FILE # 2810

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — 6 MONTHS

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

SCHWARTZ CONSTRUCTION 5300 OLD CHENEY RD. LINCOLN, NE 68516

LICENSEE OR PERMITTEE — ADDRESS

T9N; R7E; Sec. 28; Bk 2; Lot 2; Yankee Ridge Estates

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

ISSUING OFFICER OR DEPARTMENT

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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2810

DATE: 3-27-89

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 2 : Lot 2 : 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.

Marilyn Schwartz
Signature of Applicant (Owner or Lessee)

5300 OLD CHENEY
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 3/28/89. Date Frwd. 3/29/89. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 3/29/89. Date Frwd. 3/29/89. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

3. City or County Engineer: Date Rec'd. 3-29-89. Date Frwd. 3-29-89. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL LANCASTER COUNTY RURAL WATER DISTRICT.

Site Visits:
Date: 7/27/89 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7/31/89 By: Jerrold Wood

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

FORM 23-43

4201 So. 40th

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: _____

FILE NO. _____

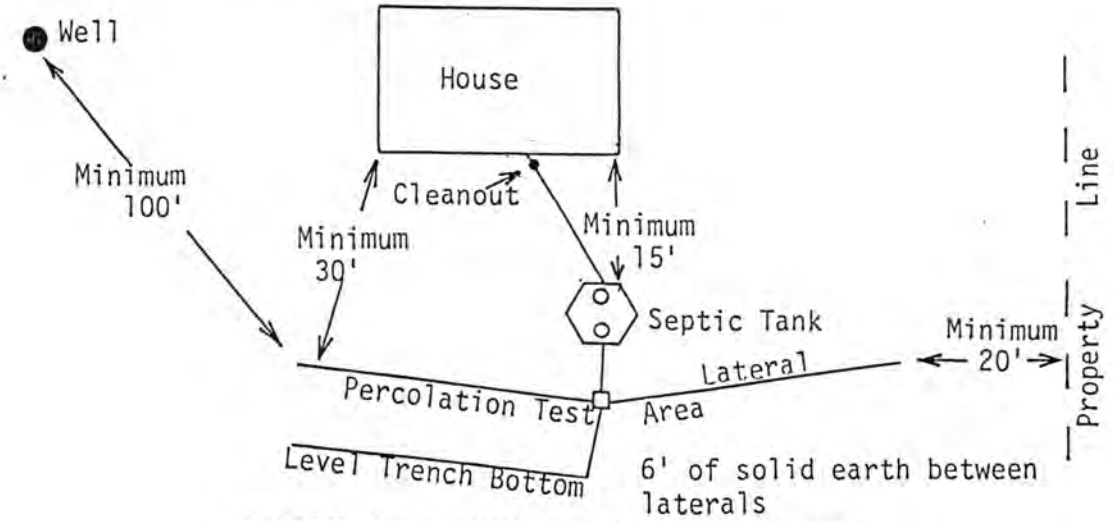
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 4" ; Diameter PVC in.
2. Distance above basement floor _____ in., or below basement floor 20 in.
3. Distance between dwelling and septic tank 38 ft.
4. Number of clean-outs 1 .
5. Distances to:
Well or Suction Line 100'+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Conc ; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company precast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade 12 in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
7. Depth of top of tank below finished grade 10 in.
8. Distances to:
Well or Suction Line 100+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 25+ ft.

C. DISTRICTION BOX:
1. Material Conc ; Number - available outlets 6 .
2. Factory Built: Yes ☑ No ☐
(Company precast step)
3. Distance from Septic Tank _____ ft.

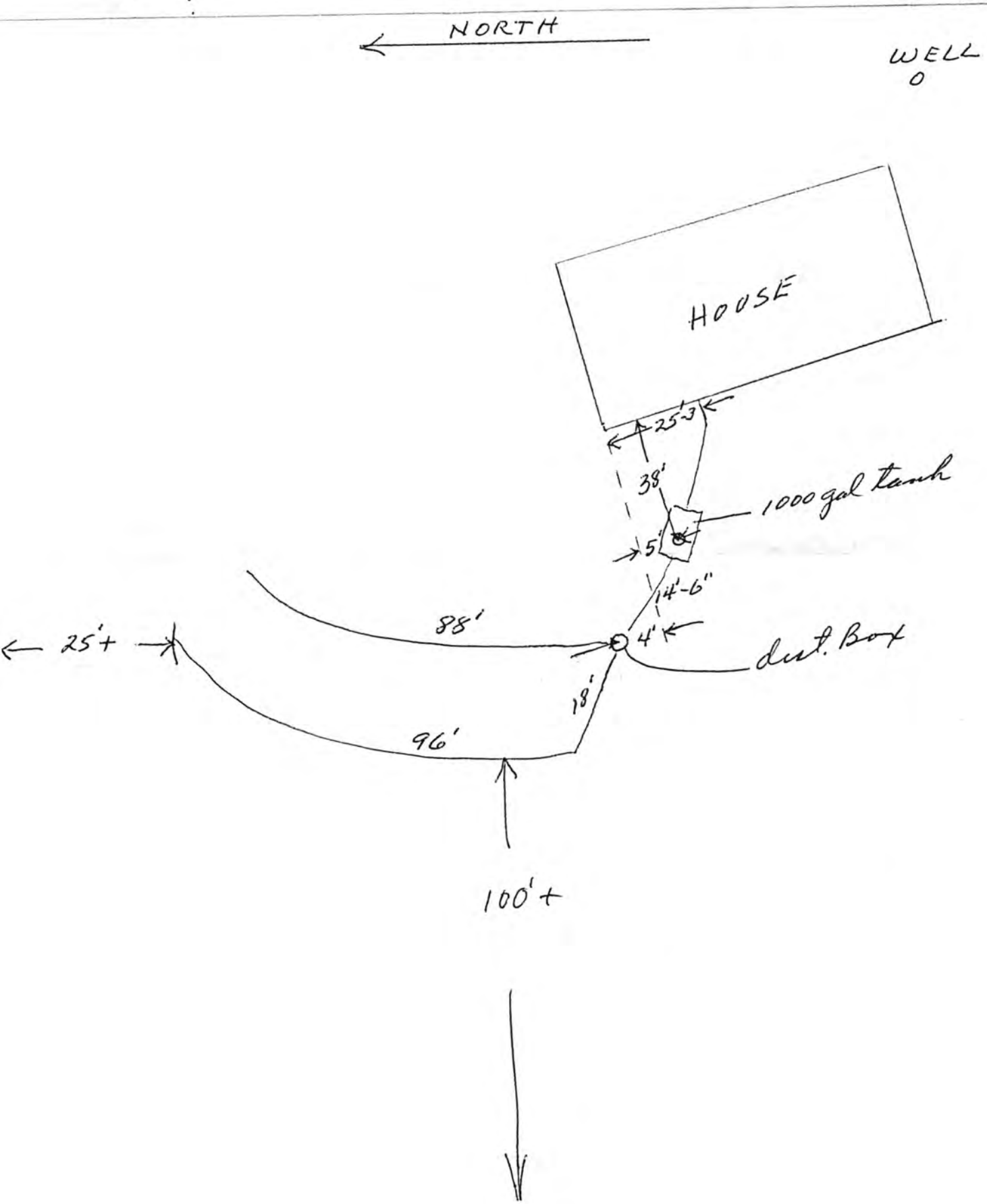
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 24" or Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line 88 , 96 , _____ , _____ , 184 ft.;
Total length of laterals 184 ft.;
Distance between lateral lines 18 ft.
3. Trench dimensions: Width 4 ft.;
Slope 4 in/100 ft.; Average Depth _____ in.
4. Filter Material: gravel
Depth of Material _____ in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE July 27 1989 INSTALLER Marlyn Schwab



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. 89400002501

Issued 07/20/89
Expires 01/20/90

ESTABLISHMENT
MARLYN SCHARTZ
T9N R7E SEC 28
YANKEE RIDGE BLK 2 LOT 2
9201 S 60TH

FEES: Permit 019851 $45.00

Total $45.00

PERMITTEE MARLYN SCHARTZ
5300 OLD CHENEY RD
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

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-361) 8940000250l

DATE: 7/19/89

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 2 : Lot 2 : Addition YANKEE RIDGE / 9201 So. 60th
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe
3. Distance to Public Water Supply: ____ Ft.
4. Intended use of well HOUSEHOLD USE

56th & Yankee Hill Rd.

NO. CITY WATER

Marlyn Schwartz ef
Signature of Applicant (owner or lessee)

5300 Old Cheney Rd.
Address

423-2511

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 7/19/89. Action: Approved ☒ Disapproved ☐
   Date Frwd. 7/24/89. Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 7/24/89. Action: Approved ☐ Disapproved ☐
   Date Frwd. 7/24/89. Signature:
3. City or County Engineers: Date Rec'd 7/24/89. Action: Approved ☒ Disapproved ☐
   Date Frwd. 7/24/89. Signature:

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 8/14/89 by Jerrold Hood well tap brother
Date: ____ by ____
Date: ____ by ____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8/17/89 By: J.C. Hood

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

RM 23-13

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. 89400002501

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. 28 T. 9N R. 7E Block 2 Lot 2 Addition YANKEE RIDGE ESTATES

Owner Dave Henry Address Yankee Ridge

LOG OF WELL	
	Description
Depth Ft. to	
0-5	light tan/gray c.
5-45	yll c.
45-50	light blue/gray c
50-65	blue c
65-70	yll sh
70-80	red & blue sh
80-95	yll & blue sh
95-145	light gray sh c/ some sm. layers of limestone
145-187	med fine yll. ss
187-221	med coarse - coarse lite yll ss
221-223	yll sh
223-233	med coarse lite yll ss
233-237	red & blue sh

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

WELL COMPLETION RECORD

Drilling Method: Rot. Circ.
Depth (from ground level), Ft. 230
Date Completed 6-13-89

Casing: Length, Ft 210; Dia. In. 4
Wall Thickness, Inch 200#; type PVC

Screen: Length, Ft. 20 Dia. In. 4
Type PVC slotted, slot Size .035

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

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

Yield: 60+ 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 Bill Moon (Signed)

Address ___

Date 7-15-89

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



AREA OF
SEPTIC SYSTEM

