LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 91380075701

Issued 10/03/91
Expires 04/03/92

ESTABLISHMENT

DAN NELSON
T9N R7E SEC 22
AMBERHILL ESTATES BLK 2 LOT 1

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

DAN NELSON
7800 AMBERHILL RD
LINCOLN NE 68516

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
10/4/91	PAID

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: $_____

FILE NO._____

DATE: 9-24-91

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 22 ;
   Block 2 : Lot 1 : Addition Amber Hill First Est.
   Street Address 7800 Amber Hill Rd.

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms ~~2~~ 3. Describe_____

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

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

Dan H. Nolan
Signature of Applicant (Owner or Lessee)

7800 Amber Hill Rd Lincoln NE 68516
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/25/91. Date Frwd. 9/25/91. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 9/25/91. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Mick Dippery
3. City or County Engineer: Date Rec'd. 9-25-91. Date Frwd. 9-25-91. ACTION: Approved ☒ Disapproved ☐ Signature: K D Myhrum

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 8-31-92 by: P.D
Date: 9-8-92 by: P.D
Date: 9-9-92 by: PD Need drawing

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2-10-93 By: Karl Myhrum

* Provisional approval only

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:

Location: Township 9N ; Range 7E ; Section & ¼ Section SE¼ 22
Property Dimensions: 320 ft. x 420 ft. Area: 3 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐
Dates of Tests: 9-20-91 to 9-21-91 . Weather: Precip. 0 Temp. 65

OWNER: Daniel Nelson
Address: 7800 Amber Hill Rd.

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	24	9-20	5pm	9-20	9pm	9-21	11:30am	10"	12:00	10⅛"	30	⅛"	
2	30							17⅛"		17½"		⅜"	
3	30							24¾"		25⅛"		⅜"	
4	27							19¼"		19½"		¼"	
5	34							26⅛"		26⅜"		¼"	
6	23							13⅝"		13¾"		⅛"	

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

Daniel Nelson
Signature of Person Conducting Test

Address 7800 Amber Hill Rd. Phone 421-2688

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 120 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: September 25, 1991

Jerrold C. Hood
Signature of Reviewing Official

MAR 2 1998

D

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number: 9138007S7

Sewage Disposal System

As Built Plans & Specifications

Date _____

System Location (Indicate correct number and street)

Address 7800 Amber Hill Rd (no rural route) City Lincoln NE, Zip _____

A. Building Sewer

1. Material: Concrete
   Diameter: 8' in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 30 in.
3. Distance between dwelling and septic tank: 25 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 120' ft.
   stream _____ ft.
   pressure line 29 ft.
   property line 75 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 2
2. Capacity: 1500 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☑ below grade 4 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 24 in.
8. Distances to: Well or suction line 120 ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 2
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 15' ft.

D. Absorption Field

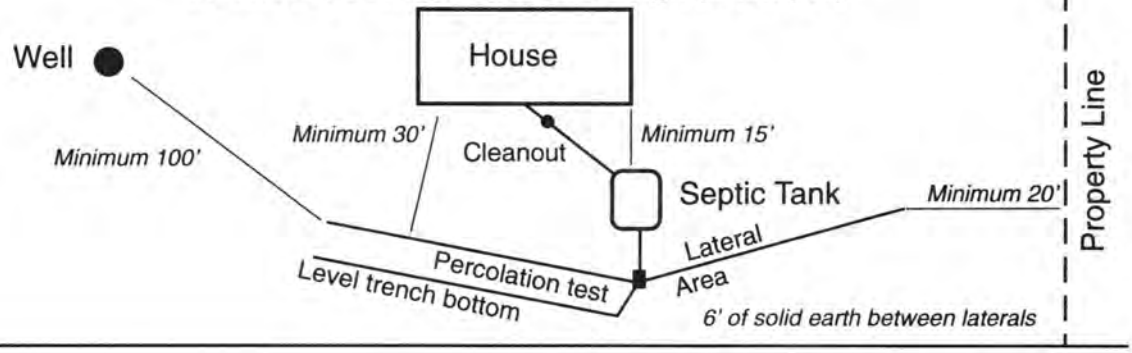
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☑ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 6"
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 100 ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 8' ft.
   Slope 0/6 in/100 ft.
   Average depth 3' in
4. Filter material: 3/4" Gravel
   Depth of material 60" in.
5. Distances to: Well or suction line 250 ft.
   Stream _____ ft.
   Pressure line 175' ft.
   Property line 75 ft.

Indicate North with Arrow

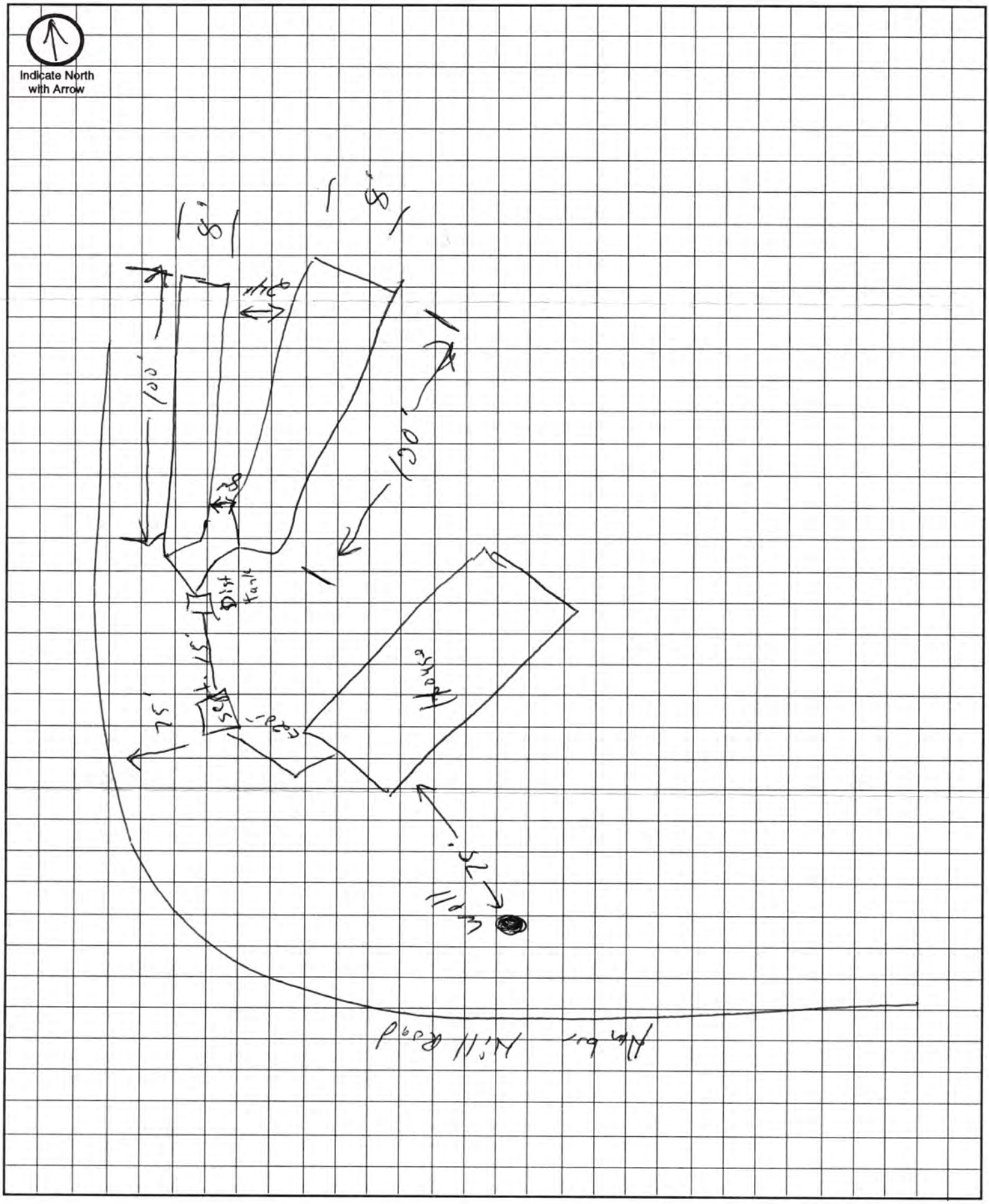
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



Approximate Scale: _____ft. = _____ grid line/s

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

WATER WELL

No. 91400027001

Issued 10/03/91
Expires 04/03/92

ESTABLISHMENT

DAN NELSON
T9N R7E SEC 22
AMBERHILL ESTATES BLK 2 LOT 1

FEES: Permit 019851 $74.00

Total $74.00

PERMITTEE

DAN NELSON
7800 AMBERHILL RD
LINCOLN NE 68516

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
10/4/91	PAID

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

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: 471-8000

FILING FEE $_____

FILE NO._____

DATE: 9-24-91

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 1 : Addition Amber Hill First Add.
2. Well use: Residential ☑ ; Commerical ☐ ; Other Use ☐
   Describe_____
3. Distance to Public Water Supply: ? Ft.
4. Intended use of well House Hold use

South of 84th & Hwy #2

David Nelson
Signature of Applicant (owner or lessee)

7800 Amber Hill Rd.
Address

City Water Yes ☐ No ☑

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 9/25/91. Action: Approved ☒ Disapproved ☐
   Date Frwd. 9/25/91. Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 9/25/91. Action: Approved ☒ Disapproved ☐
   Date Frwd._____. Signature: Rudy Lipsky
3. City or County Engineers: Date Rec'd 9-25-91. Action: Approved ☒ Disapproved ☐
   Date Frwd. 9-25-91. Signature: John G. Murray

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 1/6/93 by J. C. Hood
Date: _____ by_____
Date: _____ by_____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 1/8/93 By: J. C. Hood

Department copy: White
's Copy: Light Green
Inspectors Copy: Light Blue

RECEIVED NOV 2 (1992

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

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN NE 68502
Phone: 471-7300

DATA SHEET FOR WATER WELLS 7900 Amber Hill Rd

Legal Description: Sec. 22 T. 9N R. 7E Block 2 Lot 1 Addition AMBER HILL ESTATES

Owner Daniel Nelson Address 3310 Cornelian St Apt 7 Lincoln, ne 68516

LOG OF WELL	
	Description
Depth Ft. To 81	yellow clay & rocks
81-129	gray clay sand layers
129-132	fine Sand
132-156	red & white Clay
156-201	red & white Sand layers
201-216	Sandstone fine
216-249	medium SS
249-258	white Clay
258-284	Sandstone
284-286	red & white Clay
286-292	50% Sandstone & gray Clay

WELL COMPLETION RECORD

Drilling Method: Rotary

Depth (from ground level), Ft. 290

Date Completed 9-26-92

Casing: Length, Ft. 270; Dia. In. 5

Wall Thickness, Inc. .214; type PVC

Screen: Length, Ft. 20 Dia. In. 5

Type Saw Slot, slot Size .020

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

Water Level, Surface to top of water, ft.:

Static 210, Pumping 230

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 Roger Strader Strader Drilling (Signed)

Address Rt 1 Box 89A Pickrell, ne. 68422

Date 11-14-92

REMARKS Lincoln Drilling
Installed Pump site
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
SEWAGE SYSTEM

