1732

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

May 18, 1981 — THIS LICENSE OR PERMIT EXPIRES

EKen Petersen , Builder — LICENSEE OR PERMITTEE

4029 S. 48th St. Lincoln NE 68506 — ADDRESS

T9N, R7E, Section 15 Block 1, Lot 7 Addition Stevens Ridge Estates — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 60.00	$	$	$	$ 60.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
018754	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
5 0067 1012		60.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

HEALTH

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: $ 60.00

FILE NO. 1732

DATE: 11-17-1980

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 15 ;
   Block 1 E : Lot 7 : Addition STEVENS Ridge ESTATES
   Street Address 6300 OAKS Hollow

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.

KEN PETERSEN BUILDER
Signature of Applicant (Owner or Lessee)

4029 So 48th 68506
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 11/18/80. Date Frwd. 11/18/80. ACTION: Approved ☑ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. 11/18/80. ACTION: Approved ☒ Disapproved ☐ Signature: Gary M. Sherwood

3. City or County Engineer: Date Rec'd. 11/18/80. Date Frwd. 11/18/80. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 5-5-81 by: nm (one 100' lateral
Date: 5-6-81 by: nm (2nd " ")
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-5-81 By: Ron Maynard

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: 474-1541

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 7E ; Section & ¼ Section Sec 15, NW¼
Property Dimensions: _____ ft. x _____ 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: July 15 to July 16-80 Weather: Precip. 0 Temp. 90 s.

OWNER: Charles D. and Carolyn M. Gregorius

Address: 6310 Perry 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	32"	7/15	6 PM	7/16	4:30 PM	7/16	4:30 PM	12"	8 PM	8½	30M	¾	
2										7¾		1	
3										7½		1	
4										8		¾	
5										8½		¾	
6										9		¾	
			refilled all holes at 6 PM.										

Robert D Johnson
Signature of Person Conducting Test

Address 2618 no 3rd Phone 476-3595

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: November 18, 1980

Approved Percolation Rate (a)
A. 37 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 ☐

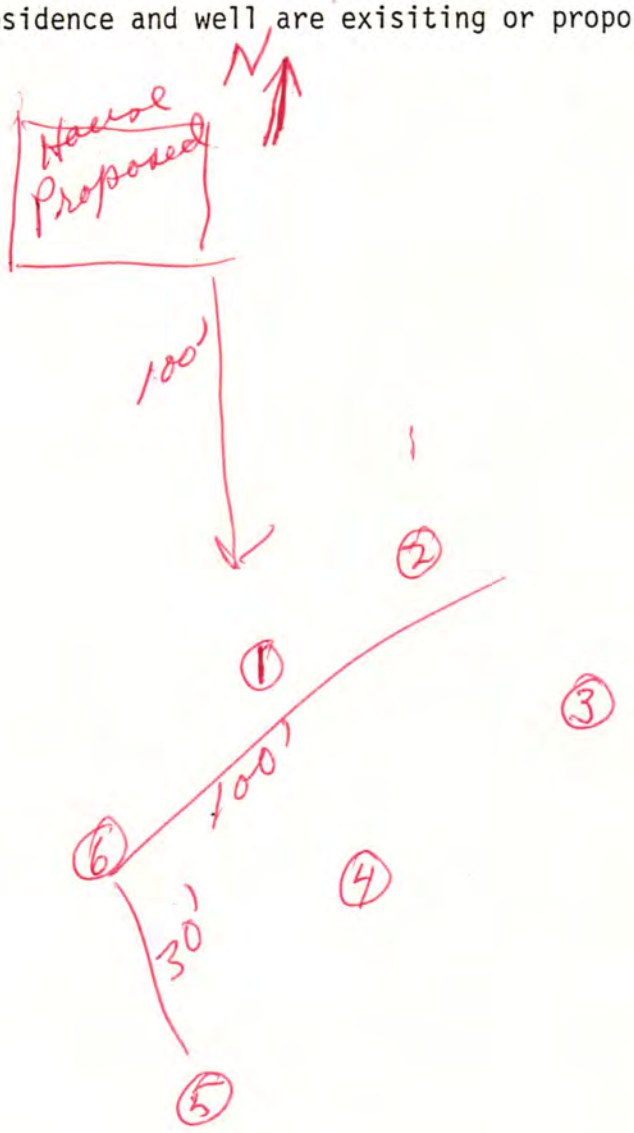
LINCOLN-LANCASTER-COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

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 18, 1980

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 208 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 832 sq.ft.

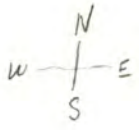
Jerrold C. Wood
Signature of Reviewing Official

REC'D MAY 8 1981

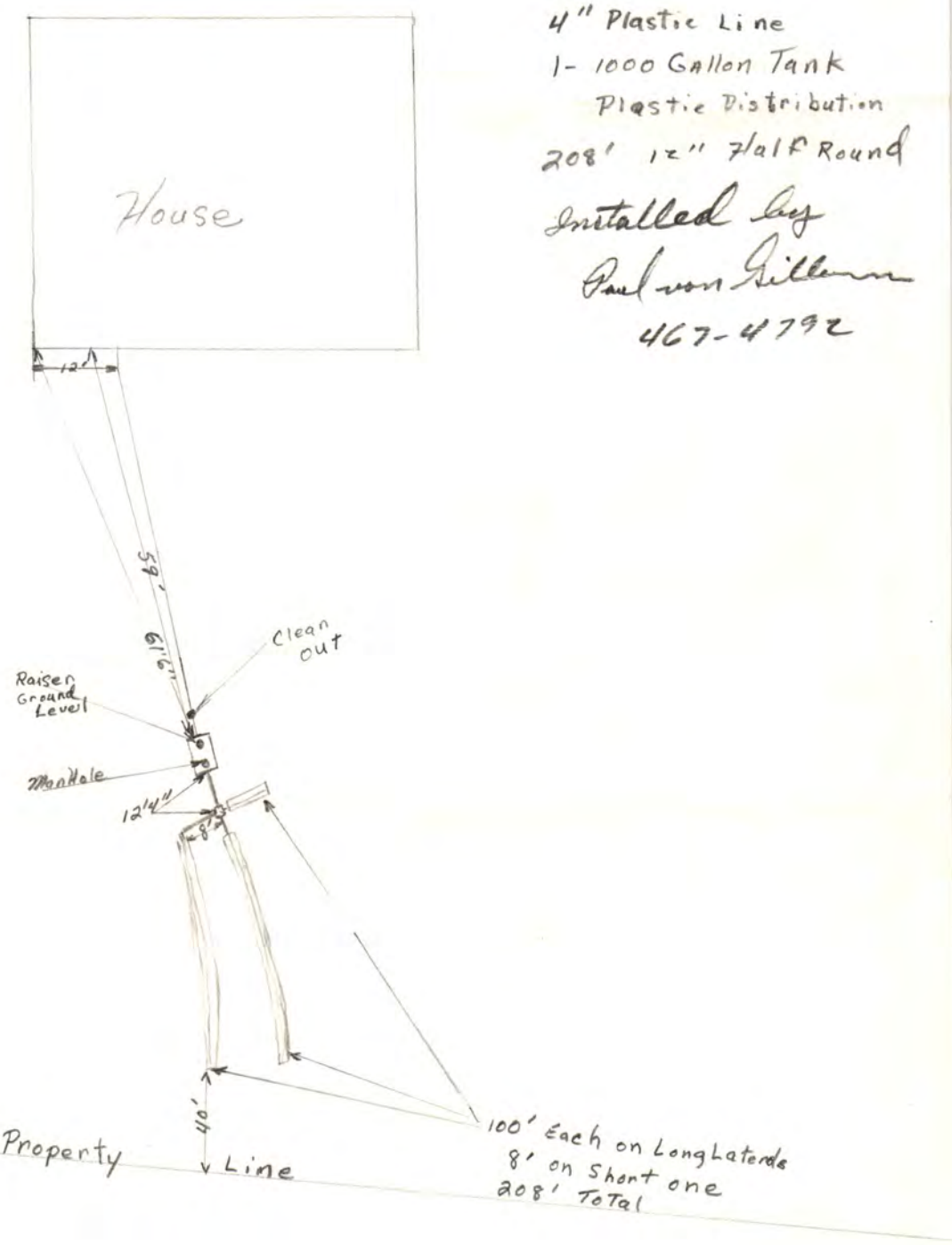
Well

Date 5/6/81

Kem Petersen
Builder



4" Plastic Line
1- 1000 Gallon Tank
Plastic Distribution
208' 12" Half Round
Installed by
Paul von Gillern
467-4792



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: 3-28-90

☒ Evaluation of the Sewage Disposal System ☐ Enclosed is $75.00 $150.00

Legal Description of Property: TWP. 3N; RANGE 7E; SECTION 15; BLOCK 1

LOT 7; ADDITION STEVENS RIDGE; Street Address 6300 Oaks Hollow

Directions to Property South on 70th Street past Old Cheney to Stevens Ridge Road (southeast) and turn right on Oaks Hollow.

Location of Well _____ Tap Location: Inside ☐ Outside ☒

Location of Sewage System _____ Year Installed 1981

	NAME	ADDRESS	PHONE
Present Owner:	Carolyn & Charles Gregorius	6300 Oaks Hollow	
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 $150.00

Date Received MARCH 28, 19 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 3/29/90

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 3/29/90 by L.C.H.
Bacteria	☒	☐	Provisional:	☐	Date _____ by ____
Nitrate	☒	☐	Disapproved:	☐	Date _____ by ____

Comments: SEPTIC SYSTEM IS NOW 9 YEARS OLD. IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. THE TANK DOES APPEAR TO HAVE BEEN OPERATING VERY SATISFACTORILY.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Wilbur C. Hood R.S. DATE APRIL 3, 19

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

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RECEIVED JUL 0 9 1992

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: May 15, 1992

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

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 15; BLOCK 1

LOT 7; ADDITION Stevens Ridge Estates; Street Address 6300 Oaks Hollow

Directions to Property 70th Street to Edenton South, Stevens Ridge Road to Oaks Hollow

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

Location of Sewage System South of House near RR Ties Year Installed 1980

	NAME	ADDRESS	PHONE
Present Owner:	Tamas Allan	6300 Oaks Hollow	489-9737
Tenant/Buyer:	Thomas A. Hearn	c/o American Tool 301 South 13th St Lincoln, Nebraska	435-3300
~~Return to:~~	~~Nebraska Title Co~~	~~[illegible]~~ 1610 S. 70th Ste 102 Lincoln Ne 68506	

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

Signature of Applicant Thomas A. Hearn Address see above

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HEALTH DEPARTMENT USE ONLY

Date Received JULY 9, 1992 Received ~~$75.00~~ 150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE JULY 10, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 7/10/92 by L.C.H.
Bacteria	☒	☐	Provisional:	☐	Date ____ by ____
Nitrate 0.2ppm	☒	☐	Disapproved:	☐	Date ____ by ____

Comments: IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Jerrold C. Woods R.E.H.S. DATE JULY 15, 1992

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

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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 6300 Oaks Hollow Street

Twp 9N Range 7E Section 15 1/4 ____ 1/4 ____ Block 1 Lot 7 Addition Stevens Ridge

Directions to Property Off of 70th & Stevens Ridge

Location of Well Left of Driveway/inside fence Tap Location: Inside ☒ Outside ☒

Location of Sewage System South of pproperty fence Year Installed 1980

	NAME	ADDRESS	PHONE
Present Owner:	Thomas A. & Barbara J. Hearn	6300 Oaks Hollow Lincoln Ne 68516	486-4818
Tenant/Buyer:	Richard & Susan FELLS	4121 Barkwood Lane, Lincoln, Ne. 68516	423-7406
Return to:	Sheryl Pflug ATI Title Company	P.O. Box 67069, Lincoln, Ne. 68506-7069	434-3712

Signature of Applicant Sheryl Pflug Address P.O. Box 67069, Lincoln, Ne. 68506-7069 Date 9 / 2 / 93

HEALTH DEPARTMENT USE ONLY

Date Received 9 / 3 / 93 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Jerrold Hood **DATE:** 9 / 3 / 93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☒	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ____ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ 0.2 ppm	☐ ____ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: ____

See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 9 / 8 / 93

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.

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