Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION
3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

Permit # 01390069401

Issued 04/26/01
Expires 10/26/01
Revenue Code 3157

FEES: $100.00

TOTAL: $100.00

Establishment

JOHN IWAN
T9N R7E SEC 22
CLARENDON HILLS BLK 2 LOT 11
7605 S 75 STREET

Permittee

JOHN IWAN
7605 S 75 ST
LINCOLN NE 68516

[redacted], Health Director

Carol Dorgan

015588

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

Individual Sewage Disposal System
Application to Alter, Extend or Repair

☒ Municipal Code 24.38 ☐ County Resolution Number 2832

Date: 4-26-01	File No.: 01390694

The undersigned hereby applies for a permit to: ☐ **ALTER** ☐ **EXTEND** ☑ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 9N Range 7E Section 22 1/4 Section _____
   Block 2 Lot 11 Addition CLARENDON HILLS 1ST
   Street Address 7605 S 75TH

2. **Property use:** ☑ residential ☐ commercial ☐ other use
   Number of bedrooms 4 Describe _____

3. **Type of Present Individual Disposal System:** ☑ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair:** Replace crushed Septic Tank w a new 1250 Gal Conc. Septic Tank

5. **Work to be done by:** ☐ owner ☑ contractor's name Dirt Works Plus Inc

6. **Estimated project:** a. Repair, replace or minor extension with a cost of less than $400.00 (no fee required).
   b. Total cost is greater than $400.00 (Return fee with this application).
   c. A "construction permit" is required if the use, operation, location, or type of the system is being changed.

Print Name JOHN IMAN Address 7605 S 75TH Phone 421-6864
Applicant Signature (owner or lessee) _____

Please include the permit fee ($50.00) with this application

(Please do not write below this line)

Date rec'd 4/26/01 REVIEW: ☒ approved ☐ disapproved By: Jerrold C. Hood

Site visits:
Date 4/26/01 By J. Hood
Date _____ By _____
Date _____ By _____

Installation final written approval
Date APRIL 26, 2001 By Jerrold C. Hood

Return to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE. 68510
441-8022

Rec'd 4/26/01 ms
#1065 $100.00

White - EH Pink - Business Office Revised 1/98

FILE # W-305

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL WATERWELL CONSTRUCTION — TYPE OF LICENSE OR PERMIT

6 MONTHS — THIS LICENSE OR PERMIT EXPIRES

LINDOLN DRILLING 7331 VINE ST. — LICENSEE OR PERMITTEE — ADDRESS — LINCOLN, NE 68505

TON: RZE: Blo: 22; Blk 2; Lot 11; 7605 So. 75th St.; Clarendon Hills 1st Add. — NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NON TRANSFERABLE

NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 45.00	019851	$ 45.00

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

RECEIVED NOV 14 1988

FORM: 20222-0483
REQUEST FOR SITE CLEARANCE AND PERMIT FOR INDIVIDUAL WATER WELL

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN, NEBRASKA 68502
PHONE: 471-7800

FILING FEE $45.00

FILE NO. W-305

DATE: 11-10-88

The undersigned hereby requests: Site Clearance and Permit to construct a new individual water well ☒ ; Permit existing well ☐ ; well repair or alteration involving opening of well ☐ ; in conformance with appropriate ordinance, as described herein:

1. Legal description of property: Twp. 9N : Range 7E : Section 22
   Block 2 : Lot 11 : Addition 7605 So 35th St CLARENDON HILLS 1ST ADDITION
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe
3. Distance to Public Water Supply: ____ Ft.
4. Intended use of well

A.O. Antrim by Keith Muenchau
Signature of Applicant (owner or lessee)

7331 Vine St
Address
Lincoln, Ne 68505

Sewage Permit Applied For Yes ☐ No ☐ Not Applicable ☒

1. Health Department: Date Rec'd 11/14/88. Date Frwd. 11/15/88. Action: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 12/30/88. Date Frwd. 12/30/88. Action: Approved ☐ Disapproved ☐ Signature:
3. City or County Engineers: Date Rec'd 11/15/88. Date Frwd. 11/15/88. Action: Approved ☒ Disapproved ☐ Signature: Jerome G. Obrist

REMARKS OR REASONS FOR DISAPPROVAL
4/10/89 by J.C. Hood
4/6/89 by J.C. Hood

Site Visits:
Date: 2/15/89 by J.C. Hood
Date: 2/23/89 by J.C. Hood
Date: 2/27/89 by J.C. Hood
3/2/89 J.C. Hood
3/22/89 J.C. Hood
3/23/89 J.C. Hood

Nitrate Level <0.1 PPM
Bacteriological Analysis Satisfactory
Yes ☒ No ☐

INSTALLATION FINAL WRITTEN APPROVAL
Date: 4/12/89 By: J.C. Hood

Health Department copy: White
Engineers Copy: Light Green
Building Inspectors Copy: Light Blue

FORM 23-13

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. W-305

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN NE 68502
Phone: 471-7800

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 22 T. 9N R. 7E Block 2 Lot 11 Addition Clarendon Hills 1st.
Owner ~~John Doe~~ A.C. ANTRIM Address 7605 So 75th
LINCOLN, NE. 68516

LOG OF WELL	
	Description
Depth/Ft. to	Top Soil
1 - 22	Yellow clay
22 - 27	Sand Stone
27 - 86	Yellow clay
86 - 112	Blue Clay (Grey)
112 - 116	Lite Grey clay
116 - 145	Red & white clay with Sandstone layers
145 - 165	White clay
165 - 240	Very fine Sandstone & clay
240 - 260	fine to med. Sandstone 80%
260 - 268	Gravel Shoe with Sandstone mix.

WELL COMPLETION RECORD

Drilling Method: Rotary
Depth (from ground level), Ft. 266
Date Completed 1-31-89

Casing: Length, Ft 261 ; Dia. In. 4
Wall Thickness, Inc. 160 ; type PVC.

Screen: Length, Ft. 20 Dia. In. 4
Type PVC ,slot Size .016

Drop Pipe: Length, Ft. 260 Dia. In. 1

Water Level, Surface to top of water, Ft.:
Static 168 , Pumping 180

Yield: 12 ggm, Measured ☒ ,Est. ☐
Chlorination Completed Yes ☒ No ☐

The above information including "Log of Well" is a true record of the job performed by me.

Driller Keith Meacham
(Signed)

Address 7331 Vine St

Date 2-10-89

REMARKS NITRATE NITROGEN < 0.1 p.p.m. BACTERIOLOGICAL O.K.

DO NOT WRITE BELOW THIS DOUBLE LINE

Health Department forwarded copy of record to Nebraska Conservation and Survey Department for Scientific Record ☒

FORM 23-4

AREA OF SEPTIC SYSTEM

N

HOUSE

GARAGE

89'

WELL