FILE #2653

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

OCTOBER 14, 1988 — THIS LICENSE OR PERMIT EXPIRES

WAYNE R. GRUBER/LARRY SCHWARCK, 849 SO. 32 STREET, LINCOLN, NE 68510 — LICENSEE OR PERMITTEE / ADDRESS

T9N; R7E; Sec 22; Bk 3; Lot 4; Amber Hill — 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

RECEIVED APR 1 4 1988

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. 2653

DATE: 4 - 11 - 88

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 3 : Lot 4 : Addition Amberhill
   Street Address _____

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

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

4. Distance to public sewer: _____ ft. ~~EXPERIMENTAL CYCLED~~

Jayme R Gruber by
Larry Schwank
Signature of Applicant (Owner or Lessee)

849 So 32nd 68510
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/14/88 . Date Frwd. 4/14/88 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 4-14-88 . Date Frwd. 4-14-88 . ACTION: Approved ☒ Disapproved ☐ Signature: Paul Boese

3. City or County Engineer : Date Rec'd. 4-14-88 . Date Frwd. 4-14-88 . ACTION: Approved ☒ Disapproved ☐ Signature: R.D. Mahrt

REMARKS OR REASONS FOR DISAPPROVAL HAVE WELL PERMIT

Site Visits:
Date: 10/17/88 by: J.C. Hood
Date: _____ by: _____
Date: _____ by: _____

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

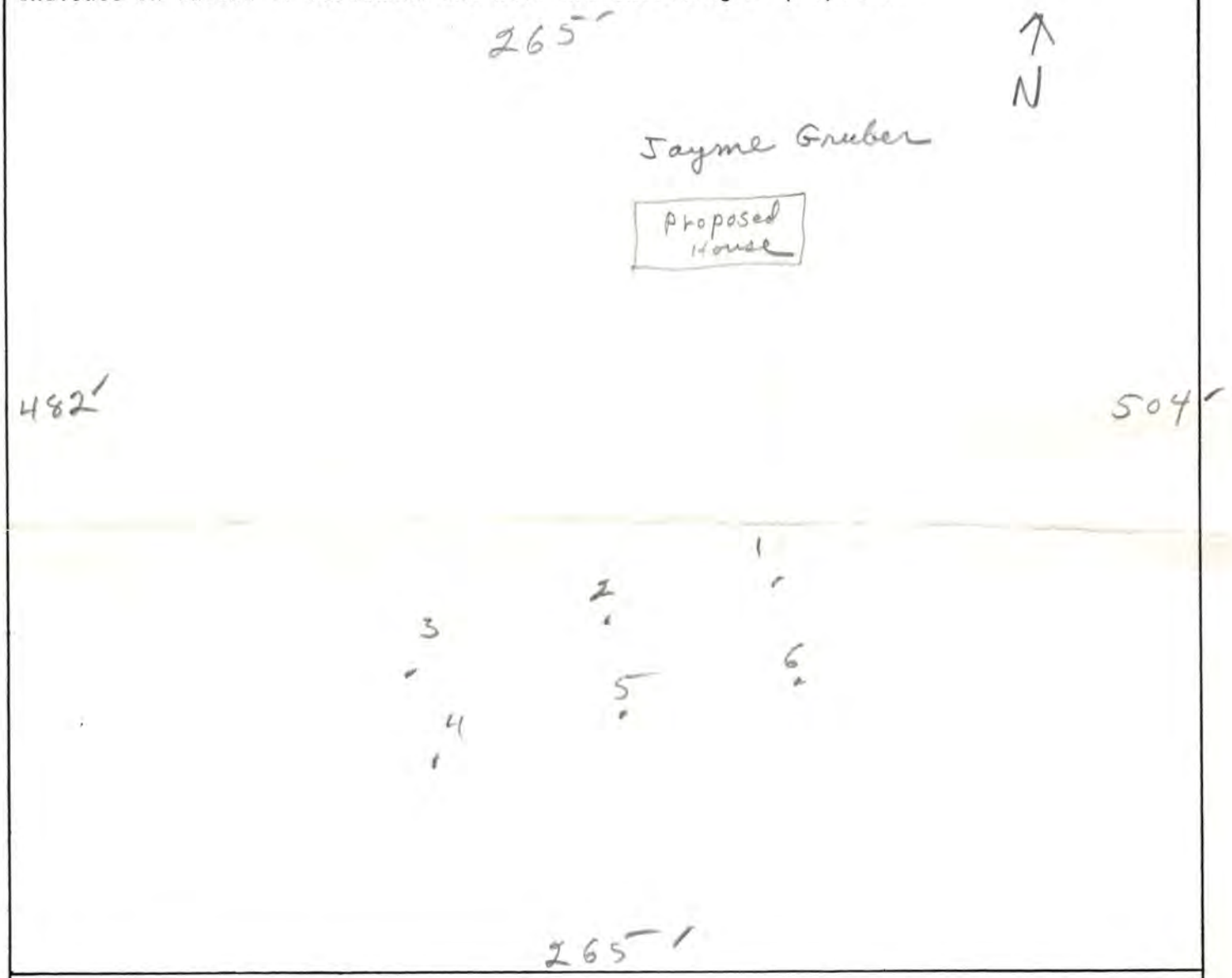
INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/18/88 By: Jerrold C. Hood

FORM 23-43

RECEIVED APR 14 1988

FORM 20102-0477 PRELIMINARY 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 **C**
Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.	FILE NO. 2653

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank _____ gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed ____ sq.ft.

_____
Signature of Reviewing Official

RECEIVED APR 14 1988

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. 2653

PROPERTY WHERE SOIL TESTED:

Location: Township 9N; Range 7E; Section & ¼ Section 22.
Property Dimensions: 482 ft. x 265 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: 4-10 to 4-11-88. Weather: Precip. - Temp. 50.

OWNER: Jayne Gruber

Address: 849 So 32nd 68510

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	4-10	10 AM	4-11	8:35 AM	4-11	11:35	10 1/2	1205	10 5/8	30	1/8	
2	30							9 1/2		9 5/8		1/8	
3	30							8 1/4		8 1/2		1/4	
4	32							12		12 1/8		1/8	
5	30							10 1/2		10 1/2		—	
6	32							12 1/4		12 1/2		1/4	

Larry Schwarck
Signature of Person Conducting Test

Address 8200 old cheney Phone 489-7294

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

(Do not write below this line)

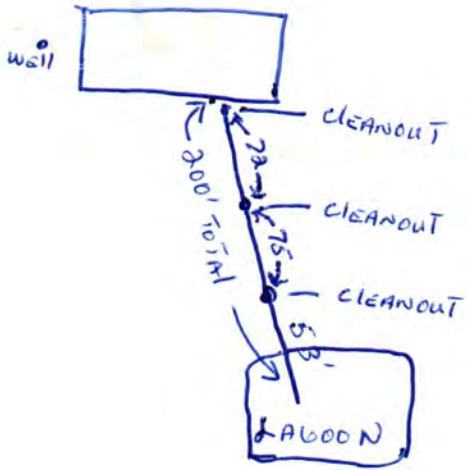
REVIEWING ACTION

Remarks: TOO SLOW FOR CONVENTIONAL SYSTEM
Soil Type (SCS): PAWNEE CLAY LOAM
Date: April 14, 1988

Approved Percolation Rate (a)
A. 240 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

8101 AMBER HILL RD
JAYME GRUBER



ATT: JERRY HOOD

GO
BIG
RED

FILE #W-247

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL WATER WELL CONSTRUCTION — TYPE OF LICENSE OR PERMIT

OCTOBER 11, 1988 — THIS LICENSE OR PERMIT EXPIRES

JAYME R. GRUBER — LICENSEE OR PERMITTEE

849 SO. 32 STREET — ADDRESS

LINCOLN, NE 68510

T9N; R7E; Sec 22; Bk 3; Lot 4; Amber Hill Estates — 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

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. W-247

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 3 Lot 4 Addition AMBER HILLS ESTATES
Owner Jayne Gruber Address Amber Hills

LOG OF WELL	
	Description
Depth Ft. to	
0-80	yell cs.
80-140	blue cs.
140-183	blue sand, some gravel
183-245	red, yell, white & blue sh.
245-275	med SS
275-290	med coarse SS
290-308	med → med coarse SS
308-310	limestone & SS
310-320	red & blue sh.

Moser Well Drilling & Service, Inc.
Box 308
Hickman, NE 68372

WELL COMPLETION RECORD

Drilling Method: Rot. Circ
Depth (from ground level), Ft. 306
Date Completed 4-15-88

Casing: Length, Ft 296 ; Dia.In. 4
Wall Thickness, Inc 200# ; type PVC

Screen: Length, Ft. 10 Dia.In. 4
Type wap pvc , slot Size .025

Drop Pipe: Length, Ft. ___ Dia.In. ___

Water Level, Surface to top of water, Ft.:
Static 205 , Pumping ___

Yield: 15 ggm, Measured ☒ , Est. ☐ 100+
Chlorination Completed Yes ☐ No ☐

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

Driller Bill Moser (Signed)

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

Address ___

Date 4-20-88

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

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-247

DATE: _____

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 3 : Lot 4 : Addition AMBER HILL ESTATES
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: 5000 Ft.
4. Intended use of well TO WATER TREES.

Signature of Applicant (owner or lessee)

849 SO. 33RD
Address

NO CITY WATER

Sewage Permit Applied For Yes ☐ No ☒ Not Applicable ☐

1. Health Department: Date Rec'd 4/11/88. Date Frwd. _____. Action: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 4/11/88. Date Frwd. 4/11/88. Action: Approved ☒ Disapproved ☐ Signature: Mel Goddard
3. City or County Engineers: Date Rec'd 4/12/88. Date Frwd. 4/12/88. Action: Approved ☒ Disapproved ☐ Signature: John D. Brinkman

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10/17/88 by J.C. Hood
Date: _____ by _____
Date: _____ by _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/21/88 By: J.C. Hood

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

FORM 23-13

AS BUILT DRAWING OF INSTALLATION IN RELATION TO BUILDINGS, PROPERTY LINES, OTHER WELLS, AND SOURCES OF CONTAMINATION. INDICATE NORTH.



NE W WELL ←13'9"→

HOUSE

LAGOON