FILE NO. 545

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

April 23, 1975
THIS LICENSE OR PERMIT EXPIRES

Arthur C. Hansen
LICENSEE OR PERMITTEE

1211 South 48th St.
ADDRESS

T9N; R7E; Sec. 28-SE1/4
NAME OF ESTABLISHMENT, IF ANY

ADDRESS

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
110.15	110.16	148.14	6-2

624-1333

SERIAL NO.	DATE	AMOUNT

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 545

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: _____

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9 N ; Range 7E ; Section 28 SE 1/4
   Block _____ ; Lot 17 I.T. ; Addition _____
   Street Address _____

2. Property Use: Residential _____ ☐ ; Commercial _____ ☐
   No. of Bedrooms 3 . Describe: _____
   Other Use _____ ☒
   Describe: Day Care Center for 70 children 8 hrs. per day

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

4. Distance to public sewer: Miles ft.

Arthur C. Hansen, by John Gabrielson
Signature of Applicant (Owner or Lessee)

Lincoln
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/23/74 . Date Frwd. 10/23/74 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 10/23/74 . Date Frwd. 10/23/74 . ACTION: Approved ☒ Disapproved ☐ Signature: Charles Hall

3. City or County Engineer : Date Rec'd. 10-23-74 . Date Frwd. 10-25-74 . ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

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

FORM HD-32(67) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. _____

DATE: 10/5/74

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N; Range 7E; Section 28SE 1/4
Block _____; Lot 17 I.T.; Addition _____;
Street Address _____.

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. of Bed Rooms 3 Describe: _____

Other Use _____ [X]
Describe: Day care center for 20 children 8 hrs per day

3. Type of Individual Sewage Disposal System: Septic Tank [ ]; Other [X]

4. Plans and Specifications of Proposed System. (See FORM HD-32a(67) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT, attached hereto.)

X Arthur C Hansen
Signature of Applicant (owner or lessee)

Lincoln
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 30.00

2. Date Site Clearance _____

3. Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 10/23/74
by: Jerrold E. Hood

5. BUREAU OF LICENSES & PERMITS
Date Notified: _____
Date Issued: _____ Serial _____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ by: _____

FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. _____

PROPERTY WHERE SOIL TESTED:
Location: Township 9N 7E
Section & ¼ Sect. 28 SE
Property Dimensions: ___ ft. x ___ ft.
Area: 5 acres. (Attach sketch of property showing hole location).

Owner: ~~JONES~~ ART ~~JONES~~ HANSEN

Address _____

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

Dates of Tests: Nov 3, 1973 to Nov. 4, 1973. Weather: Precip. — Temp. 38°F

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
Hole No.	Hole Depth (in.)	Pre-Saturation Period Start Date (Mo. Day)	Pre-Saturation Period Start Time (Hr. Min.)	Pre-Saturation Period End Date (Mo. Day)	Pre-Saturation Period End Time (Hr. Min.)	Percolation Readings Start Date (Mo. Day)	Percolation Readings Start Time (Hr. Min.)	Percolation Readings Start Water Level (in.)	Percolation Readings End Time (Hr. Min.)	Percolation Readings End Water Level (in.)	Results Elapsed Time (Min.)	Results Water Level Drop (in.)	Results Percolation Rates (Min./inch)
1	30	11-3	10:30A	11-4	11:30	11-4	1:07	7"±	4:55	1"	30	.6	50.0
2	"	"	"	"	"	"	1:08	"	5:44	Refilled	10	.7	14.3
3	"	"	"	"	"	"	1:09	"	5:43	"	10	1.05	9.5
4	"	"	"	"	"	"	1:10	"	5:16	"	10	2.1	4.8
5	"	"	"	"	"	"	1:11	"	5:15	"	10	1.6	6.3
6	"	"	"	"	"	"	1:12	"	5:15	"	30	3.1	9.7

Duane Reeves 11-4-73
Signature of Person Conducting Test

Sum of Percolation Rates 94.6
Average of Rates: 15.8
Mean of Rates: _____

Address 4525 So. 47
Phone: 489-1690 Home
~~473-4701~~ Office
472-3471

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 20 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: October 23, 1974

Gerrold C. Hoak
Signature of Reviewing Official

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. _____

SPECIFICATIONS

DATE: 10/5/74

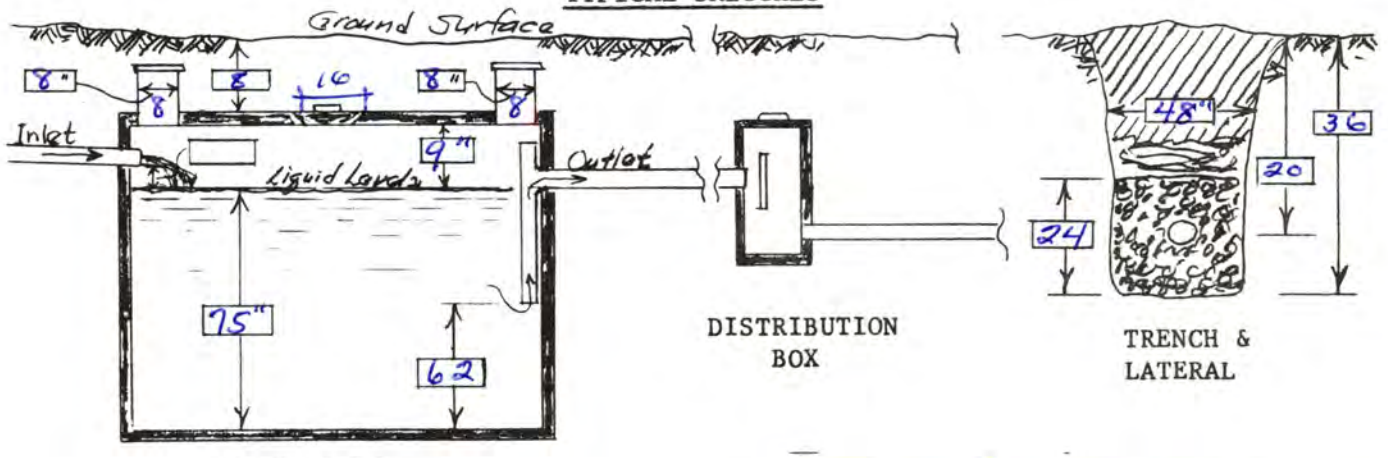
A. BUILDING SEWER:
1. Material PLASTIC; Diameter 4 in.
2. Distance above basement floor [illegible] in.; or below basement floor 12 in.
3. Distance between dwelling and septic tank 30 ft.
4. Number of clean-outs 2.
5. Distances To:
Well or Suction Line — ft.;
Stream [illegible] ft.; Pressure Line 50 ft.;
Property Line 40 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material CONCRETE; No. of compartments 1.
2. Capacity 1500 gals.; Liquid depth ___ in.
3. Factory Built: Yes [X] (Company UNIT STEP)
No [ ]
4. Manholes: Over Inlet; diam. 8 in.
Over Outlet; diam. 8 in.
Below Grade 8 in.
5. Inlet: Baffle [ ]; or Tee [X]
6. Outlet: Baffle [ ]; or Tee [X]
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 8 in.
8. Distances To:
Well or Suction Line — ft.;
Stream — ft.; Pressure Line 50 ft.;
Property Line 40 ft.

C. DISTRIBUTION BOX
1. Material CON.; No. available outlets 4.
2. Factory Built: Yes [X], (Company UNIT) No [ ]
3. Dimension: Length 24 in.; Width 24 in.
Depth 12 in.
4. Distance from Septic Tank 20 ft.
5. Serial Distribution: Yes [X], No [ ]
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: CONCRETE ½ TILE
2. Lateral Lines: Depth below grade 36 in.
Number 2; Length of each line 75 ft
Total length of Laterals 257 ft.;
Slope 0 in/100 ft. Diameter of pipe 24 in.; Shape ½ Round
Material: concrete [X]; fiber asbestos [ ]; clay [ ]; other ___
Distance between lateral lines 6 ft.
3. Trench Dimensions: Depth 36 in.;
Width 48 in.
4. Filter Material: GRAVEL.
Depth of material from trench bottom 24 in.
5. Distances To:
Well or Suction Line [illegible] ft.;
Stream — ft.; Pressure Line 50 ft.
Property Line 20 ft.
6. Percolation Rate: 15.8 minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

X Arthur C Hansen
Signature of Applicant

86 M 17

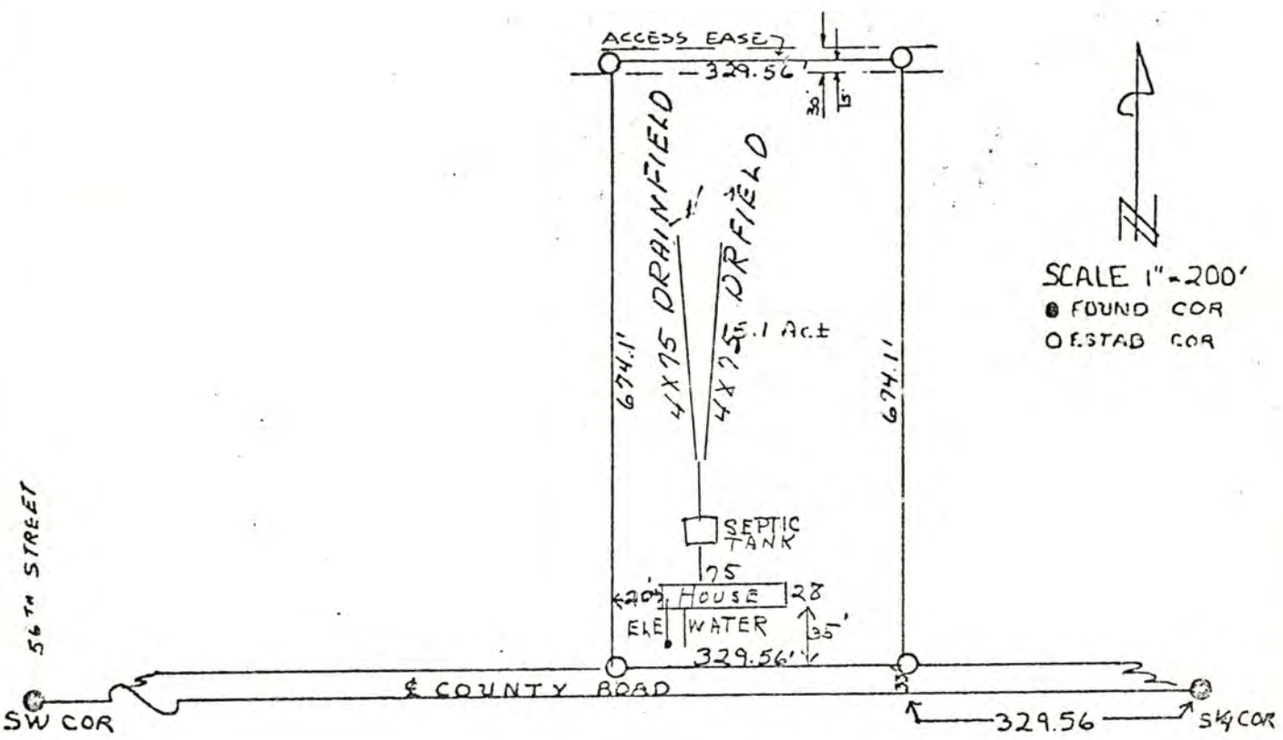
Survey Record

LANCASTER COUNTY, NEBRASKA

BATES AND ASSOCIATES
911 ADAMS – LINCOLN, NEBRASKA PHONE 432-3724

Survey of: AN IRREGULAR TRACT

SW¼ Section 28 T 9 N, R 7 E of 6th P.M.



An irregular tract of land situated in the SW¼ Section 28 T9N R7E of 6th P.M. ~~Lincoln~~, Lancaster County, Nebraska more particularly described as follows:

Referring to the S¼ corner of Section 28, thence West on South line of SW¼, a distance of 329.56', thence North 33' to point of beginning, thence North parallel to West line of SW¼, a distance of 674.1', thence West parallel to South line of SW¼, a distance of 329.56', thence South parallel to West line of SW¼, a distance of 674.1' to a point on the County Road Right of Way line, thence East on County Road Right of Way line a distance of 329.56', to point of beginning, the said tract containing 5.1 acres more or less.

I, being a registered land surveyor in the State of Nebraska, hereby certify that I have carefully surveyed the said tract and that the plat of same is true and correct to the best of my knowledge.

Signed this 14th day of June 1973

Name: Robert B. Bates Jr.

Surveyor's license No. L.S. 252

Land Surveyor's Seal

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER

This form must be completed and returned to request a real estate transfer inspection.
MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 9-16-83
☒ Evaluation of the Sewage Disposal System ☐ Enclosed is $45.00

Legal description of property: TWP. 9N ; RANGE 7E ; SECTION 28
BLOCK ; LOT ; ADDITION
Street Address 6100 Rokeby Rd.
Directions to Property South on 56th to Rokeby — East
Location of Well Rural Water Dist. #1 Tap Location: Inside ☐ Outside ☐
Location of Sewage System Lagoon N. of House Year Installed

	NAME	ADDRESS	PHONE
Present Owner:	Pellican	Johnson NE	
Tenant/Buyer:	Allen Griess	2315 53	489-6641
Return To:	Jeff Seavey Woods Bros Realty		

Need by tues 9-20-83
NOTE: Allow two weeks for processing. Incomplete information will delay processing.
Signature of Applicant JEFFROY N SEAVEY for new owners Allen Griess Address

HEALTH DEPARTMENT USE ONLY

Date Received 9-16-83 Received $45.00 Check ☒ Cash ☐

Rural Water Dist #1 PRELIMINARY STATUS--DATE 9-16-83

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:	SITE VISIT:
Construction	☐	☐	Approved: ☐	Date 9-16-83 by rm
Bacteria	☒	☐	Provisional: ☐	Date 10-3-83 by rm
Nitrate	☒	☐	Disapproved: ☒	Date by

Comments: Dikes must be rebuilt all the way around lagoon to prevent surface drainage into lagoon. Must have a 4' woven wire fence with gate and lock around lagoon. Must have signs "No Trespassing - Sewage Lagoon" on fence. Weeds & grass must be mowed on inside of dike to water's edge. See Attached Letter ☐

WATER SYSTEM: Rural Water Dist #1 FINAL STATUS Corrections Made 10-3-83 (Not approval does not include using city signs)
Approved: ☒ Meets bacteriological requirements
SEWAGE DISPOSAL SYSTEM: Approved: ☒ *Provisionsal Approval: ☒ * See comments - this must be completed within 2-weeks.

APPROVED BY Ron Mangan DATE 9-16-83

FN 20215-1079R