FILE #2210

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION	DECEMBER 13, 1985
TYPE OF LICENSE OR PERMIT	THIS LICENSE OR PERMIT EXPIRES
CRAIG COOK — 4444 NO. 48 STREET	LINCOLN, NE 68504
LICENSEE OR PERMITTEE	ADDRESS
T9N; R7E; Sec 28; Bk 4; Lot 3; Yankee Ridge	
NAME OF ESTABLISHMENT, IF ANY	ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	013754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. — Date and Amount

APPLICATION

AHEALTH

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. 2210

DATE: 6-13-85

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 4 : Lot 3 : Addition YANKEE RIDGE
   Street Address 6350 Rebel Dr

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

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

4. Distance to public sewer: _____ ft.

Craig Cook
Signature of Applicant (Owner or Lessee)

4444 NORTH 48TH
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/13/85. Date Frwd. 6/14/85. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nodd

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: M.L. Goddard

3. City or County Engineer: Date Rec'd. 6-14-85. Date Frwd. 6-14-85. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL WELL PERMIT RECIEVED

Site Visits:
Date: 8-29-85 by: mm (need drawing)
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-20-85 By: Ron Marquardt

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. 2210

PROPERTY WHERE SOIL TESTED:

Location: Township 9 ; Range 7 ; Section & ¼ Section 28 .
Property Dimensions: 422 ft. x 735 ft. Area: 5+ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 6/11/85 to 6/12/85 . Weather: Precip. dry Temp. 75° .

OWNER: ~~FRAHM~~

Address: 6350 REBEL RD.

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"	6/11	10:00	6/12	10:00	6/12	1:00	6"	1:30		30	1¼	
2	"	"	"	"	"	"	"	"	"			1⅛	
3	20"	"	"	"	"	"	"	"	"			2"	
4	24"	"	"	"	"	"	"	"	"			1¾	
5	30"	"	"	"	"	"	"	"	"			1"	
6	30"	"	"	"	"	"	"	"	"			1¼	

John Strahmer
Signature of Person Conducting Test

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

Address 4401 No. 27th Phone 467-1627

(Do not write below this line)

REVIEWING ACTION

Remarks: Seems a little fast for Wymore
Soil Type (SCS): Wymore Silty Clay Loam
Date: June 13, 1985

Approved Percolation Rate (a)
A. 22 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
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 ☐

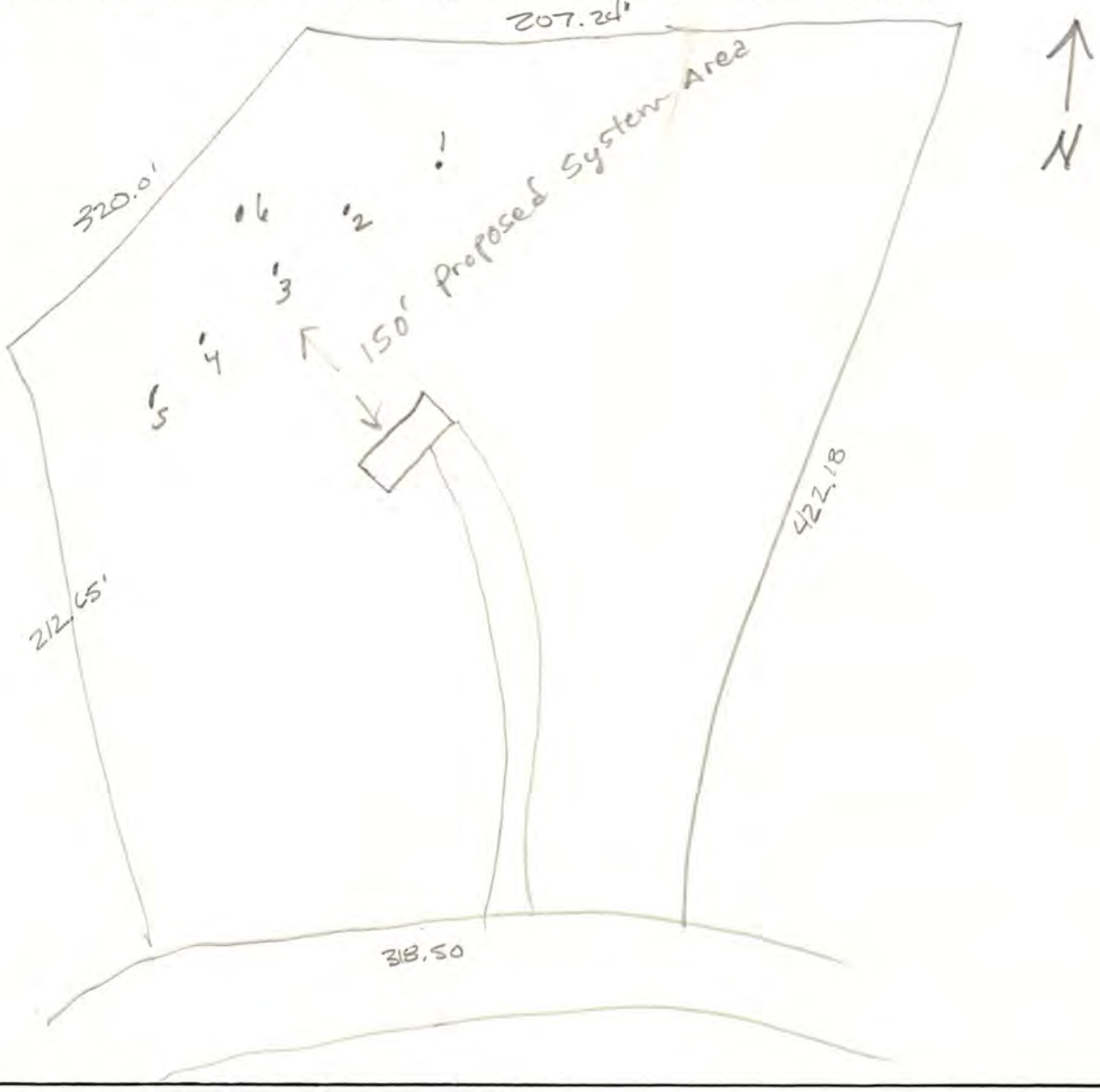
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

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

FILE NO. 2210

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



REVIEWING ACTION

Remarks: _____

Date: June 13, 1985

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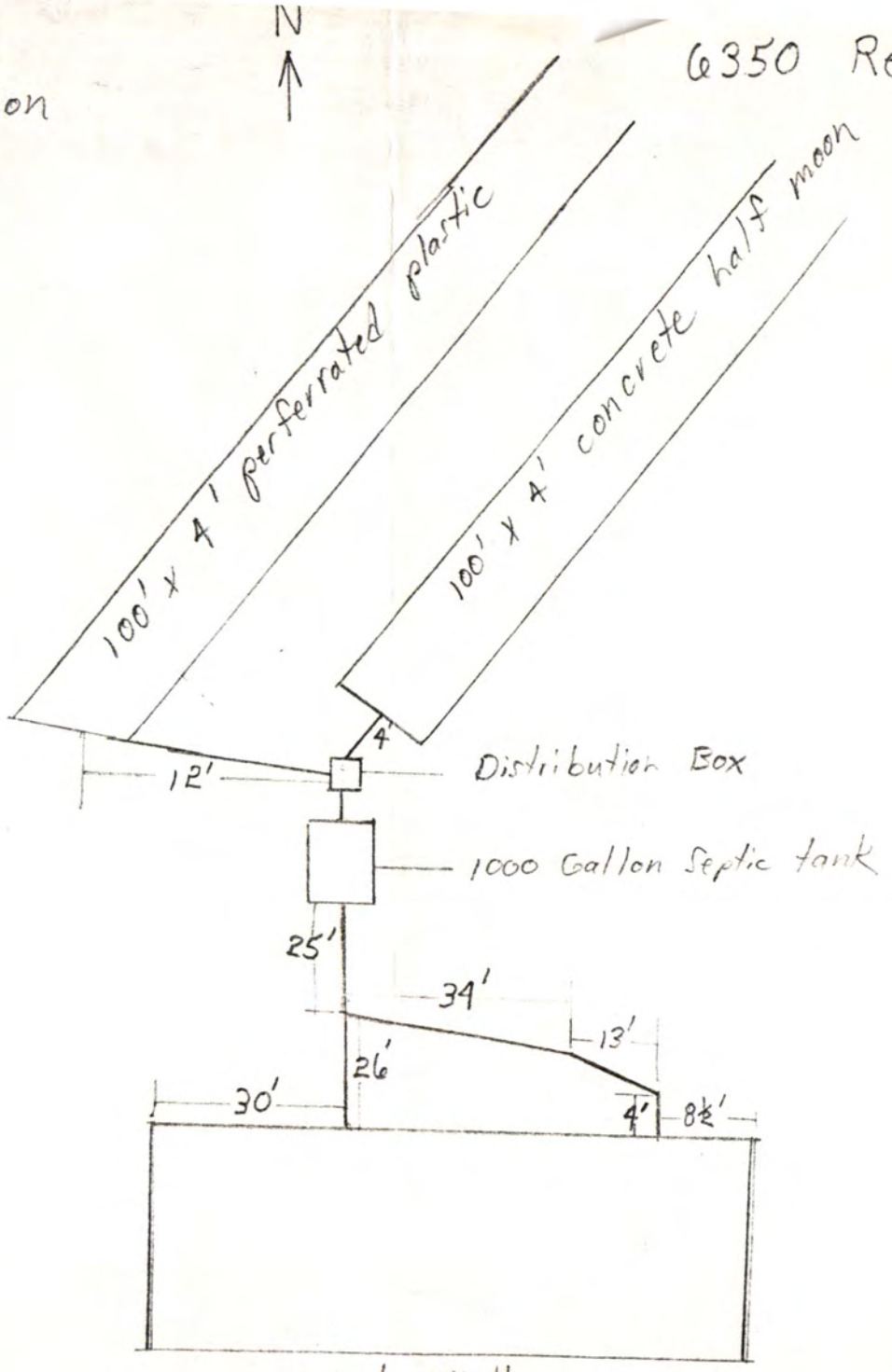
Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 218 sq.ft.

435 2 bdrm

Jerrold C. Hood
Signature of Reviewing Official

New Septic Installation

6350 Rebel Rd.



Rough Sketch not drawn to Scale

REC'D SEP 20 1985

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 471-8022

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 6350 Rebel DRIVE

Twp 9N Range 7E Section 28 1/4 ___ 1/4 ___ Block 4 Lot 3 Addition YANKEE Ridge

Directions to Property 2½ miles south of Hwy 2 on 56th STREET

Location of Well FRONT of house - inside wishing well Tap Location: Inside ☑ Outside ☐

Location of Sewage System Back of house - approximatly 25 ft. from deck Year Installed 1985

	NAME	ADDRESS	PHONE
Present Owner:	Larry D. Frahm	6350 Rebel DRIVE Lincoln, NE 68516	421-2593
Tenant/Buyer:			
Return to:	FIRST MORTGAGE CORP	7601 "O" STREET LINCOLN, NEBRASKA 68510	

Signature of Applicant Larry D. Frahm Address 6350 Rebel DRIVE Lincoln, NE 68516 Date 3/5/93

HEALTH DEPARTMENT USE ONLY

Date Received 03/08/93 Received $150.00 Check ☑ #2584 Cash ☐

PRELIMINARY STATUS--By Gerhold Hood **DATE:** 3/10/93

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 20.1 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☑
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments:

See Attached Letter ☐

FINAL STATUS

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

Approved by Gerhold C. Hood R.E.H.S. Date 3/15/93

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

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 6350 Rebel Dr.

Twp 9N Range 7E Section 28 1/4 ___ 1/4 ___ Block 4 Lot 73 Addition Yankee Ridge 1st Add

Directions to Property Rebel Dr is S of Yankee Hill Rd two miles E of 56th in Yankee Hill Ridge.

Location of Well Straight South of house about 25ft - inside wish well Tap Location: Inside ☐ Outside ☒

Location of Sewage System Septic tank is about 75ft north of back of house Year Installed 1985

	NAME	ADDRESS	PHONE
Present Owner:	Larry & Linda Frahm	6350 Rebel Dr.	421-2593
Tenant/Buyer:			
Return to:	ATT Title Co. ATTEN: Sheryl Pflug	3883 Normal Blvd Suite 107 Lincoln, Ne. 68506	434-3260

Signature of Applicant Susan Thackaus Address 5145 Aylesworth Lincoln, Ne. 68504 Date 1/26/94

HEALTH DEPARTMENT USE ONLY

Date Received 1/27/94 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 1/31/94

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☐	Approved ☒	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ <0.4 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 2/3/94

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.

FILE #W-113

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL WATER WELL CONSTRUCTION — TYPE OF LICENSE OR PERMIT

DECEMBER 13, 1985 — THIS LICENSE OR PERMIT EXPIRES

CRAIG COOK — LICENSEE OR PERMITTEE

4444 NO: 48 STREET — ADDRESS

LINCOLN, NE 68504

T9N: R7E: Sec 28: Bk 4: Lot 3: Yankee Ridge — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 45.00	019851	$ 45.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. W-113

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 4 Lot 3 Addition YANKEE RIDGE ESTATES
Owner Larry Frahm Address Yankee Ridge

LOG OF WELL	
	Description
Depth Ft. to	
0-5	sandy br. c.
5-95	yell. c.
95-155	blue c.
155-180	layers of hard red ss.
180	crevasse
180-250	med fine yell. ss.
250-272	med ss. → coarse ss
272-280	blue sh.

WELL COMPLETION RECORD

Drilling Method: Rot. circ.
Depth (from ground level), Ft. 272
Date Completed 6-22-85

Casing: Length, Ft. 262; Dia. In. 4"
Wall Thickness, Inc. .200"; type PVC

Screen: Length, Ft. 10 Dia. In. 4"
Type Keyst wire wrap, slot Size .025

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

Water Level, Surface to top of water, Ft.:
Static 165, Pumping ___

Yield: 30 gpm w/ air min., 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 Moss (Signed)

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

Address ___

Date 8-22-85

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

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-113

DATE: 6/13/85

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 4 : Lot 3 : Addition YANKEE RIDGE
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe
3. Distance to Public Water Supply: ____ Ft.
4. Intended use of well RESIDENTIAL - SINGLE FAMILY SUPPLY

Stonewood Builder 467-5391

Craig Cook
Signature of Applicant (owner or lessee)

4444 NORTH 48TH
Address

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 6/13/85. Action: Approved ☒ Disapproved ☐
   Date Frwd. 6/14/85. Signature: Jerrold C. Moore
2. Supt. Bldg. Insp.: Date Rec'd 9/6/85. Action: Approved ☒ Disapproved ☐
   Date Frwd. 9/6/85. Signature: Gary Sherwood
3. City or County Engineers: Date Rec'd 6/14/85. Action: Approved ☐ Disapproved ☐
   Date Frwd. 6/14/85. Signature: Jerome A. Obrist

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 9/10/85 by J.C.H.
Date: / by /
Date: / by /

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-13-85 By: Ron Marquardt

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

FORM 23-13

AS BUILT DRAWING OF INSTALLATION IN RELATION TO BUILDINGS, PROPERTY LINES, OTHER WELLS, AND SOURCES OF CONTAMINATION. INDICATE NORTH.

