LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 471-8000

NON TRANSFERABLE

P E R M I T

Permit
SEWAGE INSTALLATION

No. 93380095701

Issued 03/03/93
Expires 09/03/93
Revenue Code 18754

Establishment
LOISJEAN TUSH
T9N R7E SEC 28
YANKEE RIDGE 1ST ADD BLK 4 LOT 3
9030 S 63 ST

FEES: $150.00

TOTAL $150.00

Permittee
LOISJEAN TUSH
1734 NORMANDY LN
LINCOLN NE 68512

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

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: $_____

FILE NO._____

DATE: 3-1-93

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, 1st Addition
   Street Address 9030 S. 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: _____ft.

X Loisjean Tuch
Signature of Applicant (Owner or Lessee)

X 1734 Normandy Lane
Address
Lincoln, NE 68512

(Do not write below this double line)

1. Health Department: Date Rec'd. 3/3/93 . Date Frwd. 3/3/93 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 3/3/93 . Date Frwd. 3/3/93 . ACTION: Approved ☐ Disapproved ☐ Signature:
3. City or County Engineer : Date Rec'd. 3/3/93 . Date Frwd. 3/3/93 . ACTION: Approved ☒ Disapproved ☐ Signature: Dennis D. Bartels

REMARKS OR REASONS FOR DISAPPROVAL Rural Water

Site Visits:
Date: 9/16/93 by: J.C.H.
Date:_____ by:_____
Date:_____ by:_____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 1/4/94 By: Jerrold C. Hood

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

FORM 23-43

K. Riley

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 3 BLOCK 4 YANKEE RIDGE 1ST ADDITION
Location: Township _____; Range _____; Section & ¼ Section LANCASTER COUNTY
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: 3-1 to 3-2-88. Weather: Precip. — Temp. 40°.

OWNER: Marlyn Schwartz

Address: Rt 8 Lincoln Neb

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	3-1		3-2	11:20		2:50	13 1/8	350	13 5/8	60	1/2	
2								19 1/2		20 5/8		1 1/8	
3								21 1/4		22 3/4		1 1/2	
4								17		17 5/8		5/8	
5								21 1/4		22 5/8		1 3/8	
6								20 1/2		22		1 1/2	

Larry Schwarck
Signature of Person Conducting Test

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

Address 8200 old cheney Phone 489-7294

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: February 3, 1993

Approved Percolation Rate (a)
A. 53 min./inch
B. _____ min./inch
C. _____ min./inch

Gerald C. Hoak
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 ☒

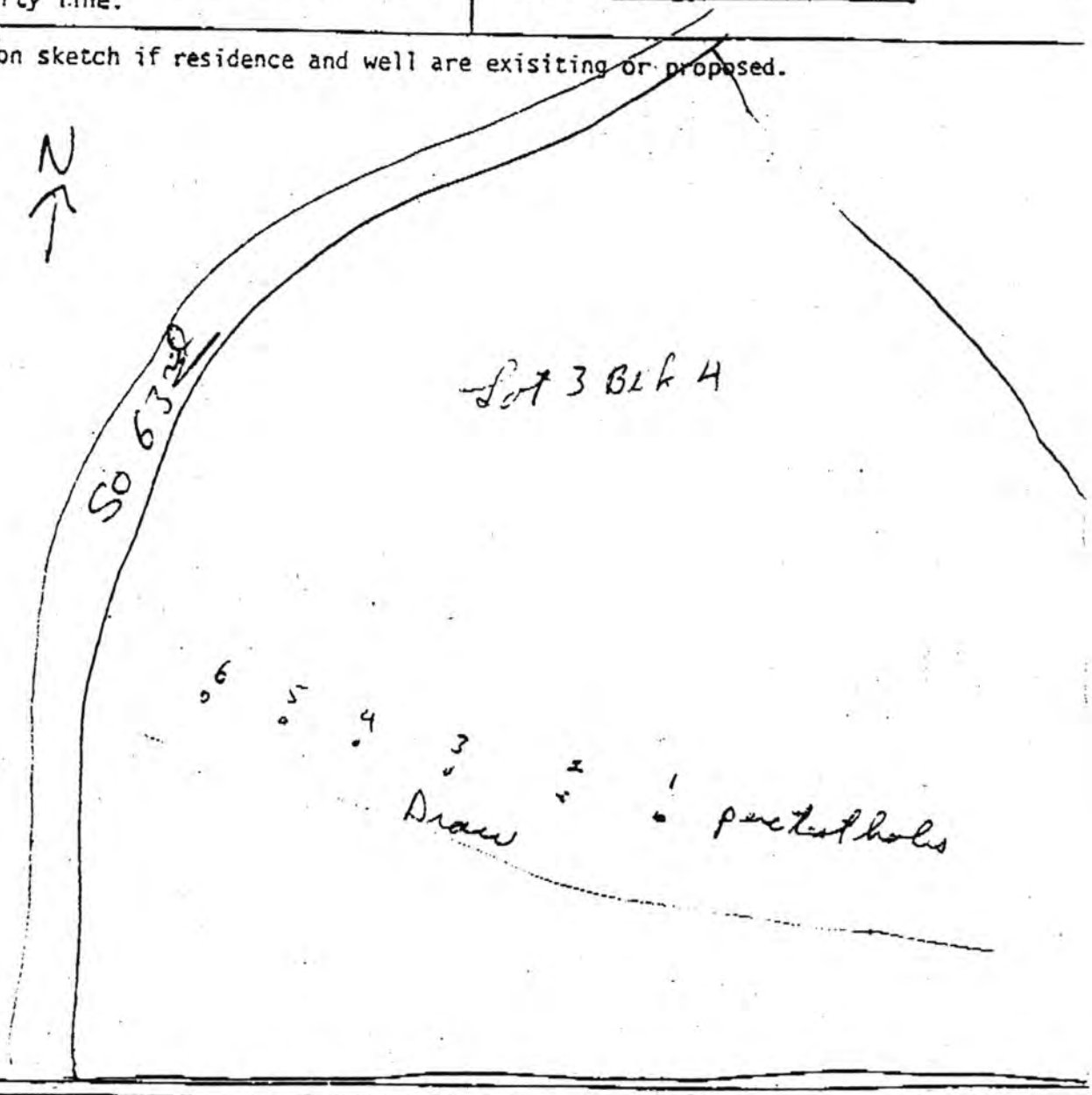
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

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: February 3, 1993

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 235 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 938 sq.ft.

Gerald C. Hood
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: 471-7800

D

DATE: _____

FILE NO: _____

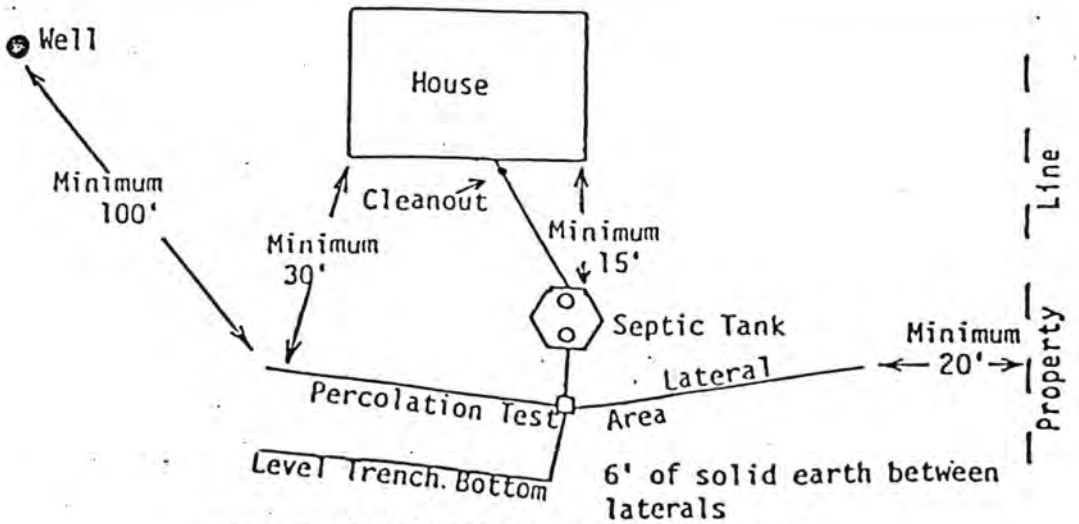
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 4" PVC; Diameter 4" in.
2. Distance above basement floor — in., or below basement floor 16 in.
3. Distance between dwelling and septic tank 130 ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line NA ft.; Stream NA ft.; Pressure Line 100+ ft.; Property Line 100+ ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company American Concrete)
4. Manholes: Over Inlet; diam. 6 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 12 in.
8. Distances to:
Well or Suction Line NA ft.; Stream NA ft.; Pressure Line 100+ ft.; Property Line 100+ ft.

C. DISTRIBUTION BOX:
1. Material Concrete; Number available outlets 5.
2. Factory Built: Yes ☒ No ☐
(Company American Concrete)
3. Distance from Septic Tank 21 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 22" or Perforated Pipe ____.
Material: fiberglass ☐; plastic ☐; concrete ☒; other ____.
2. Lateral Lines:
Number 3; Length of each line 80, 80, 76, ____, ____ ft.;
Total length of laterals ____ ft.;
Distance between lateral lines 8 ft.
3. Trench dimensions: Width 4 ft.;
Slope 2 in/100 ft.; Average Depth 36 in.
4. Filter Material: Gravel
Depth of Material 24 in.
5. Distances to:
Well or Suction Line NA ft.; Stream NA ft.; Pressure Line 100+ ft.; Property Line 100+ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

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 9030 S. 63rd Street

Parcel ID 16 - 28 - 112 - 003 - 000 (i.e. 99-99-999-999-999)

Twp 9N Range 7E Section 28 1/4 ___ 1/4 ___ Block 4 Lot 3 Addition Yankee Ridge 1st Addn.

Directions to Property Yankee Hill Road to 63rd, South on 63rd St. approx. 1/3 mile

Location of Well N/A Rural water ? Tap Location: Inside ☐ Outside ☐

Location of Sewage System 30' South of HOUSE Septic Year Installed 1993

Site Hazards (dogs, etc.) NONE

	NAME	ADDRESS	PHONE
Present Owner:	Gordon Tush	9030 S. 63rd Street Lincoln, NE 68516	423-6370
Tenant/Buyer:	Steve & Sheila Palmquist		465-4952
Return to:	Karen Schaeffer Home Real Estate	225 N. Cotner Blvd., Suite 101 Lincoln, NE 68505	432-3971 436-3399 (Fax)

Signature of Applicant Sheila Palmquist Address 1250 N. 37th St. Lincoln, NE 68503 Date 12/31/03

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 1/9/04 Amount $200.00 Check No. 6374 Initials cw

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

PRELIMINARY STATUS--By JERROLD HOOD RURAL WATER DISTRICT **DATE:** 1/9/04

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. NO EVIDENCE OF MALFUNCTION.

See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 1/9/04

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

9030 So 63rd
K-West Const.

Installed By
Vogt T&T
9-15-93

N

