FILE # 2820

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

6 MONTHS — THIS LICENSE OR PERMIT EXPIRES

JOHN STROMEYER — LICENSEE OR PERMITTEE

4235 N.W. 57TH ST. COURT, LINCOLN, NE 68524 — ADDRESS

T9N; R7E; Sec. 20; Blk 4; Lot 3; Country Acres 1st Addition — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE

NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00		$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. — Date and Amount

$60.00

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. 2820

DATE: 4/8/89

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 4 : Lot 3 : Addition Country Acres 1st Addition
   Street Address _____

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4 . Describe _____

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

4. Distance to public sewer: _____ ft. EXPERIMENTAL SYSTEM

John Stuhmyer
Signature of Applicant (Owner or Lessee)

4235 NW 57th St court
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/10/89 . Date Frwd. 4/11/89 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 4/11/89 . Date Frwd. 4/11/89 . ACTION: Approved ☒ Disapproved ☐ Signature: _____

3. City or County Engineer: Date Rec'd. 4-11-89 . Date Frwd. 4-11-89 . ACTION: Approved ☒ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL ~~WELL PERMIT RECEIVED.~~

Site Visits:
Date: 10-20-89 by: sewer line & tank only
Date: 10/23/89 by: L.C.H.
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 10/23/89 By: Jerrold Nood

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

* PROVISIONAL APPROVAL EXPERIMENTAL SYSTEM

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

FILE NO. _____

PROPERTY WHERE SOIL TESTED: Country Acres 1st Addition

Location: Township _____; Range _____; Section & ¼ Section _____.
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: 1/5/88 to 1/6/88. Weather: Precip. 0 Temp. 50°.

Lot 3 Block 4

OWNER: Kent Forney

Address: 5501 Cooper Ave

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"	1/5	1:00	1/6	1:00	1/6	3:00	6"	3:30	6"	30	1/8	
2	"	"	"	"	"	"	"	"	"	"	"	1/2	
3	"	"	"	"	"	"	"	"	"	"	"	0	
4	"	"	"	"	"	"	"	"	"	"	"	3/4	
5	"	"	"	"	"	"	"	"	"	"	"	1/2	
6	"	"	"	"	"	"	"	"	"	"	"	1/2	

John L Stuhmer
Signature of Person Conducting Test

Address 4235 NW. 57th ST. Phone 470-2262

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

(Do not write below this line)

REVIEWING ACTION

Remarks: Too slow for conventional septic
Soil Type (SCS): _____
Date: APRIL 10, 1989

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

Jerrold C. Hood
Signature of Reviewing Official

RECEIVED OCT 3 1 1989

FORM 20104-0477
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: 471-7800

D

DATE: _____

FILE NO. _____

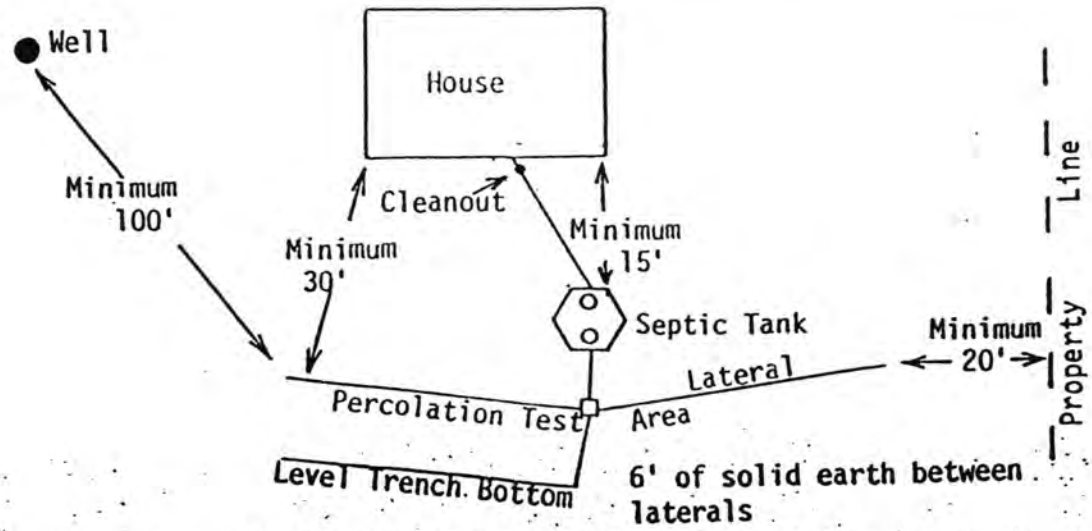
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material #160; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 14 in.
3. Distance between dwelling and septic tank 75 ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Pre Cast; No. of compartments _____.
2. Capacity 1500 gals.;
3. Factory Built: Yes ☒ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☒ Below ☐ Grade 1" in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 24" in.
8. Distances to:
Well or Suction Line 560' ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Pre Cast; Number - available outlets _____.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank 3 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round 4 or
Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 2; Length of each line _____, _____, _____, 300 ft.;
Total length of laterals 300 ft.;
Distance between lateral lines _____ ft.
3. Trench dimensions: Width 16 ft.; Slope — in/100 ft.; Average Depth 6' in.
4. Filter Material: 3/8 to 1/2 Road Gravel
Depth of Material 30 in.
5. Distances to: community well
Well or Suction Line 500 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 20 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

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: _____

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

Legal Description of Property: TWP.____; RANGE ____; SECTION _____; BLOCK ____

LOT ____; ADDITION _____; Street Address _____

Directions to Property _____

Country Acres 1st Addition is WEST off of South 56th ST.

Location of Well CONTACT OWNER (ROCHELLE) Tap Location: Inside ☐ Outside ☐

Location of Sewage System FOR DETAILS Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	Kent + Rochelle Forney	5001 Trotter Circle	421-6456
Tenant/Buyer:	N/A	LINCOLN NE 68516	
Return to:	VISTAR BANK	6940 "O" ST LINCOLN 68505	465-7570

421-6456

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

Signature of Applicant [signature] FOR VISTAR BANK Address _____

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HEALTH DEPARTMENT USE ONLY

Date Received 6/6/91 Received $75.00 (150.00) Check ☒ Cash ☐

COMMUNITY PRELIMINARY STATUS--DATE 6/6/91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 6/6/91 by C.C.H.
Bacteria	☐	☐	Provisional:	☐	Date _____ by ____
Nitrate	☐	☐	Disapproved:	☐	Date _____ by ____

Comments: _____

_____

_____ See Attached Letter ☐

FINAL STATUS COMMUNITY

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

APPROVED BY Donald C. Hoak M.D. DATE JUNE 14, 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

Larry Schwarck 10-25-89

