CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 41

INDIVIDUAL SEWAGE DISPOSAL SYSTEM
TYPE OF LICENSE OR PERMIT

October 9, 1968
THIS LICENSE OR PERMIT EXPIRES

Max Q. Snyder
LICENSEE OR PERMITTEE

4500 South 47th Street
ADDRESS

NAME OF ESTABLISHMENT, IF ANY

T 9N; R 7E; Sec. 22; Block 2; Lot 5 (Clarendon Hills First Add.)
ADDRESS

REMARKS: Non-Transferable

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
143-1535	10.0116	24.0114	6-2

SERIAL NO.	DATE	AMOUNT
12794	APR 9 68	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-30(67) REQUEST FOR SITE CLEARANCE FOR 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. 41

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described herein:

1. Legal description of property: Twp. ~~9~~ 9; Range 7E; Section 22;
Block 2; Lot 5; Addition ~~Stevens~~ Mill Front
Street Address _____.

2. Property Use: Residential _____ ☑; Commercial _____ ☐
No. of Bedrooms 3. Describe: _____
_____
Other Use _____ ☐
Describe: _____
_____

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

4. Distance to public sewer: 3 Miles ft.

Mary Q Snyder
Signature of Applicant (owner or lessee)

4500 So 47th
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 4/9/68. ACTION: Approved ☐ Disapproved ☒
Date Frwd. 4/9/68. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____. ACTION: Approved ☐ Disapproved ☒
Date Frwd. _____. Signature: Charles Seale By RB

3. City Engineer: Date Rec'd. _____. ACTION: Approved ☐ Disapproved ☐
Date Frwd. 4-9-68. Signature: Richard A. Simpson

REMARKS OR REASONS FOR DISAPPROVAL _____

FINAL ACTION ON SITE CLEARANCE: Approved ☐ Disapproved ☐

Date Applicant Notified: _____ Signature _____

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. 41

DATE: April 9, 1968

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. 9; Range 7E; Section 27;
Block 2; Lot 5; Addition Clairendon Hills First
Street Address _____.

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. of Bed Rooms 3 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.)

Max O Snyder
Signature of Applicant (owner or lessee)

4500 So 47 St
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 [ ]: 4/9/68
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ by: _____

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. 41

PROPERTY WHERE SOIL TESTED:
Location: Township _____
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: John Mouth
Address RR 8

Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: _____ to _____. Weather: Precip. ____ Temp. ___F.

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				
Hole 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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	12	Mar 1	8:00	Mar 2	8:00	Mar 2	8:30	12	1:00	10	30	2	15/1
2	12	Mar 2	8:00	Mar 3	8:00	Mar 3	8:30	12	1:00	10½	30	2½	15/1¾
3	12	Mar 2	8:30	Mar 3	8:30	Mar 3	8:30	12	1:00	9	30	3	15/1½
4	12	Mar 2	8:30	Mar 3	8:30	Mar 3	8:30	12	1:00	11	30	1	15/½

Mary B Snyder
Signature of Person Conducting Test

Address _____
Phone: _____

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: Percolation reasonable

Approved Percolation Rate(s)
A. 15 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: April 9, 1968

Gerald C. Hood
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. 41

SPECIFICATIONS

DATE: April 9, 1968

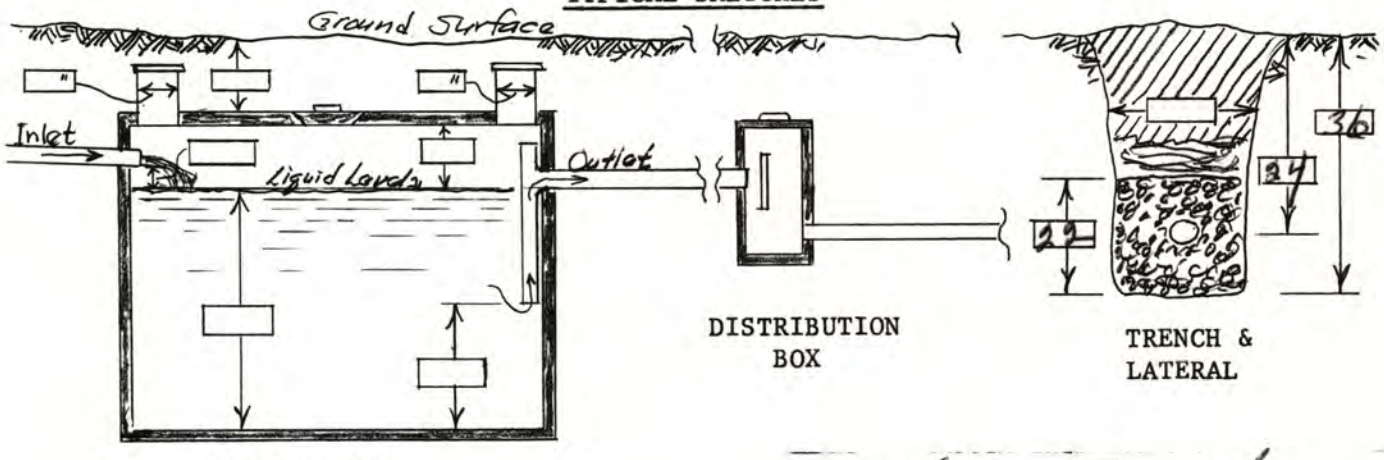
A. BUILDING SEWER:
1. Material CAST IRON; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor ___in.
3. Distance between dwelling and septic tank ___ft.
4. Number of clean-outs ___.
5. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 47 in.
3. Factory Built: Yes ☒ (Company Pre Cast Sp
No ☐
4. Manholes: Over Inlet; diam. ___in.
Over Outlet; diam. ___in. 24 in
Below Grade 12' in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☒
Depth of outlet below inlet 4 in.
7. Depth of top of tank below finished grade ___in.
8. Distances To:
Well or Suction Line 65 ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line 100 ft.

C. DISTRIBUTION BOX
1. Material Concrete No. available outlets 2.
2. Factory Built: Yes ☒, (Company Same
___ No ☐
3. Dimension: Length ___in.; Width ___in.
Depth ___in.
4. Distance from Septic Tank 11 ft.
5. Serial Distribution: Yes ☒, No ☒
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Concrete
2. Lateral Lines: Depth below grade 18 in.
Number 3; Length of each line 50 ft
Total length of Laterals 190 ft.;
Slope 6' in/100 ft. Diameter of pipe 36" in.; Shape ½ moon
Material: concrete ☒; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth 36 in.; Width 36 in.
4. Filter Material: Sand Gravel.
Depth of material from trench bottom 22 in.
5. Distances To:
Well or Suction Line 65 ft.;
Stream ___ft.; Pressure Line ___ft.
Property Line 100 ft.
6. Percolation Rate: 15 minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

Mac Snyder
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: 4-9-90

☐ Evaluation of the Sewage Disposal System ☒ Enclosed is $75.00 81.50 00

Legal Description of Property: TWP. 9N ; RANGE 7E ; SECTION 27 ; BLOCK 2

LOT 5 ; ADDITION CLEARVIEW HILLS 1ST ADDITION ; Street Address 7420 So. 70th

Directions to Property South of Hwy 2 about 1½ Miles on So. 70th

Location of Well _____ Tap Location: Inside ☐ Outside ☒

Location of Sewage System _____ Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	D. Durrell	7420 So 70th	432 1744
Tenant/Buyer:			
Return to:			

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

Signature of Applicant _____ Address _____

==========

HEALTH DEPARTMENT USE ONLY

Date Received _____ Received $75.00 Check ☐ Cash ☐

PRELIMINARY STATUS--DATE 4/20/90

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 4/20/90 by L.C.H.
Bacteria	☒	☐	Provisional:	☐	Date _____ by ____
Nitrate	☒	☐	Disapproved:	☐	Date _____ by ____

Comments: IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY (IT DOESN'T APPEAR TO HAVE BEEN) IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. SYSTEM IS NOW CLOSE TO 40 YEARS OLD. See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ronald C. Wood M.D. DATE APRIL 24, 1990

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 7420 So 70th Street

Twp 9N Range 7E Section 22 1/4 ___ 1/4 ___ Block 2 Lot 5 Addition Clarendon Hills 1st Addn

Directions to Property South of Pine Lake Road ½ mile SE corner of 70th Street and Badger Drive

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

Location of Sewage System South of House Year Installed 1969

	NAME	ADDRESS	PHONE
Present Owner:	Judy Mieth	7420 South 70th Lincoln NE 68516	423-8146 486-7393
Tenant/Buyer:			
Return to:	Judy Mieth Commercial federal mortgage	7420 South 70th Lincoln NE 68516 "D" Lincoln NE 68505	432-1250 ~~483-8144~~

Signature of Applicant Judy Mieth Address 7420 South 70th Lincoln NE 68516 Date 10/15/93

HEALTH DEPARTMENT USE ONLY #4536 S.B of Cairo

Date Received 10/15/93 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 10/21/93

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☐	☒	Approved ☒	Date 10/22/93 by JCH
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ 0.4 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: WELL IS NOT PROPERLY WIRED CAP IS ON ASKEW AND ISNOT SECURED. ~~CONCRETE FOUNDATION PLACE JUST EAST OF EASTERNMOST TANK~~ BUT DON'T SEE ANY LEAKAGE. IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY (DOESN'T APPEAR TO HAVE BEEN) 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 Jerrold C. Hood R.E.H.S. Date 10/27/93

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.

153

008

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 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 7420 S 70

Twp 9N Range 7E Section 22 1/4 ___ 1/4 ___ Block 2 Lot 5 Addition CLARENDON HILLS

Directions to Property LOT 5 B2 Clarendon Hills 1st Add.
S of Highway 2 on 70th

Location of Well 10 ft from NE Corner of House Tap Location: Inside ☒ Outside ☐

Location of Sewage System Septic East of Driveway Year Installed 1969
Laterals run South East 8 ft East retaining wall

	NAME	ADDRESS	PHONE
Present Owner: Name	Judy Milth	7420 S 70 Lincoln, NE 68516	423-8146
Tenant/Buyer:	Bob & Victoria Northrup	2525 "N" STR LINCOLN NE 68510	476-9105
Return to:	MARY BRAKE c/o WOODS BROS. Realty	3201 Pioneers Blvd Lincoln, NE 68502	402 434 3600

Signature of Applicant [signature] Address 2525 N" Lincoln NE 68510 Date 11/26/96

HEALTH DEPARTMENT USE ONLY

Date Received 12/02/96 Received $150.00 Check ☒ Cash ☐ #5658

PRELIMINARY STATUS--By Jerold C. Hood **DATE:** 12/3/96

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☐	☒	Approved ☒	Date 12/27/96 by PD
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ 0.2 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: KIND OF A WIDE DISHED DEPRESSION AROUND WELL. IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter ☐

12-27-96 Soiled added sample collected PD

FINAL STATUS

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

Approved by [signature] Date 12/30/96

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.