers Copy: Light Green
Building Inspectors Copy: Light Blue

FORM 23-13

AUG 1 7 1995

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO._____

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

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 1 T. 9N R. 7E Block ___ Lot 41.1 Addition _____

Owner SAM MANZITTO Address 105TH & PIONEER-N SIDE-LONG DRIVE

LOG OF WELL	
Depth ft. --to--	Description
0- 65	YEL CLAYS
65- 90	BLUE & BRN CLAY
90- 95	MED FINE WHITE SAND
95- 125	BLUE CLAY
125- 140	ORANGE SS & SHALE
140- 175	SAND YEL SHALE
175- 205	FINE SS
205- 214	SANDY YEL SHALE
214- 228	FINE YEL SS TRNG ORG/ RED TRNG BLACK
228- 238	SANDY YEL SHALE
238- 250	MED TO CRS SS & FN GRVL
250 - 260	SANDY YEL SHALE
260 - 275	SOFT SILTY BLUE SHALE

REMARKS NITRATE NITROGEN < 0.1 ppm. BACTERIOLOGICAL O.K.

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER

Depth (from ground level), Ft. 250

Date Completed 6-26-95

Casing: Length, Ft. 240 ; Dia. In. 4"

Wall Thickness, Inc. .200#; type PVC

Screen: Length, Ft. 10' Dia. In. 4"

Type PVC SLOTTED slot Size .025

Drop Pipe: Length, Ft. ___ Dia. In. _____

Water Level, Surface to top of water, Ft.:

Static 165', Pumping _____

Yield: 10 gpm, Measured ☒ , Est. ☐

Chlorination Completed Yes ☒ No ☐

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

Driller _____ (Signed)

Address P. O. BOX 308
HICKMAN, NEBRASKA 68372

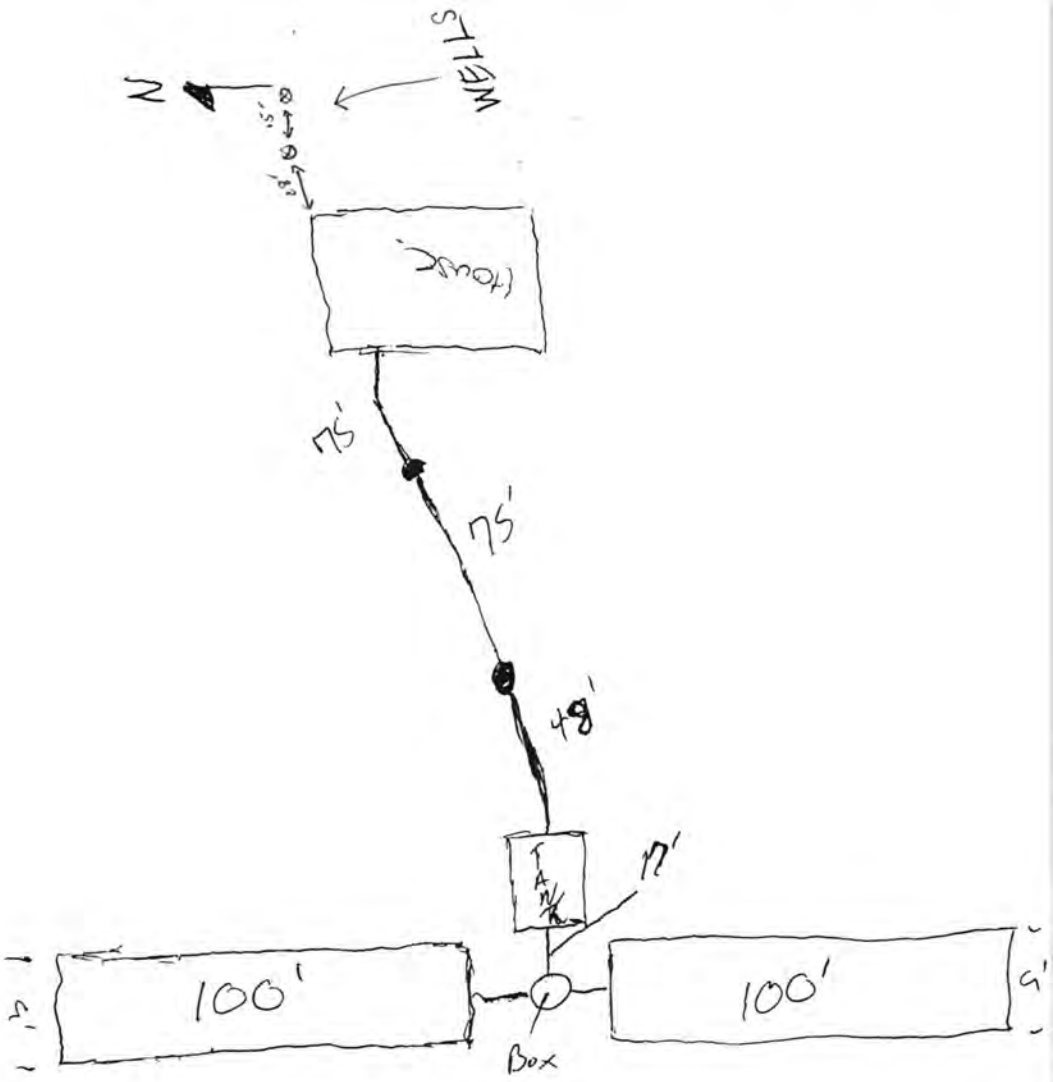
Date 7 JULY 1995

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

COPY


N
WEST
15'
63'
House
75'
75'
48'
FAN
17'
100'
100'
Box

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.

Legal Description of Property: Street Address 10500 Pioneers

Twp 9 Range 7E Section 1 1/4 SW 1/4 Block ___ Lot 14 Addition ___

Directions to Property Yellow house set back from Pioneers Blvd, on top of hill.

Location of Well SE of house Tap Location: Inside ☐ Outside ☐

Location of Sewage System West Year Installed 1995

	NAME	ADDRESS	PHONE
Present Owner:	Karen C. Carlson		
Tenant/Buyer:	Richard E Littrell	5325 Linden ST Lincoln, NE 68516	489 5811
Return to:	DONNA SHINAUT	HOME REAL ESTATE	FAX 483-6640

Signature of Applicant Richard Littrell Address ___ Date ___/___/___

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 04/08/97
Initials CW
Amount $225.00
Check No. 7132

DATA ENTRY
Date ___/___/___
Case No. ___
Initials ___

PRELIMINARY STATUS--By Paul Drotzmann **DATE:** 4/9/97

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☒
Disapproved ☐

Additional Site Visits
Date ___/___/___ by ___
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: Sewage system is considered experimental. House is vacant. No evidence of malfunction. Prior water usage is unknown. Water samples collected.

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.

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

Revised/Reprint: 10-95