#1770

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

October 22, 1981 — THIS LICENSE OR PERMIT EXPIRES

Aloyce A. Pentico, Pottyco Plumbing Co. — LICENSEE OR PERMITTEE

Box 2521 Lincoln, NE 68502 — ADDRESS

T9N, R6E, Section 28, Block 1, Lot 3, Addition: Yankee Ridge Estates — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: Non-transferable

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 60.00	$	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE	
018754	110.16	148.14	6-2	

SERIAL NO. — DATE — AMOUNT

5A7170 M221 60.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

HEALTH

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: 474-1541

A

FILING FEE: $60.00

FILE NO. 1770

DATE: _____

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 28 ; Block 1 : Lot 3 : Addition YANKEE RIDGE ESTATES
   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: _____ ft.

6100 Rebel Rd.

Patricia L Lee
Lee Pemberton
Signature of Applicant (Owner or Lessee)

Box 2521 68502
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/22/81. Date Frwd. 4/22/81. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 4-22-81. Date Frwd. 4-22-81. ACTION: Approved ☒ Disapproved ☐ Signature: Williamsen

3. City ~~or County~~ Engineer: Date Rec'd. 4-22-81. Date Frwd. 4-22-81. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11-12-81 by: [signature]
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-16-81 By: Ron Mangum

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

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: 474-1541

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐; Silt Loam ☐; Clay Loam ☐.
Dates of Tests: 4-15-81 to 4-16-81. Weather: Precip. Dry Temp. 70° F.

YANKEE Ridge

OWNER: DARCY CONSTRUCTION
Address: 9000 S.61

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"	4/15	10:00	4/16	9:30	4/16	2:30	3 7/8"	3:00	3 1/4"	30	3/4"	
2	32"						2:35	4 1/2"	3:05	4"	30	1/2"	
3	32"						2:40	6 1/4"	3:10	5 1/2"	30	3/4"	
4	31"						2:50	6 1/8"	3:20	5 1/2"	30	5/8"	
5	32"						2:50	5"	3:20	4 1/4"	30	3/4"	
6	30"						2:55	4 1/4	3:25	3 3/8	30	7/8"	

Donald R. Pentico
Signature of Person Conducting Test

Address 4820 Rentworth Drive Lincoln NE. Phone 423-0121

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: April 28, 1981

Approved Percolation Rate (a)
A. 44 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

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

MAY 24 2010

D

Permit Number:

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 5-19-10

Legal Description NE (1/4) 1/4 28-9-7 Yankee Ridge Block 1, Lot 3
Section Township Range

Onsite System Location

Address (no rural route) 6100 Rebel Dr City Lincoln NE, Zip 68516

Owner Bill Masters Address Same

A. Sewer Pipe

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

B. Septic Tank

☐ Label with Manufacturer, address and gallon capacity

1. Material: Fiberglass
   Number of compartments: _____
2. Capacity: old 1000 gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee ☐ 6" dia. inspection pipe
6. Outlet: ☐ baffle ☐ tee ☐ 6" dia. inspection pipe
7. Depth to top of tank, below unfinished grade: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. ☐ Distribution Box ☒ Drop Boxes

(≥ 12" inspection opening) (removable lid to inspect)

1. Material: New plastic
   Number available outlets: 4
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 9' ft.

D. Drainfield Absorption

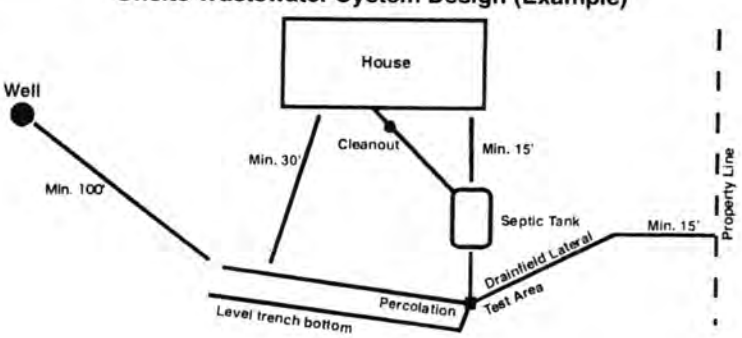
☐ Trench ☐ Bed ☐ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe _ ☐ Chambers
   Diameter or width: _____
   Number of distribution lines in bed _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number 6
   Length of each line: 3-100' old ft. 1-50' ft.
   1-135' ft. 1-80' ft., _____ ft.
3. Drainfield dimensions: Width 12" Tall 36" wide ft.
   Distribution Pipe Slope Flat in/100 ft.
   Average depth 36" - 18" in
4. Filter material: Dirt
   Depth of material _____ in.
5. Distances to: Well or suction line 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.
   House or building 100+ ft.
   Lake or Stream 100+ ft.

Complete As-Built drawing on the back fo this form.

Indicate North with Arrow

Onsite Wastewater System Design (Example)



010

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-~~7800~~ 8000 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

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: 9-15-93

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $150.00

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 28; BLOCK 1

LOT 3; ADDITION Yankee Ridge; Street Address 6000 Rebel Drive, Lincoln NE

Directions to Property _____

_____

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System _____ Year Installed _____

WANTS WATER REPORT

	NAME	ADDRESS	PHONE
Present Owner:	William & Lorraine Marsland, Jr.	6000 Rebel Drive, Lincoln	421-2871
~~Tenant/Buyer:~~	_____	Lorraine work #	471-5283
Return to:	Security Federal	P.O. Box 80849; Lincoln NE 68501	474-4444

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Cindy Neuhart Address Security Federal

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HEALTH DEPARTMENT USE ONLY

Date Received SEPTEMBER 17, 1993 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE SEPTEMBER 20, 1993

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☐	Date 9/20/93	by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 10/4/93	by J.C.H.
Nitrate <0.1ppm	☒	☐	Disapproved:	☒	Date _____	by ____

Comments: SEPTIC SYSTEM IS LEAKING OUT. Corrective work done, is drying out real well. Department will monitor for a few weeks. 10/4/93 J.C.H. See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Jerrold C. Hood R.E.H.S. DATE OCTOBER 4, 1993

Approval or disapproval is based on written 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 operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

151

COLI + NO3 4/29/02

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☒ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 6100 REBEL DRIVE

Parcel ID 16 - 28 - 101 - 003 - 006 (i.e. 99-99-999-999-999)

Twp 9N Range 7E Section 28 1/4 NW 1/4 Block 1 Lot 3 Addition YANKEE HILL ESTATES

Directions to Property S 84th to E Yankee Hill Rd E Rebel Dr 1 to 6100

Location of Well EAST SIDE OF HOUSE Tap Location: Inside ☐ Outside ☐

Location of Sewage System N.E. OF HOUSE Year Installed

Site Hazards (dogs, etc.)

	NAME	ADDRESS	PHONE
Present Owner:	WILLIAM MASTERS	R+1 Box 359 Greenfield NE 68841	(H) (308) 652-2429 (B) (402) 464-5616
~~Tenant~~/Buyer:	BILL MASTERS	5800 Deerfield Dr Lincoln, NE 68516	(H) 488-6647 (B) 435-9611
Return to:	PAM Hewett Title	1440 York Rd	474-7525 474-3756 (Fax)

Signature of Applicant William G Masters Address 5800 Deerfield Dr Lincoln NE 68516 Date 4/24/02

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 4/25/02 Amount $200.00 Check No. 1804 Initials CW

DATA ENTRY Date ___/___/___ Case No. ___ Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 4/29/02

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 0.8 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☐
Disapproved	☒

Additional Site Visits

Date 6/3/02 by J.C.H.

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: SEPTIC TANK MANHOLE SHOULD BE EXTENED UP ABOVE GRADE AND SUNKEN AREA AROUND TANK FILLED WITH EARTH SO SURFACE WATER DOESN'T FLOW INTO TANK. PUT A MORE SUBSTANTIAL LID ON TANK TO PREVENT CHILD ENTRY. HOUSE HAS BEEN VACANT ABOUT ONE YEAR. See Attached Letter ☐

Corrected 6/3/02 J.C.H.

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 6/3/02

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.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00

Repair

Raymond Contracting.
783-2663
5/19/10



