FILE NO 102

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

October 30, 1969
THIS LICENSE OR PERMIT EXPIRES

T 9N; R 7E; Sec. 17; Lot 5; 2nd Addition; Colonial Acres
LICENSEE OR PERMITTEE

ADDRESS

Roger Bailey
NAME OF ESTABLISHMENT, IF ANY

4131 Clifford Drive
ADDRESS

REMARKS: Non-Transferable

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
1431-10.15 35	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
15256 M3 09		30.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

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

FORM HD-32(67) APPLICATION FOR PERMIT
TO CONSTRUCT INDIVIDUAL SEWAGE
DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 103

DATE: April 29, 1969

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N; Range 7E; Section 17;
Block ____; Lot 5; Addition 2ND; ADDITION
Street Address Colonial Acres ~~Bud Irons~~

2. Property Use: Residential ____ [x]; Commercial ____ [ ]
No. of Bed Rooms 4 Describe: ____

Other Use ____ [ ]
Describe: ____

3. Type of Individual Sewage Disposal System: Septic Tank [x]; Other [ ]

4. Plans and Specifications of Proposed System. (See FORM HD-32a(67) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT, attached hereto.)

Roger Bailey
Signature of Applicant (owner or lessee)

4131 Clifford Dr.
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: ____
Filing Fee: $____. ____

2. Date Site Clearance ____

3. Site Visits:
Date: ____ by: ____
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved [X]; Disapproved [ ]: 4/29/69
by: Jerrold C. Hood

5. BUREAU OF LICENSES & PERMITS
Date Notified: ____
Date Issued: ____ Serial ____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/22/69 by: Jerrold C. Hood

FORM HD-33(67) SOIL ABSORPTION
TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 103

PROPERTY WHERE SOIL TESTED:
Location: Township Colonial Acres
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: 5 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay [X]; Silty Clay Loam [ ]; Sandy Loam [ ]
Silty Loam [ ]; Clay Loam [ ]; Sandy Clay [ ]

Owner: Bud Irons
Address _____

Dates of Tests: 4-29-69 to 4-29-69. Weather: Precip. none Temp. 70 F.

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
Hole No.	Hole Depth (in.)	Pre-Saturation Period Start Date (Mo. Day)	Start Time (Hr. Min.)	End Date (Mo. Day)	End Time (Hr. Min.)	Percolation Readings Start Date (Mo. Day)	Start Time (Hr. Min.)	Start Water Level (in.)	End Time (Hr. Min.)	End Water Level (in.)	Results Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	40	4-27-69	8:00	3:00		4-28-69	2:00	38	3:40	33	70	5"	1" every 14 min
2	40	4-27-69	8:00	3:00		4-28-69	2:00	38	3:10	33½	70	5"	1

Roger Bailey
Signature of Person Conducting Test

Address 4131 Clifford Dr.
Phone: 489-5482

Sum of Percolation Rates _____
Average of Rates: 1" every 14 min
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

DATE: _____

Approved Percolation Rate(s)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

_____
Signature of Reviewing Official

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 103

SPECIFICATIONS

DATE: April 29, 1969

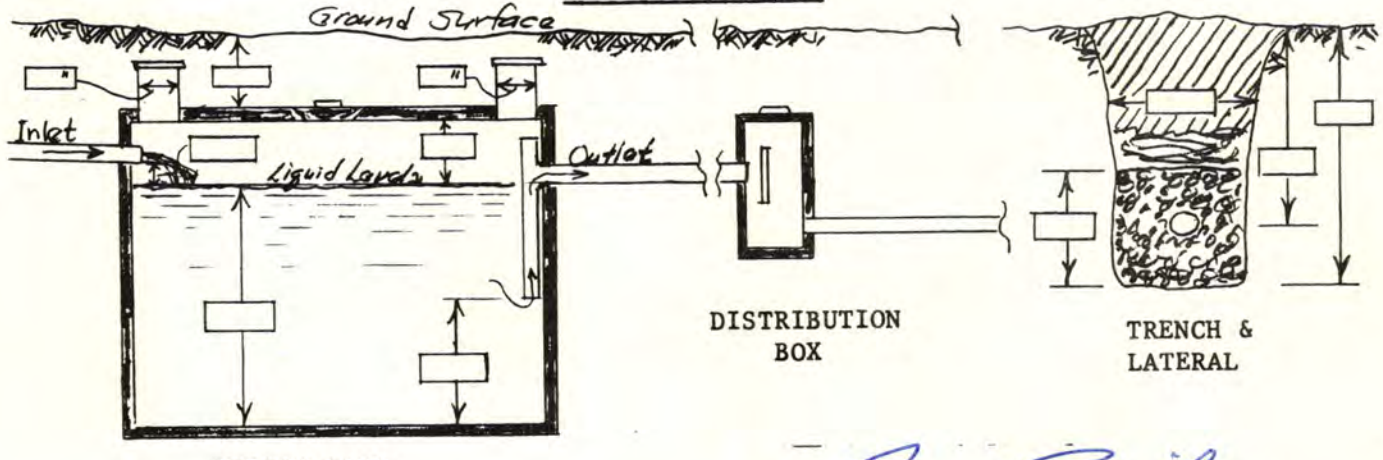
A. BUILDING SEWER:
1. Material Fibglass; Diameter ____ in.
2. Distance above basement floor 16 in.; or below basement floor ____ in.
3. Distance between dwelling and septic tank 40 ft.
4. Number of clean-outs 0.
5. Distances To:
   Well or Suction Line 120 ft.;
   Stream ____ ft.; Pressure Line ____ ft.;
   Property Line 80 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Fiber Glass; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 48 in.
3. Factory Built: Yes ☒ (Company Corrugate-Fiber) No ☐
4. Manholes: Over Inlet; diam. 12 in.
   Over Outlet; diam. ___ in.
   Below Grade ____ in.
5. Inlet: Baffle ☐; or Tee ☒
6. Outlet: Baffle ☐; or Tee ☒
   Depth of outlet below inlet 2 in.
7. Depth of top of tank below finished grade 36 in.
8. Distances To:
   Well or Suction Line 130 ft.;
   Stream ____ ft.; Pressure Line ____ ft.;
   Property Line ____ ft.

C. DISTRICTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes ☒ (Company Precast Tech) No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☐, No ☒ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Leach HALF-ROUND
2. Lateral Lines: Depth below grade 18 in. Number 3; Length of each line 160 ft Total length of Laterals 200 ft.; Slope 6 in/100 ft. Diameter of pipe 16 in.; Shape ∩ Material: concrete ☒; fiber GLASS X asbestos ☐; clay ☐; other ____ Distance between lateral lines 7 ft.
3. Trench Dimensions: Depth 40 in.; Width ~~60~~ 60 in.
4. Filter Material: Gravel. Depth of material from trench bottom 18 in.
5. Distances To:
   Well or Suction Line 120 ft.;
   Stream ____ ft.; Pressure Line 120 ft.
   Property Line 80 ft.
6. Percolation Rate: 14 min Per minutes/inch

TYPICAL SKETCHES



Roger Bailey
Signature of Applicant

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 103

SPECIFICATIONS

DATE: April 29, 1969

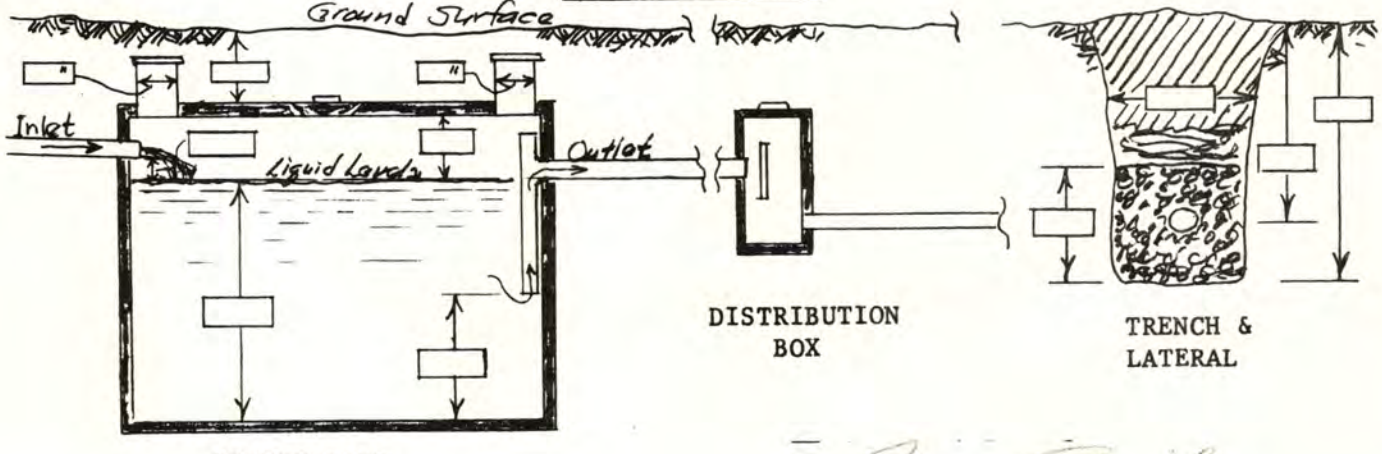
A. BUILDING SEWER:
1. Material Fibglass; Diameter ____ in.
2. Distance above basement floor 16 in.; or below basement floor ____ in.
3. Distance between dwelling and septic tank 40 ft.
4. Number of clean-outs 0.
5. Distances To:
Well or Suction Line 20 ft.;
Stream ____ ft.; Pressure Line ____ ft.;
Property Line ____ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 42 in.
3. Factory Built: Yes [X] (Company _____) No [ ]
4. Manholes: Over Inlet; diam. 12 in.
Over Outlet; diam. ___ in.
Below Grade _____ in.
5. Inlet: Baffle [ ]; or Tee [X]
6. Outlet: Baffle [ ]; or Tee [X]
Depth of outlet below inlet 2 in.
7. Depth of top of tank below finished grade 36 in.
8. Distances To:
Well or Suction Line 130 ft.;
Stream ____ ft.; Pressure Line ____ ft.;
Property Line ____ ft.

C. DISTRICTION BOX
1. Material ____; No. available outlets 5.
2. Factory Built: Yes [X], (Company _____) No [ ]
3. Dimension: Length ____ in.; Width ___ in. Depth ____ in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes [ ], No [X] (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: HALF ROUND
2. Lateral Lines: Depth below grade 18 in.
Number 3; Length of each line ___ ft
Total length of Laterals 200 ft.;
Slope ____ in/100 ft. Diameter of pipe 16 in.; Shape _____
Material: concrete [X]; fiber GLASS X
asbestos [ ]; clay [ ]; other _____
Distance between lateral lines 2 ft.
3. Trench Dimensions: Depth 40 in.;
Width 60 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 40 in.
5. Distances To:
Well or Suction Line ____ ft.;
Stream _____ ft.; Pressure Line 120 ft.
Property Line 10 ft.
6. Percolation Rate: 14 minutes/inch

TYPICAL SKETCHES



Roger Bailey
Signature of Applicant

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: 5-16-91

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

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 17; BLOCK ____

LOT 5; ADDITION COLONIAL ACRES; Street Address 6300 Cornell Rd

Directions to Property Colonial Acres 2nd Addn, Lincoln, NE 68516

Location of Well Community Well Tap Location: Inside ☐ Outside ☐

Location of Sewage System ____ Year Installed ____

	NAME	ADDRESS	PHONE
Present Owner:	Robert L Fehrs & Linda M DuBois	6300 Cornell Rd	423-9438
Tenant/Buyer:	Refinance		
Return to:	First Federal Lincoln	3901 Normal Blvd. Lincoln NE 68506	473 6104

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

Signature of Applicant Ken Kuta Loan Officer Address ____

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HEALTH DEPARTMENT USE ONLY

Date Received MAY 16, 1991 Received $150.00 Check ☒ Cash ☐

COMMUNITY SYSTEM PRELIMINARY STATUS--DATE 5/16/91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 5/16/91 by J.C.H.
Bacteria	☐	☐	Provisional:	☐	Date ____ by ____
Nitrate	☐	☐	Disapproved:	☐	Date ____ by ____

Comments: ____

See Attached Letter ☐

FINAL STATUS COMMUNITY SYSTEM

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

APPROVED BY Jerrold C. Hood R.S. DATE MAY 22, 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

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 Cornell Road Lincoln, NE. 68514

Twp 9N Range 7E Section 17 1/4 ___ 1/4 ___ Block ___ Lot 5 Addition Colonial Acres

Directions to Property ½ mile South of 56th & OLD Cheney Road - Turn rt. onto Concord Rd. - it is the 2nd left turn - House is 2nd on left

Location of Well _____ Tap Location: Inside ☒ Outside ☐

Location of Sewage System _____ Year Installed 1969

	NAME	ADDRESS	PHONE
Present Owner:	Robert Ferris - W# 412-1288 Linda Debois	6300 Cornell Road Lincoln Ne. 68514	423-9428
Tenant/Buyer:	Russ & Sally Semon	2845 Woodsdale Lincoln NE. 68502	421-2250
Return to:	Doug Hilford	First Commerce Mortgage PO Box 81231 Lincoln, Ne. 68501	472-4570

Signature of Applicant Russell Semon Address 2845 Woodsdale Date 7/22/93

Sally J Semon Lincoln, Ne. 68502

HEALTH DEPARTMENT USE ONLY

Date Received 7/23/93 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Gerald Hood **DATE:** 7/23/93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☒	Date 8/3/93 by L.C.H.
Bacteria	☒ ____/ml	☒ 8 /ml	Provisional ☐	Date 8/18/93 by L.C.H.
Nitrate	☒ 0.6 ppm	☐ ____ ppm	Disapproved ☐	Date 8/19/93 by L.C.H.

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

See Attached Letter ☐

FINAL STATUS

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

Approved by Gerald C. Hood R.E.H.S. Date 8/25/93

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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