# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 95380130801

Issued 06/29/95
Expires 12/29/95
Revenue Code 18754

Establishment
DENNIS FREY
T9N R7E SEC 28 L2780
COUNTY LANE BLK 3 LOT 3

FEES: $150.00

TOTAL $150.00

Permittee
DENNIS FREY
RR0001
BOX 0088A
HICKMAN NE 68372

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"**

REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☒
County Resolution No. 2832 ☐

**Lincoln-Lancaster County**
**HEALTH DEPARTMENT**
3140 "N" STREET LINCOLN, NE 68510-1514

A

FILING FEE: $150.00

FILE NO. _____

DATE: 6-27-95

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 3 : Lot 3 : Addition Country Lane Estates
   Street Address 6701 COUNTRYVIEW RD.

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: 0 ft. WILL INSTALL WHATEVER SOIL PERCOLATION TEST INDICATES

Signature of Applicant (Owner or Lessee)

RT#1 Box 88A Nickman NE 68372
Address

(Do not write below this double line) 560-2211

1. Health Department: Date Rec'd. 6/27/95. Date Frwd. 6/28/95. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 6/28/95. Date Frwd. 6/28/95. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

3. City or County Engineer : Date Rec'd. 6-28-95. Date Frwd. 6-28-95. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10/11/95 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: 10/11/95 By: Jerrold C. Hood *

* EXPERIMENTAL SYSTEM APPROVAL IS PROVISIONAL

FORM 23 43

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: 10-11-95

FILE NO. _____

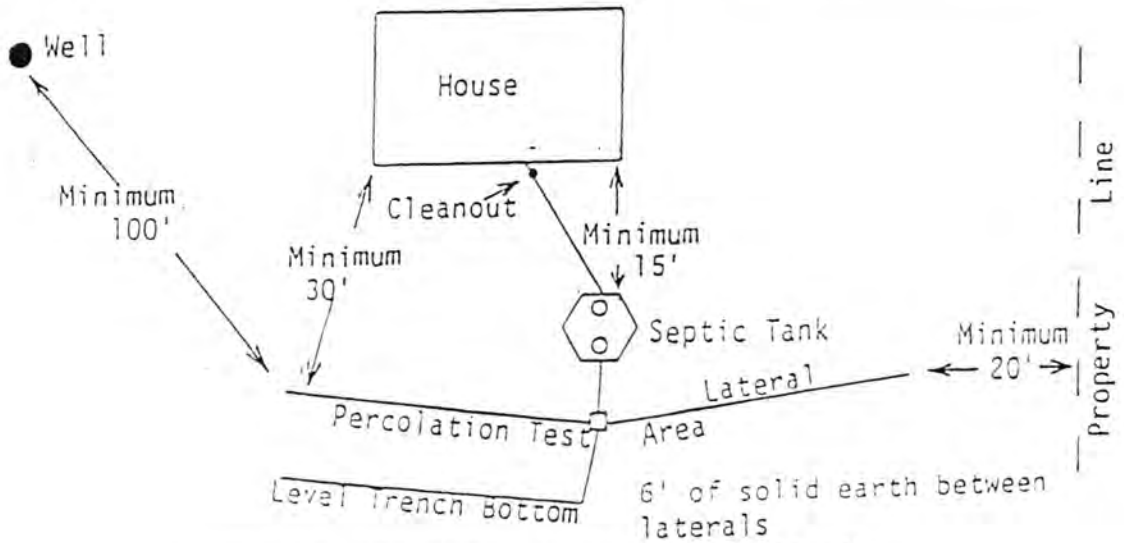
## SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material C ; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 16 in.
3. Distance between dwelling and septic tank 22 ft.
4. Number of clean-outs none.
5. Distances to:
Well or Suction Line ____ ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

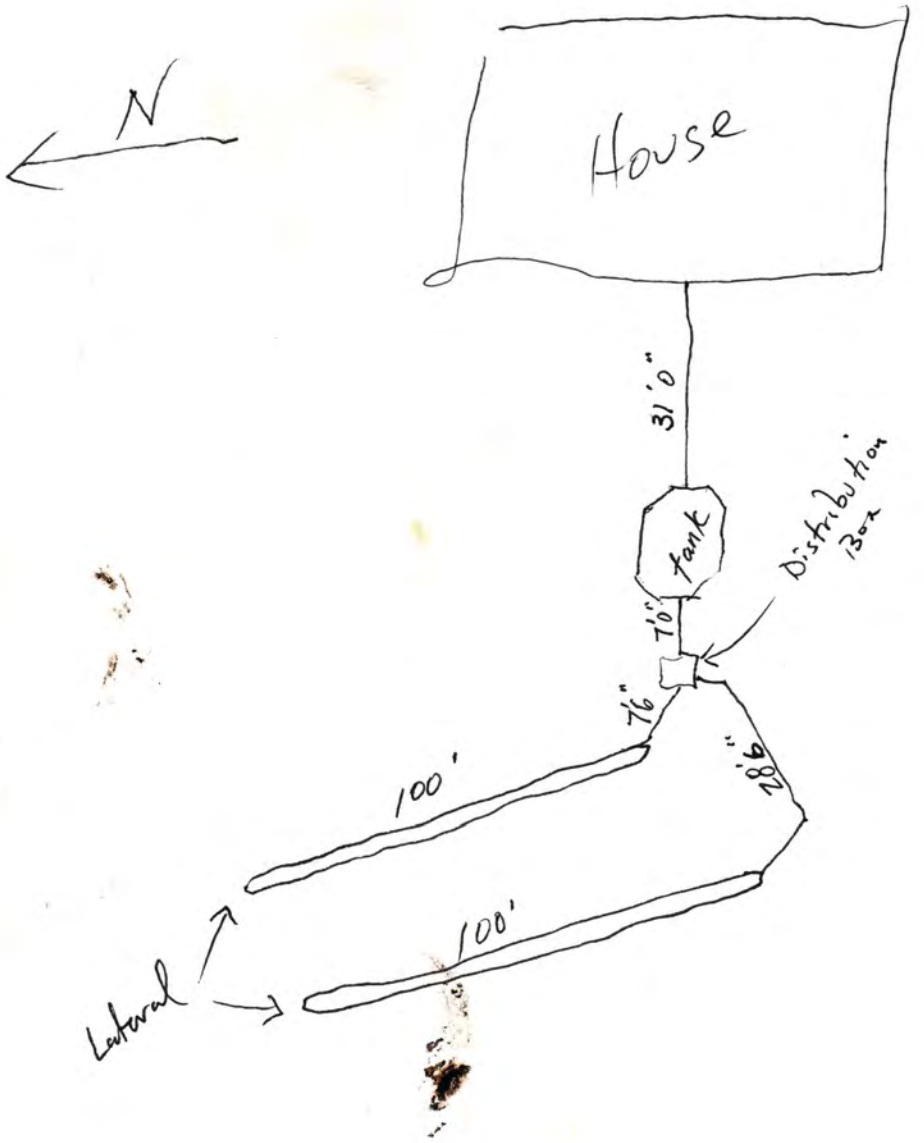
B. SEPTIC TANK:
1. Material Concrete ; No. of compartments 1.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company American)
4. Manholes: Over Inlet; diam. ____ in.
Over Outlet; diam. ____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 16 in.
8. Distances to:
Well or Suction Line ____ ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

C. DISTRIBUTION BOX:
1. Material Concrete ; Number available outlets 5.
2. Factory Built: Yes ☒ No ☐
(Company American)
3. Distance from Septic Tank 8 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 ____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other ____.
2. Lateral Lines:
Number 2 ; Length of each line 100, 100, ____, ____, ____ ft.;
Total length of laterals ~~100~~ 200 ft.;
Distance between lateral lines 15 ft.
3. Trench dimensions: Width 8 ft.;
Slope 4 Tens in/100 ft.; Average Depth 3 Feet in.
4. Filter Material: Gravel & Sand
Depth of Material 2 Feet in.
5. Distances to:
Well or Suction Line ____ ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.




TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


N
House
31'0"
tank
Distribution box
76"
76"
100'
28'6"
100'
Lateral

# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
WATER WELL

No. 95400048701

Issued 06/28/95
Expires 12/28/95
Revenue Code 19851

Establishment
DENNIS FREY
T9N R7E SEC 28
COUNTY LANE BLK 3 LOT 3

FEES: $75.00

TOTAL $75.00

Permittee
DENNIS FREY
RR0001
BOX 0088A
HICKMAN NE 68372

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: 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 $ 78.00

FILE NO. _____

DATE: _____

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 3 : Lot 3 : Addition Country Lane Estates
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe 6701 COUNTRYVIEW RD.
3. Distance to Public Water Supply: 0 Ft.
4. Intended use of well private household

Dennis Gray
Signature of Applicant (owner or lessee)

RT #1 Box 88A Nickman NE 68372
Address

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 6/27/95. Date Frwd. 6/28/95. Action: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 6/28/95. Date Frwd. 6/28/95. Action: Approved ☒ Disapproved ☐ Signature: [signature]
3. City or County Engineers: Date Rec'd 6-28-95. Date Frwd. _____. Action: Approved ☐ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 5/3/96 by Jerrold Wood CAP DAMAGED DEPRESSION
Date: 6/14/96 by Jerrold Wood Repaired
Date: _____ by _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: JUNE 18, 1996 By: J. C. Hood

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

FORM 23-13

MAY 1 1996

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

Lincoln-Lancaster County
HEALTH DEPARTMENT
3140 "N" STREET LINCOLN, NE 68510-1514

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 28 T. 9 R. 7E Block 3 Lot 3 Addition ~~JAHDE ACRES~~ COUNTRY LANE - 6701 COUNTRY VIEW ROAD

Owner B & F BUILDERS Address R.R. HICKMAN, NE 68372

| LOG OF WELL | |
|---|---|
| Depth ft. --to-- | Description |
| 0- 10 | BRN CLAY |
| 10- 95 | YEL CLAY |
| 95-120 | BLUE CLAY |
| 120-155 | SANDY YEL SHALE |
| 155-215 | BLUE & WHITE SHALE |
| 215-245 | FINE SANDSTONE |
| 245-255 | SHALE |
| 255-284 | MED CRS TO CRS SS |
| 284-290 | BLUE SHALE |
| | |
| | |
| | |
| | |
| | |

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER

Depth (from ground level), Ft. 284
Date Completed 8-30-95

Casing: Length, Ft. 264 ; Dia. In. 4"
Wall Thickness, Inc. 200# type PVC

Screen: Length, Ft. 20 Dia. In. 4"
Type pvc wop & slot, slot Size .030 & .025

Drop Pipe: Length, Ft 240 Dia. In. 1¼"

Water Level, Surface to top of water, Ft.:
Static 194M, Pumping 201 EST

Yield: 16 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 _____ (Signed)

Address P. O. BOX 308 HICKMAN, NEBRASKA 68372

Date 9-29-95

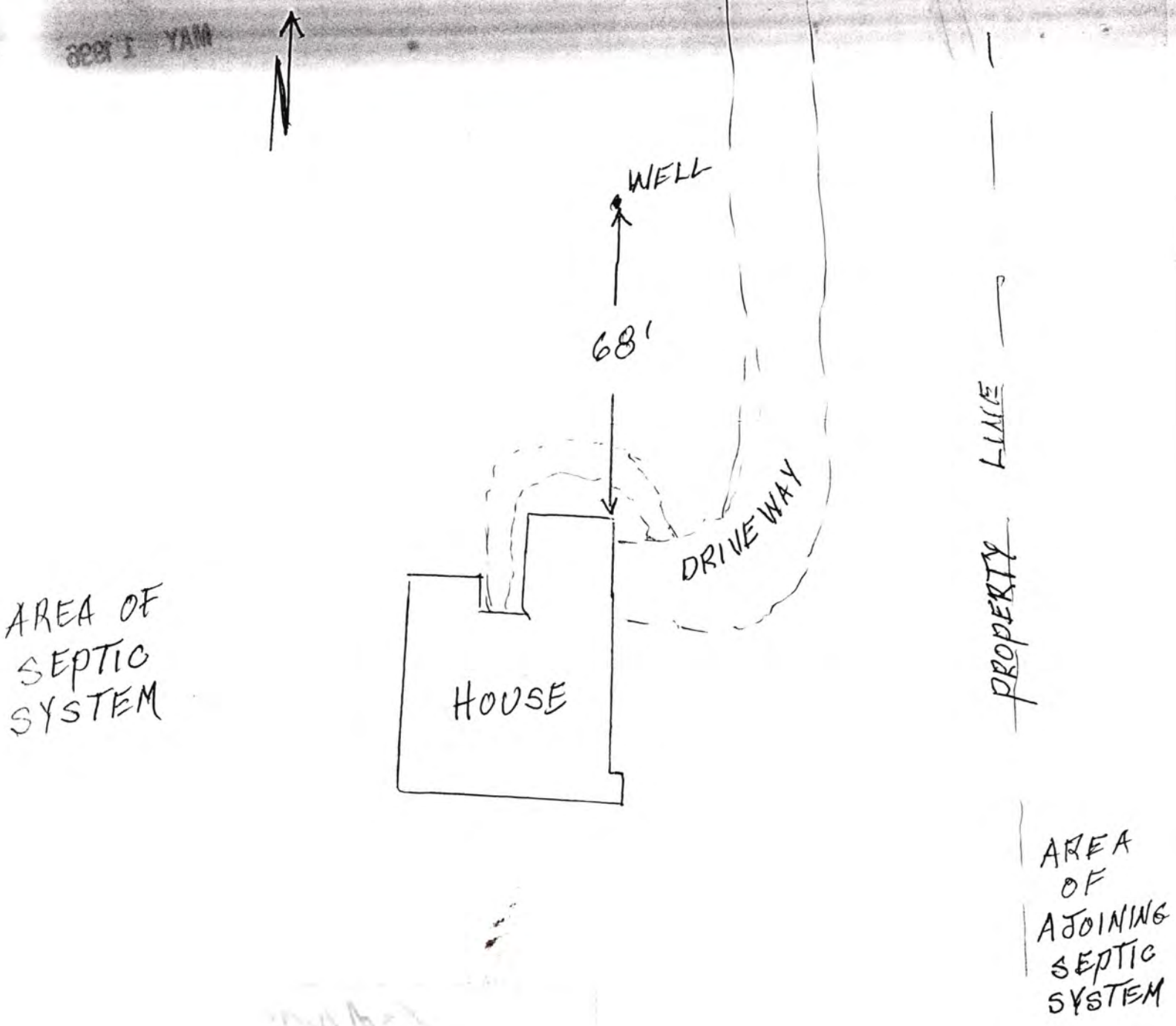
REMARKS NITRATE NITROGEN <0.1 PPM. BACTERIOLOGICAL O.K.

DO NOT WRITE BELOW THIS DOUBLE LINE

Health Department forwarded copy of record to Nebraska Conservation and Survey Department for Scientific Record ☒

FORM 23-A

COPY


N
WELL
68'
DRIVE WAY
HOUSE
AREA OF SEPTIC SYSTEM
PROPERTY LINE
AREA OF AJOINING SEPTIC SYSTEM

# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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FILE NO. 954000487

DATE: _____

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   Describe _____
3. Distance to Public Water Supply: 0 Ft.
4. Intended use of well private household

DENNIS FREY

5639

Dennis Frey
Signature of Applicant (owner or lessee)

RT#1 Box 88A Nickman NE 2780
Address 68372

60658

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

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Date: _____ by _____
Date: _____ by _____
Date: _____ by _____

Nitrate Level _____ PPM
Bacteriological Analysis Satisfactory
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Date: _____ By: _____

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Engineers Copy: Light Green
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FORM 23-13