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. 893R0005801

Issued 10/23/89

Expires 04/23/90

ESTABLISHMENT

STEPHEN NICKEL
T9N R7E SEC 22
PORTSCHE HEIGHTS LOT 1
SECOND ADDITION

FEES: Permit 018754 $60.00

Total $60.00

PERMITTEE

STEPHEN NICKEL
4807 SOUTHHAVEN DR
LINCOLN NE 68516

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT

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

8938000058

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. _____

DATE: OCTOBER 20, 1989

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 _____ : Lot 1 : Addition PORTSCHE HEIGHTS SECOND ADDITION
   Street Address _____

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

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

4. Distance to public sewer: NOT KNOWN ft.

Stephen A Nickel
Signature of Applicant (Owner or Lessee)

4807 SOUTHHAVEN DRIVE, LINCOLN 68516
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/20/89. Date Frwd. 10/25/89. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nord

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 10/25/89. Date Frwd. 10/25/89. ACTION: Approved ☐ Disapproved ☐ Signature: _____

3. City or County Engineer: Date Rec'd. 10-25-89 Date Frwd. 10-25-89. ACTION: Approved ☒ Disapproved ☐ Signature: BERNickelson

REMARKS OR REASONS FOR DISAPPROVAL HAVE WELL PERMIT

Site Visits:
Date: 11-28-89 by: sm line + tank
Date: 11-30-89 by: sm need one more lateral ok'd
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: Dec-1-89 By: Ron Marquardt

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

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 22
Property Dimensions: _____ ft. x _____ ft. Area: 18 acres. (Attach Sheet C with sketch of property).

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

Dates of Tests: 10-27-87 to 10-28-87. Weather: Precip. No Temp. 60.

OWNER: Alan & Gene Botsche

Address: _____

6 Holes B2-2 1 Hole B4-10

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.)
Block 2-2													
1	18"	10-27	3 pm	10-27	4	10-28	4 pm	6"	4:53	5	53 min	1"	
2	"	"				"	"	"	4:53	5	53 min	1"	
3	"	"				"	"	"	4:55	5	55 min	1"	≤ 59 min/in
4	"	"				"	"	"	4:58	5	58 min	1"	
5	"	"				"	"	"	5:05	5	65 min	1"	
6	"	"				"	"	"	5:12	5	72 min	1"	
	Block 4-10												
1	18	10-27	7 pm	10-27	4	"	4:45	"	5:19	5	64 min	1"	

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

Lintel Lg Co
Signature of Person Conducting Test

Address 6710 N 07 Phone 435-8868

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): _____

Date: _____

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

_____
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

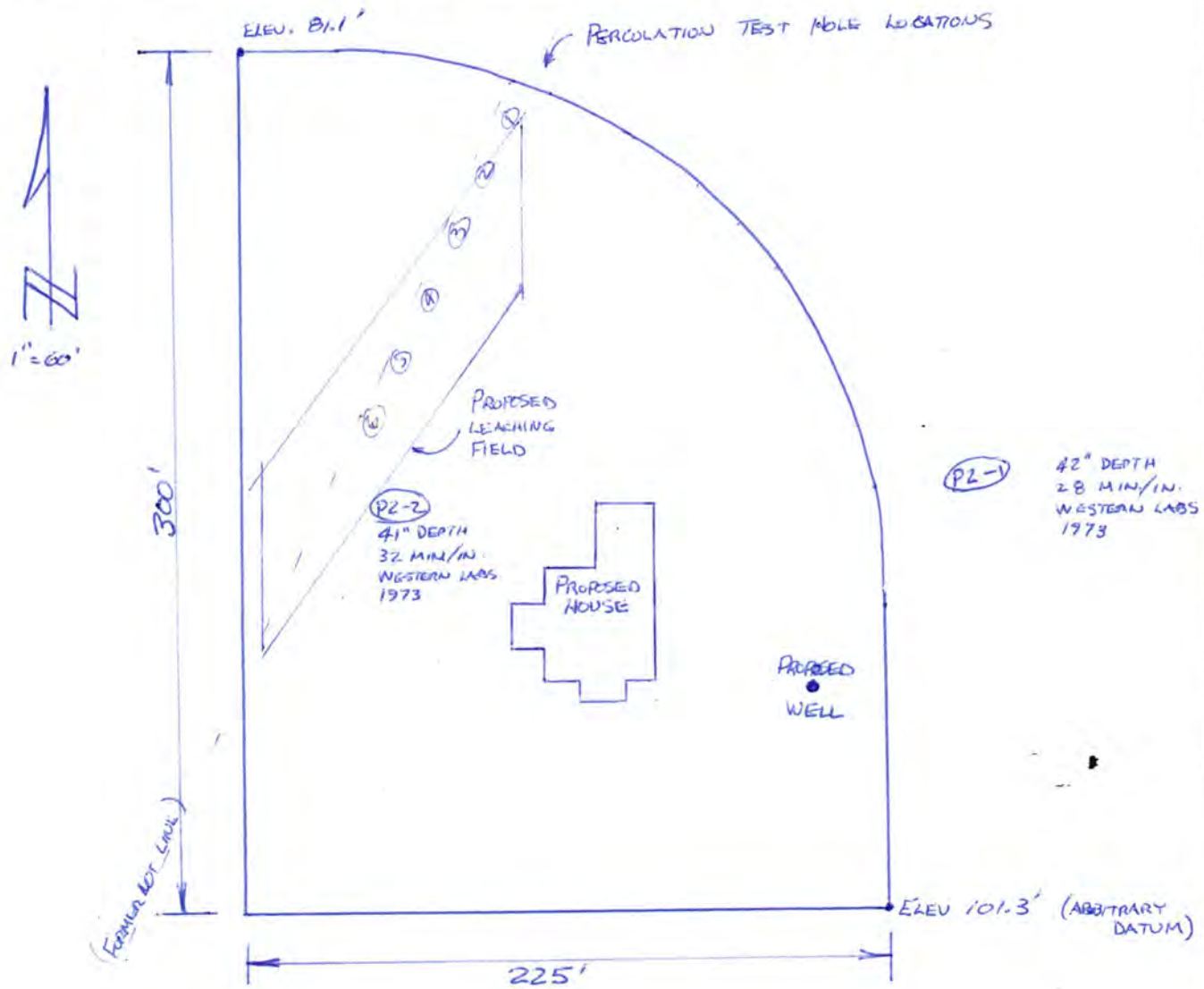
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO._____

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



REVIEWING ACTION

Remarks:_____

_____

Date:_____

Minimum Design Requirement

1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals_____ ft.
3. With a Trench Width of_____ in.
4. Total Area of Lateral needed 978 sq.ft.

Gerald C. Hood
Signature of Reviewing Official

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: Dec-1-89

FILE NO. _____

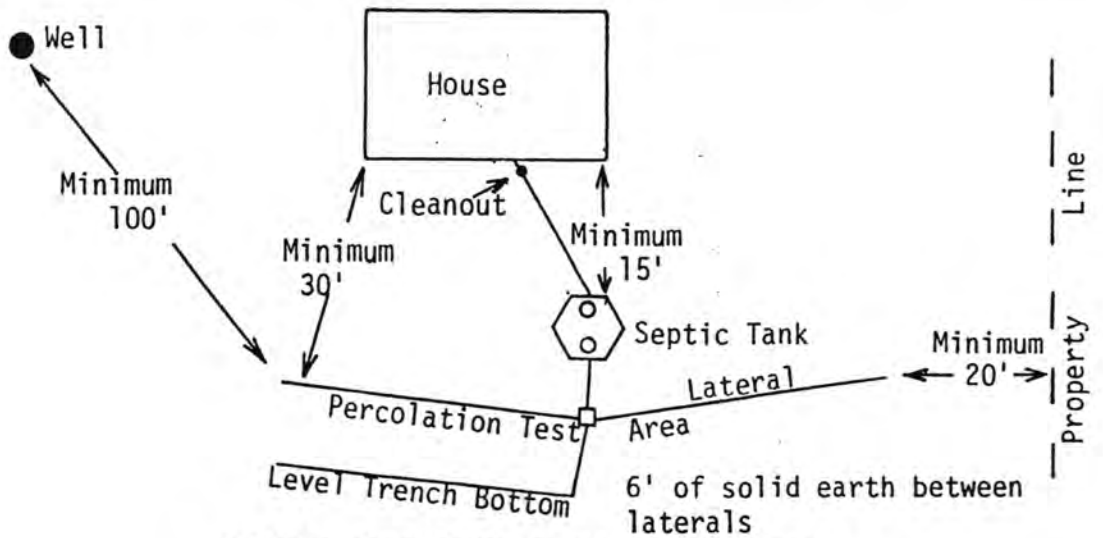
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 30' class 160; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 30 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 precast; 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 _____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 13 in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material precast; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☐
(Company _____)
3. Distance from Septic Tank _____ 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 4.
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 4; Length of each line 100, 100, 100, 50, _____ ft.;
Total length of laterals 350 ft.;
Distance between lateral lines 6 ft.
3. Trench dimensions: Width _____ ft.;
Slope 6 in/100 ft.; Average Depth 36 in.
4. Filter Material: Pea Gravel
Depth of Material 8" under 4" over in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

006

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 7941 PORTSCHE LANE

Twp 9N Range 7E Section 22 1/4 NE 1/4 ___ Block ___ Lot 1 Addition PORTSCHE HEIGHTS, 2ND

Directions to Property EAST OF S 75TH, SOUTH OF PINE LAKE ROAD, LAST HOUSE ON PORTSCHE LANE

Location of Well 40' SOUTH OF HOUSE Tap Location: Inside ☐ Outside ☒

Location of Sewage System 60' NW OF HOUSE Year Installed 1990

	NAME	ADDRESS	PHONE
Present Owner:	STEPHEN H. & CAROLYN B. NICKEL	7941 PORTSCHE LANE LINCOLN, NE 68516	423-0559
Tenant/Buyer:	N/A		
Return to:	COLUMBUS FEDERAL ATTN: JO LEWIS	770 N. COTNER LINCOLN, NE 68505	

Signature of Applicant Stephen H. Nickel Address 7941 PORTSCHE LANE LINCOLN, NE 68516 Date 11/8/93

HEALTH DEPARTMENT USE ONLY

V #9481

Date Received 11/8/93 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Paul Dorshorst DATE: 11/8/93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☒	Date___/___/___by___
Bacteria	☒ 0 /ml	☐ ____ /ml	Provisional ☐	Date___/___/___by___
Nitrate	☒ <0.1 ppm	☐ ____ ppm	Disapproved ☐	Date___/___/___by___

Comments: _____

See Attached Letter ☐

FINAL STATUS

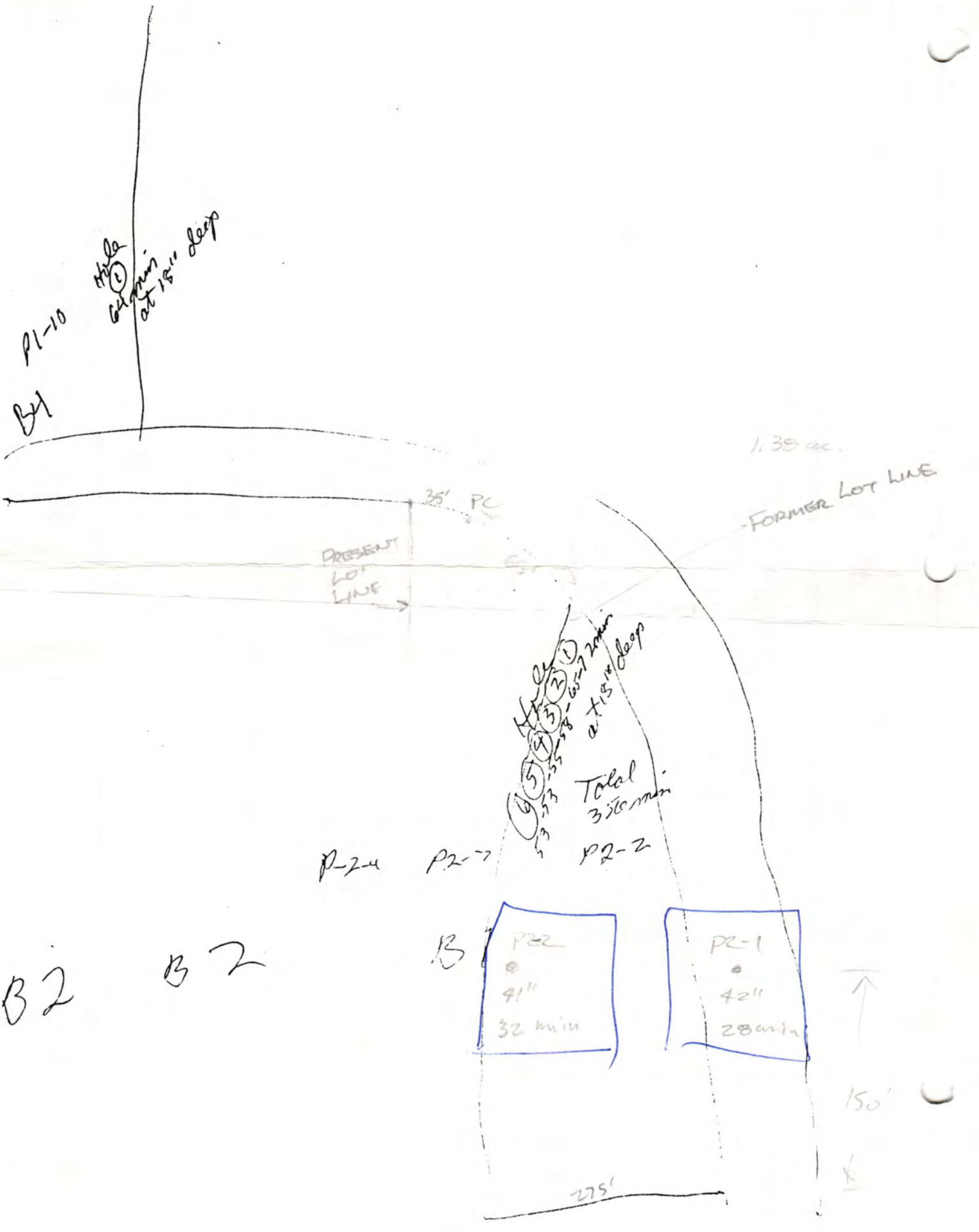
WATER SYSTEM: Approved: ☒ **SEWAGE DISPOSAL SYSTEM** Approved: ☒ Provisional Approval: ☐

Approved by Paul Dorshorst Date 11/17/93

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.

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5020 M.St


P1-10
Hole 1 6 min at 18" deep
B1
1.38 ac.
35' PC
FORMER LOT LINE
PRESENT LOT LINE
Hole 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 at 18" deep
Total 35 min
P2-4
P2-3
P2-2
B2
B2
P2-2
41"
32 min
P2-1
42"
28 min
150'
275'

11-30-89 Larry Schwarck

Portsche

