012

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

This form must be completed and returned to reque

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 5641 Rebel Dr. Lincoln, NE

Twp 9N Range 7E Section 28 1/4 ___ 1/4 ___ Block ___ Lot ___ Addition ___

Directions to Property 9100 South 56th St.
or ½ mile South of YanKee Hill Rd. on 56th St., East Side

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

Location of Sewage System S.E. of House Year Installed 1991

	NAME	ADDRESS	PHONE
Present Owner:	Tom Martin	5641 Rebel Dr.	421-8860
Tenant/Buyer:			
Return to:	Tom Martin		

Signature of Applicant Tom Martin Address 5641 Rebel Dr. Date 9/20/93

HEALTH DEPARTMENT USE ONLY

Date Received 9/20/93 Received $150.00 Check ☑ Cash ☐

3889 Norwest

PRELIMINARY STATUS--By Jerrold Hood **DATE:** 9/21/93

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☐	Approved ☒	Date 9/23/93 by J.C.H.
Bacteria	☒ 0 /ml	☒ 1 /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 Jerrold C. Hood R.E.H.S. Date 9/27/93

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.

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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. 90400020501

Issued 10/16/90
Expires 04/16/91

ESTABLISHMENT
KEITH MUENCHAU
T9N R7E SEC 28
HARMAN'S SUBDIVISION LOT 1

FEES: Permit 019851 $75.00

Total $75.00

PERMITTEE
KEITH MUENCHAU
7331 VINE ST
LINCOLN NE 68505

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
10/17/90	PAID

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

RECEIVED OCT 15 1990

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 $_____

FILE NO._____

DATE: 9-10-90

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 28
   Block _____ : Lot 1 : Addition Harman's Subdivision
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: _____ Ft.
4. Intended use of well _____

Thomas Martin Keith Muenchau
Signature of Applicant (owner or lessee)

7331 Vine St
Address Lincoln, Ne 68505

City Water Yes ☐ No ☒

Sewage Permit Applied For Yes ☐ No ☒ Not Applicable ☐

1. Health Department: Date Rec'd 10/15/90. Action: Approved ☒ Disapproved ☐
   Date Frwd. 10/16/90. Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 10/17/90. Action: Approved ☒ Disapproved ☐
   Date Frwd. 10/17/90 Signature: M Gollard
3. City or County Engineers: Date Rec'd 17 Oct 90. Action: Approved ☒ Disapproved ☐
   Date Frwd. 17 Oct 90. Signature: Roger A Figard

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11/6/91 by J. C. Hood
Date: _____ by _____
Date: _____ by _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 1/22/92 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. _____

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

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 28 T. 9N R. 7E Block ___ Lot 1 Addition Harmonia Subdivision
Owner Thomas Martin Address 2314 Stardust Lane
Grand Island, Ne 68803

LOG OF WELL	
	Description
~~Depth Ft.~~ 0 to 1	top Soil
1 - 40	yellow clay
40 - 55	gray clay
55 - 65	red, white (lite gray)
65 - 70	Bright yellow, gray
70 - 88	SS. show
88 - 95	dull red, gray white
95 - 177	Sandstone 70% Gray
177 - 184	Sand & Gravel
184 - 198	90% Sandstone 10% clay
198 - 200	Lime ledge, yellow
200 - 203	60% Sandstone
	Then dark red

WELL COMPLETION RECORD

Drilling Method: Rotary
Depth (from ground level), Ft. 203
Date Completed 10-15-90

Casing: Length, Ft. 203 Dia. In. 4
Wall Thickness, Inc. 160 ; type PVC

Screen: Length, Ft. 30 Dia. In. 4
Type PVC , slot Size .016 - .014

Drop Pipe: Length, Ft. 160 Dia. In. 1¼"

Water Level, Surface to top of water, Ft.:
Static 115 , Pumping 130

Yield: 20 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 Muenchau
(Signed)

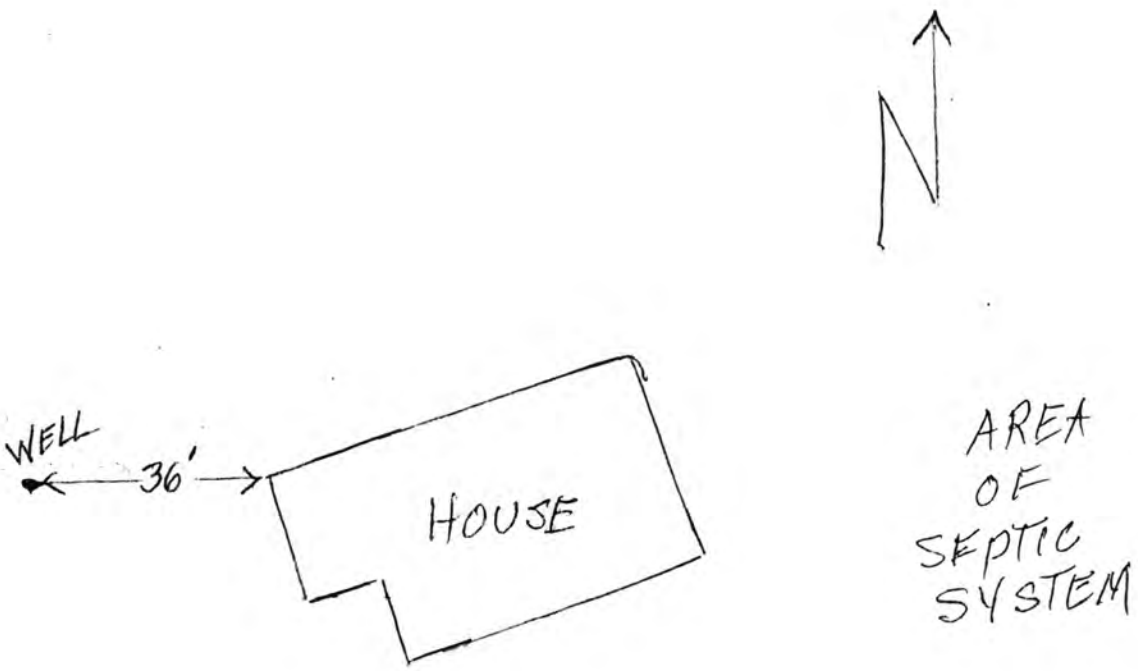
REMARKS NITRATE NITROGEN < 0.1 PPM
BACTERIOLOGICAL O.K.

Address 2331 Vine St
Seward
Date 1-20-92

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


N
WELL
36'
HOUSE
AREA
OF
SEPTIC
SYSTEM