LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT
SEWAGE INSTALLATION

No. 90380013001

Issued 05/11/90
Expires 11/11/90

ESTABLISHMENT
RANDALL CONNOT
T9N R7E SEC 28
YANKEE RIDGE ESTATES BLK 5 LOT 6

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE RANDALL CONNOT
4831 S 47 ST
LINCOLN NE 68516

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE AMOUNT

PAID

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

9038 00130

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: $ 150.00 ~~80~~

FILE NO. _____

DATE: 5-7-90

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 5 : Lot 6 : Addition Yankee Ridge Estates
   Street Address _____

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4 . Describe _____

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

4. Distance to public sewer: — ft.

X Randall A. Connot
Signature of Applicant (Owner or Lessee)

4831 So. 47th
Address Lincoln, Nebr. 68516

488-8682-home
466-3335 -work

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/8/90. Date Frwd. 5/15/90. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 5/15/90 Date Frwd. 5/15/90 ACTION: Approved ☒ Disapproved ☐ Signature: Mel Goddard

3. City or County Engineer: Date Rec'd. 5/15/90. Date Frwd. 5/15/90. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL ~~NO WELL PERMIT YET~~ RURAL WATER

Site Visits:
Date: 6/14/90 by: J. C. H.
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 6/14/90 By: Jerrold C. Hood

FORM 23-43

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. _____

PROPERTY WHERE SOIL TESTED: Lot 6, Block 5 So. 64th St. Cir.

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: 8-13 to 8-14-89. Weather: Precip. — Temp. 80°.

OWNER: X Randall A. Connot

Address: _____

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	8-13	6:00 PM	8-14	8:30 AM	8-14	10:30	17 1/8	11:30	18 3/8	60	1 1/4	
2	"							17 1/2		19		1 1/2	
3	"							18 1/2		19 3/4		1 1/4	
4	"							12 1/4		13		3/4	
5	"							11 1/4		11 1/2		1/4	
6	"							12		13 1/2		1 1/2	

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

Larry & Blanche Schubeck
Signature of Person Conducting Test

Address 8200 old Cheney Phone 489-7294

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: May 7, 1990

Approved Percolation Rate (a)
A. 28 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 ☐

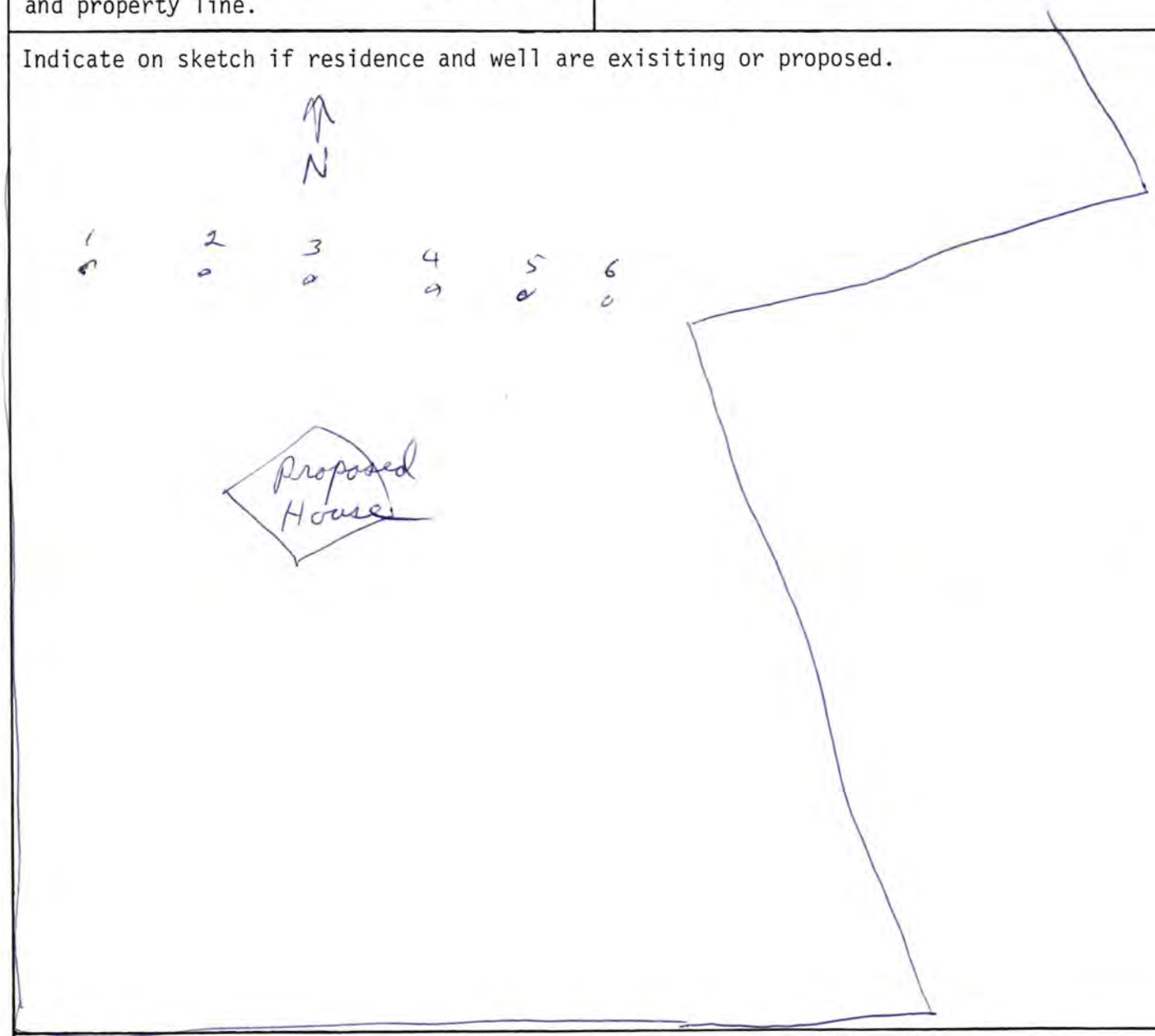
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

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

FILE NO._____

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



REVIEWING ACTION

Remarks :_____

Date: MAY 7, 1990

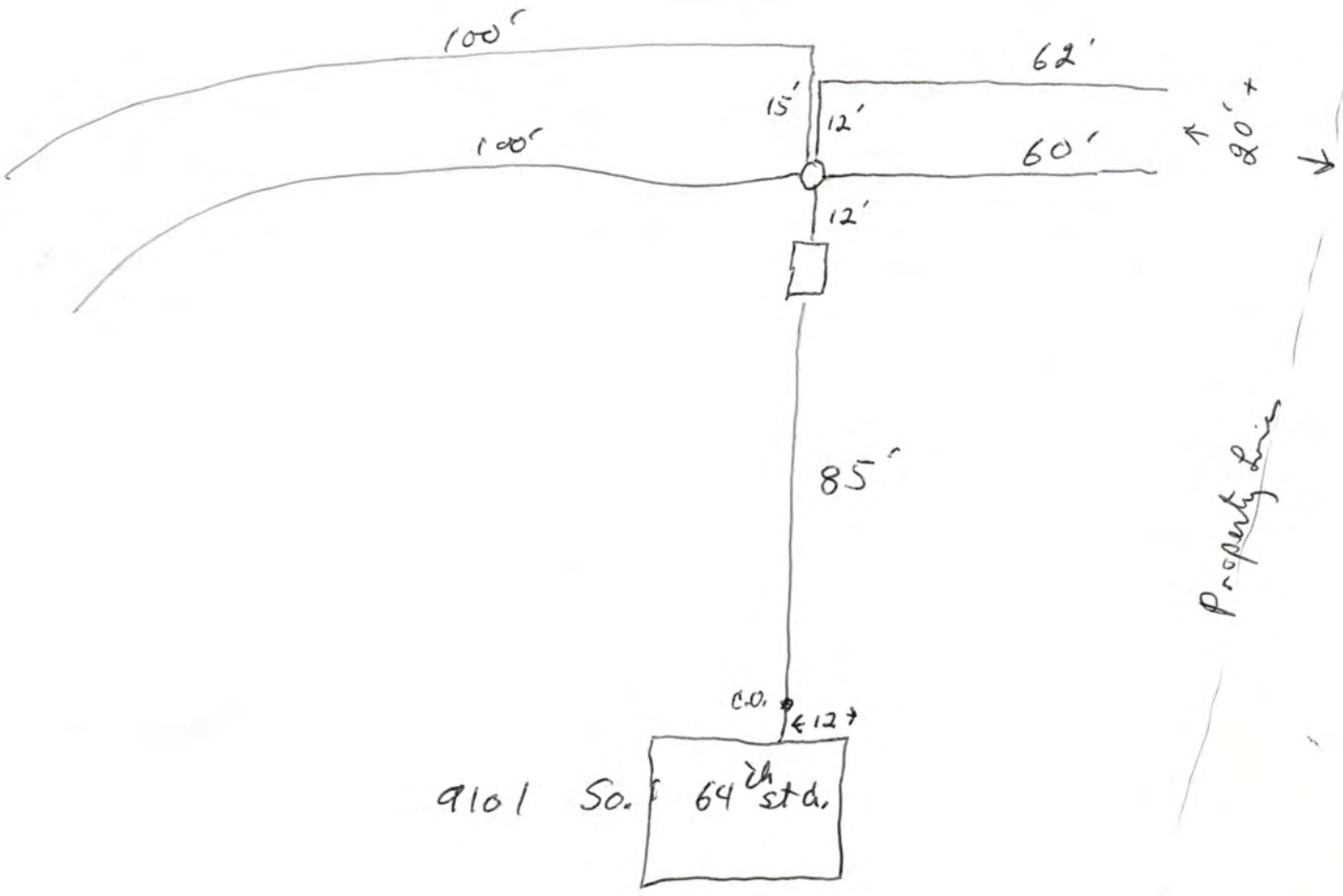
Minimum Design Requirement
1. Capacity of Septic Tank 1250 gals.
2. Total Length of Laterals_____ ft.
3. With a Trench Width of_____ in.
4. Total Area of Lateral needed 967 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

6-14-90

Larry Schwarck

N



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-7800 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: Jan. 30, 1992

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

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 28; BLOCK 5

LOT 6; ADDITION Yankee Ridge; Street Address 9140 So. 64th

Directions to Property So. of 56th Hwy 2 on 56th, to Rebel Drive (in Yankee Ridge), Rebel to 64th then South.

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System North of House Year Installed 1990

	NAME	ADDRESS	PHONE
Present Owner:	Randy Connot	9140 So. 64th	421-8682
Tenant/Buyer:			
Return to:	FIRST COMMERCE SAVINGS BARBARA HILL	11th P, LINCOLN, 68508	

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

Signature of Applicant Randy Connot Address 9140 So. 64th Lincoln Nebr. 68516

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HEALTH DEPARTMENT USE ONLY

Date Received FEBUARY 3, 1992 Received $150.00 Check ☒ Cash ☐

RURAL WATER DISTRICT PRELIMINARY STATUS--DATE 2/4/92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 2/4/92 by LCH
Bacteria	☐	☐	Provisional:	☐	Date _____ by ____
Nitrate	☐	☐	Disapproved:	☐	Date _____ by ____

Comments: _____

See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT.

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

APPROVED BY Jerrold C. Hood R.E.H.S. DATE FEBRUARY 4, 1992

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