FILE #2698

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION	JANUARY 18, 1989
TYPE OF LICENSE OR PERMIT	THIS LICENSE OR PERMIT EXPIRES
DENNIS T. LUSTREA 246 "D" STREET	LINCOLN, NE. 68502
LICENSEE OR PERMITTEE	ADDRESS
TOW: RIP: Sec 28; Bk 1; Lot 1; Yankee Ridge Estates 1st Add;	8501 So. 63 St.
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

HEALTH

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. 2698

DATE: JULY 11, 1988

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 1 : Addition YANKEE RIDGE ESTATES 1ST ADDITION
   Street Address 8501 So. 63RD St.

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: Ø ft.

Dennis T. Lushed
Signature of Applicant (Owner or Lessee)

246 "D" St. Lincoln, Ne. 68502
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/15/88. Date Frwd. 7/18/88. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 7/15/88. Date Frwd. 7/18/88. ACTION: Approved ☒ Disapproved ☐ Signature:
3. City or County Engineer: Date Rec'd. 7/18/88. Date Frwd. 7/18/88. ACTION: Approved ☒ Disapproved ☐ Signature:

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 8/10/88 by: L.C.H.D.R.M.
Date: by:
Date: by:

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8/10/88 By: Jerrold C. Nood

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

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:

Location: Township 9N ; Range 7E ; Section & ¼ Section 28 .
Property Dimensions: 313 ft. x 420 ft. Area: 3.0025 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☒ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 5-15-88 to 5-16-88 . Weather: Precip. None Temp. 85°.

OWNER: Dennis T. & Audrey M. Lustrea

Address: 8501 So. 63rd St.

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	36	5-15	1:15	5-15	5:15	5-16	5:00	24	9:00	27 5/8	30	3 5/8	
2	"	"	1:30	"	5:30	"	5:00	24	9:00	26 1/2	"	2 1/2	
3	"	"	1:45	"	5:45	"	5:05	21	9:05	21 3/4	"	3/4	
4	"	"	2:00	"	6:00	"	5:05	21	9:05	21 1/2	"	1/2	
5	"	"	2:30	"	6:30	"	5:10	21	9:10	22	"	1	
6	"	"	2:45	"	6:45	"	5:10	21	9:10	21 3/8	"	3/8	

Dennis T. Lustrea
Signature of Person Conducting Test

Address 515 W. Keating Dr. Phone 476-1953
246 "D" St. after 6-24-88

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: July 15, 1988

Approved Percolation Rate (a)
A. 21 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 ☐

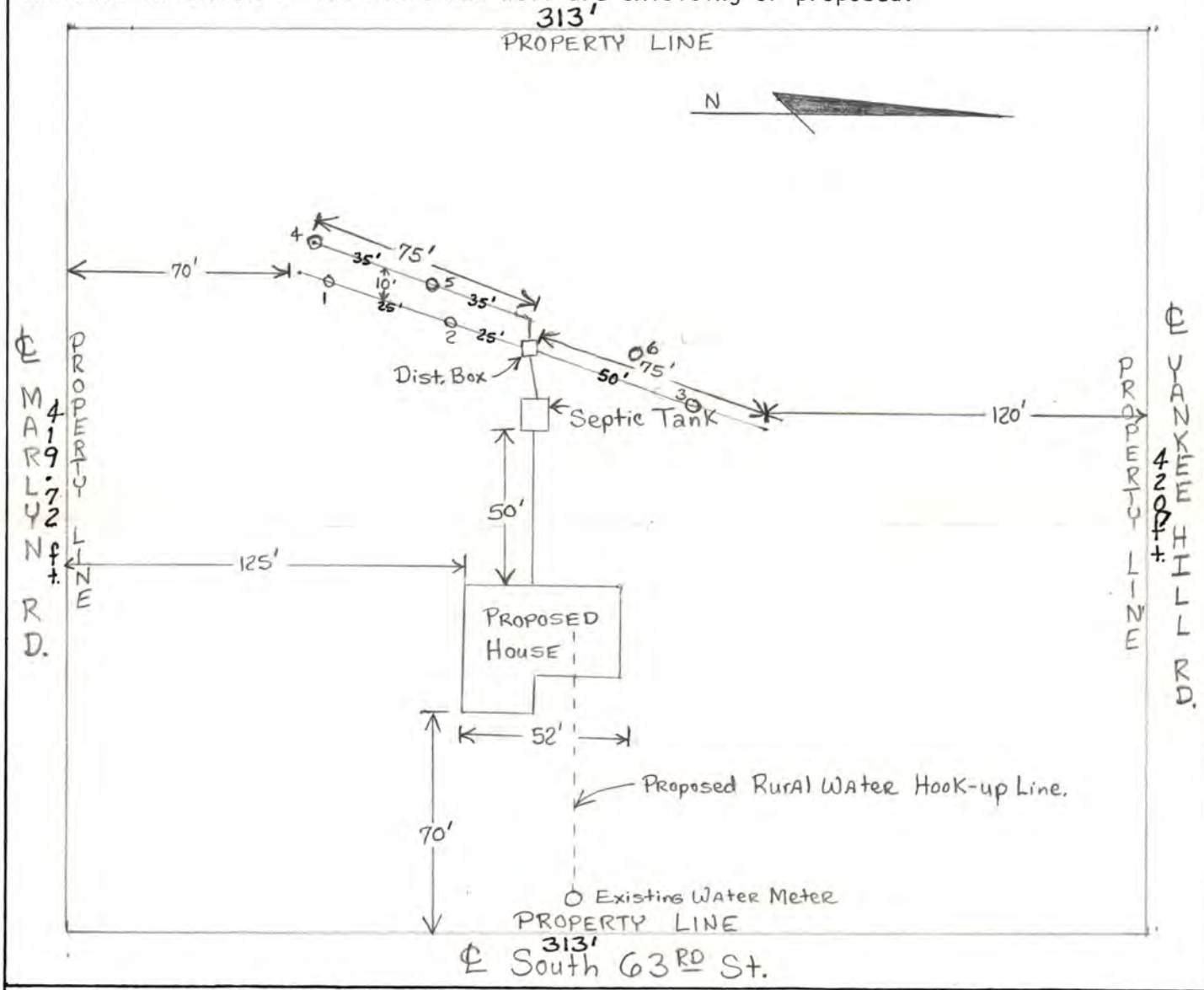
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

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: July 15, 1988

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 214 ft.
3. With a Trench Width of 36 in.
4. Total Area of Lateral needed 641 sq.ft.

Gerrold C. Hoos
Signature of Reviewing Official

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: 474-1541

D

DATE: _____

FILE NO. _____

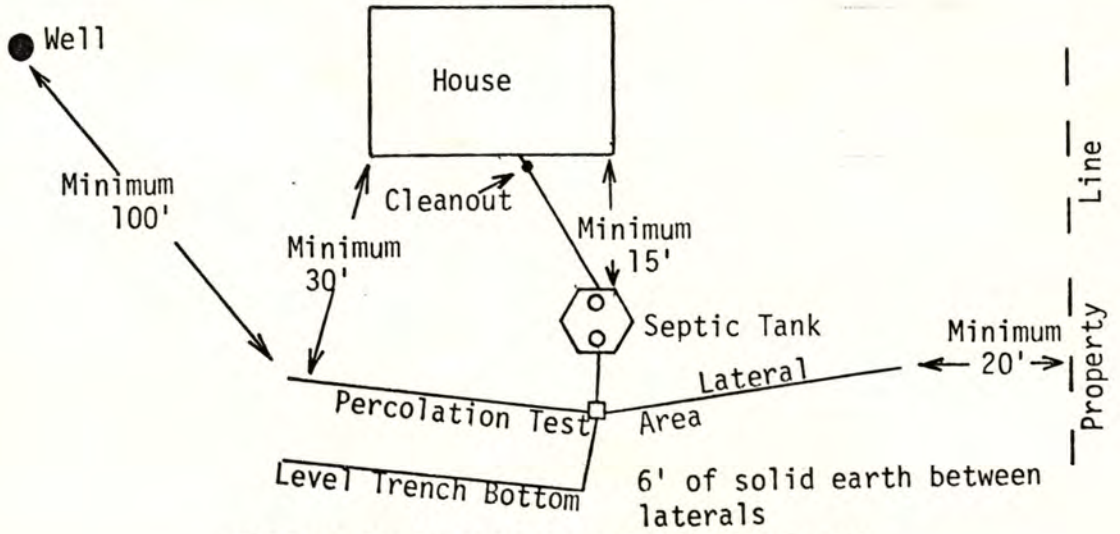
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material #40; Diameter _____ in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 75 ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

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

C. DISTRIBUTION BOX:
1. Material Precast; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☐
(Company _____)
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 _____ or Perforated Pipe 4 _____.
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line 100, 60, 60, _____, _____ ft.;
Total length of laterals 220 ft.;
Distance between lateral lines 8 ft.
3. Trench dimensions: Width _____ ft.;
Slope 6" in/100 ft.; Average Depth 24" in.
4. Filter Material: Road Gravel
Depth of Material 14" in.
5. Distances to:
Well or Suction Line 1 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



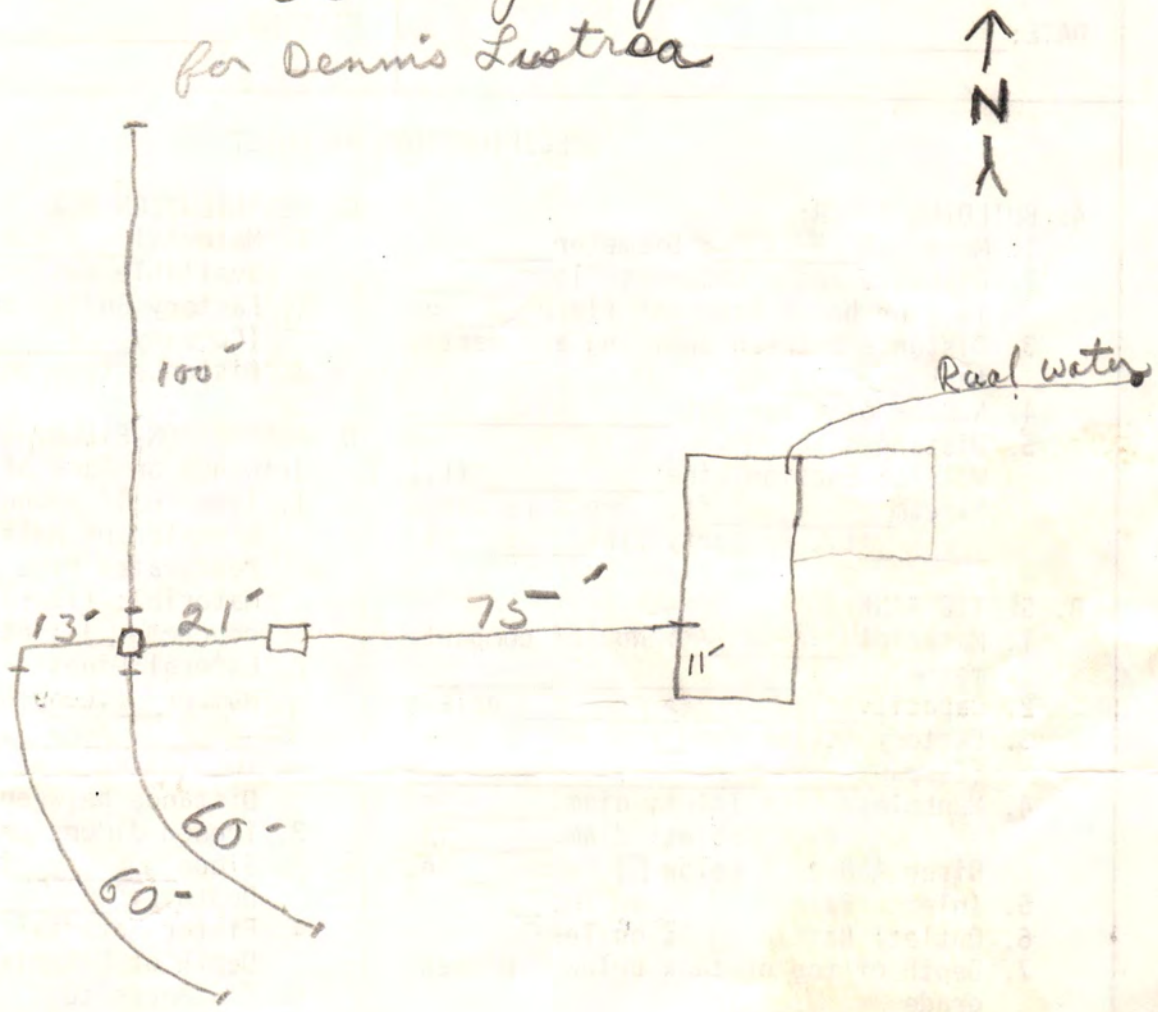
TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE Aug 18 - 88 INSTALLER Larry Schwarck

63rd + Yorkey Hill Rd.

for Dennis Lustrea



Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

005871

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit
SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

Permit # 04390081101

Issued 12/01/04
Expires 06/01/05
Revenue Code 3157

Establishment
HOME REAL ESTATE
T9N R7E SEC 28
YANKEE RIDGE ESTATES BLK 1 LOT 1
8501 S 63 ST

FEES: $100.00

Permittee
HOME REAL ESTATE
7211 S 27 ST
LINCOLN NE 68512

TOTAL: $100.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☒ Municipal Code 24.38 ☐ County Resolution Number 2832

RECEIVED DEC 0 1 2004

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☐ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 9N Range 7E Section 28 1/4 Section
   Block 1 Lot 1 Addition YANKEE RIDGE 1ST
   Parcel ID ____-____-____-____-____ (i.e. 99-99-999-999-999)
   Street Address 8501 S. 63 Lincoln Ne 68516

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 4 Describe

3. **Type of Present Individual Disposal System** ☒ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** Add Drop box & 100' of Infiltration Lateral
   Southwick Sewer Davis

5. **Work to be done by:** ☐ owner ☒ contractor's name Brad Southwick 17201 So 72nd Hickman, Ne 68372

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Home Real Estate Address 7211 S. 27 Phone
Applicant Signature (owner or lessee)

Please include the permit fee ($100) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 12/1/04 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date 12/1/04 By J.C. Hood
Date ____/____/____ By
Date ____/____/____ By

Installation final written approval
Date 12/1/04 By Jerrold Hood

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 12/1/04 Amount 100.00 Check No. 1056 Initials MS

White - Division Copy Pink - Business Office Revised 9/00