FILE #2358

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

JANUARY 15, 1987 — THIS LICENSE OR PERMIT EXPIRES

SINTEK SERVICE CO. — LICENSEE OR PERMITTEE

6701 NO. 7 STREET, ROUTE #5 LINCOLN, NE 68521 — ADDRESS

T9N; R7E; Sec 20; Bk 3; Lot 3; Country Acres Addition; So. 56 St. — NAME OF ESTABLISHMENT, IF ANY / ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	018754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. — Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2358

DATE: 7-8-86

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 20 ;
   Block 3 : Lot 3 : Addition County Acres
   Street Address 1456 1st

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: 1 Mile ft.

Sinclair Inc Co.
Signature of Applicant (Owner or Lessee)

6710 N 07
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/14/86. Date Frwd. 7/15/86. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 7/16/86. Date Frwd. 7/16/86. ACTION: Approved ☒ Disapproved ☐ Signature:

3. City or County Engineer: Date Rec'd. 7-16-86. Date Frwd. 7-16-86. ACTION: Approved ☒ Disapproved ☐ Signature:

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 12-12-86 by: Sewer line & Lift pump.
Date: 12/24/86 by: J. C. H. need drawing
Date: by:

INSTALLATION FINAL WRITTEN APPROVAL
Date: 1/14/86 By: J. C. Hood

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

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
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B

FILE NO. 2358

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 7E ; Section & ¼ Section 20.
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: 7-6 to 7-9. Weather: Precip. _____ Temp. _____.

OWNER: Sintek Ser Co.
Address: 6710 No 7

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		7-8	1	7-8	4:30	7-9	7:30	6	3:30	5	60	1	
2		"	"	"	"	"	"	"	"	5¼	"	¾	
3		"	"	"	"	"	"	"	"	4⅞	"	1⅛	
4		"	"	"	"	"	"	"	"	4⅞	"	1⅛	
						"	"						
5		"	"	"	"	"	"	"	"	5	"	1	
6		"	"	"	"	"	"	"	"	5	"	1	

Sintek Ser Co.
Signature of Person Conducting Test

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

Address 6710 No 7 Phone 475-1484

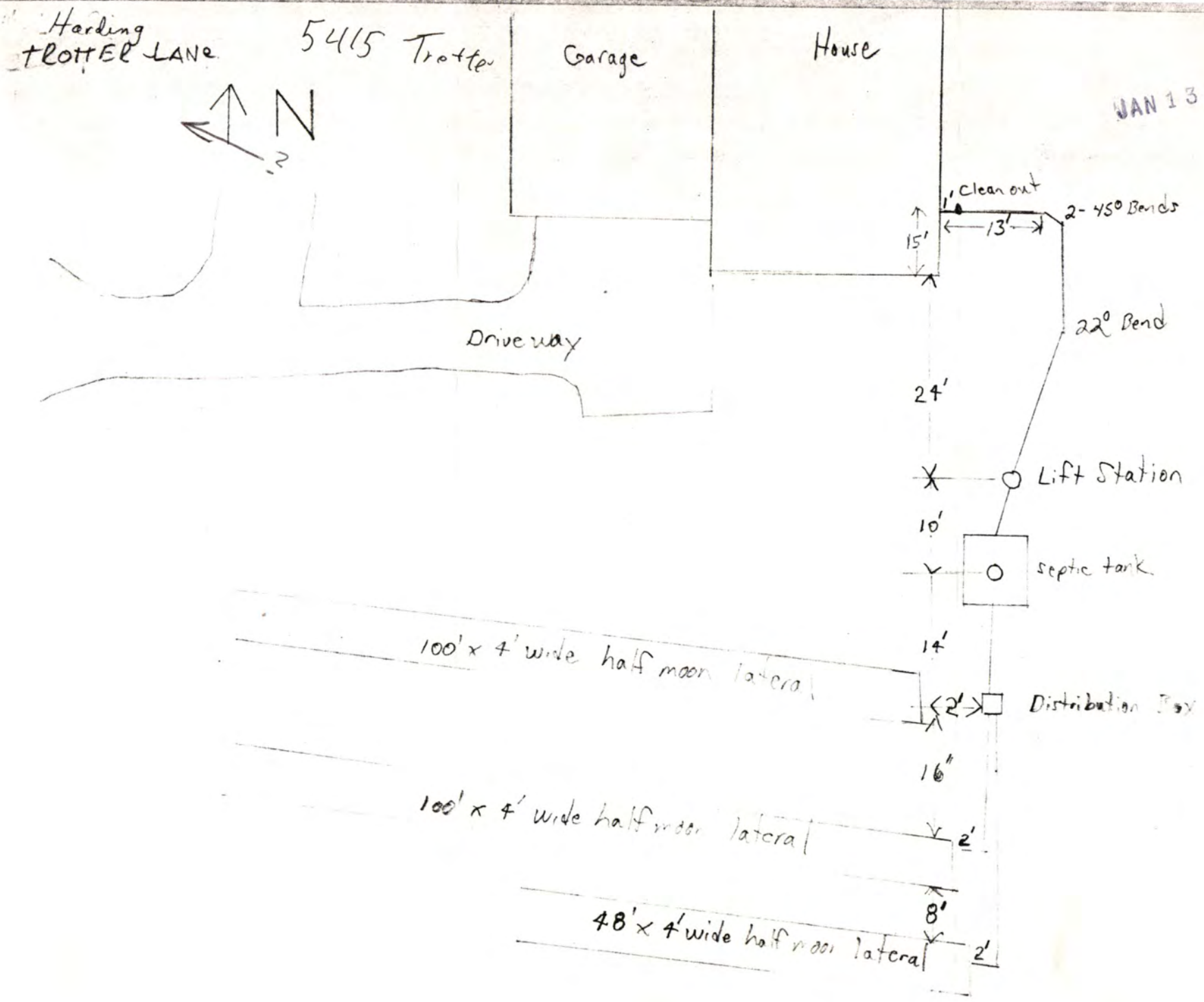
Test No 1 vg NE (Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

Approved Percolation Rate (a)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official


Harding
TROTTER LANE
5415 Trotter
Garage
House
JAN 13 1987
N
1' Clean out
2- 45° Bends
13'
15'
22° Bend
Driveway
24'
Lift Station
10'
septic tank
100' x 4' wide half moon lateral
14'
2'
Distribution Box
16'
100' x 4' wide half moon lateral
2'
8'
48' x 4' wide half moon lateral
2'

* Please return to us before 12-24-92. Thank you. 003

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: 12-11-92

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

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 20; BLOCK 3

LOT 3; ADDITION Country Acres; Street Address 5415 Trotter Road, Lincoln

Directions to Property _____

Location of Well COMMUNITY WATER SYSTEM Tap Location: Inside ☐ Outside ☒

Location of Sewage System WEST NORTHWEST OF HOUSE Year Installed 1986

	NAME	ADDRESS	PHONE
Present Owner:	William + Nancy Harding (same)		423-5415
Tenant/Buyer:	Work #'s: William 434-3000 Nancy 436-1000		
Return to:	Security Federal Savings	P.O. Box 80609, Lincoln 68501-0609	474-4444

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

Signature of Applicant Pamela L. Kempes Address Security Federal Savings

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HEALTH DEPARTMENT USE ONLY

Date Received 12-14-92 Received $150.00 Check ☐ Cash ☐ #30534 CC

PRELIMINARY STATUS--DATE DECEMBER 16, 1992

COMMUNITY WATER SYSTEM

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 12/16/92 by CH
Bacteria	☐	☐	Provisional:	☐	Date _____ by ___
Nitrate	☐	☐	Disapproved:	☐	Date _____ by ___

Comments: _____

_____ See Attached Letter ☐

FINAL STATUS COMMUNITY WATER SYSTEM

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

APPROVED BY Jerrold C. Nood R.E.H.S. DATE DECEMBER 16, 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