LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 99380196901

Issued 04/16/99
Expires 10/16/99
Revenue Code 3157

FEES: $150.00

Establishment

JAMES JENKINS
T9N R7E SEC 28
COUNTRYLANE ESTATES BLK 4 LOT 3
9525 S 67 ST

TOTAL $150.00

Permittee

JAMES JENKINS
4240 PINEWOOD LN
LINCOLN NE 68516

Issued By Health Director
Lincoln-Lancaster County Health Department

009143

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

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

A

Permit Number: 99380196901

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☒ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 9525 S. 67TH STREET (no rural route) City LINCOLN NE, Zip 68516

Legal Description 28 (1/4) (1/4) Section 9N Township 7E Range COUNTRY LANE ESTATES Subdivision Addition 4 Block 3 Lot

Geographical Location (if known): Longitude _____ Latitude _____

☒ Check if system mail address is not the same as the owner's address

B. Owner

Name JAMES JENKINS Signature _____

Address 4240 PINEWOOD LANE City/State/Zip LINCOLN, NE 68516

☐ Check if owner designed system Home Phone 423-7994 Work Phone _____

C. Contractor

Name PAUL GUNNISON Company Name PREMIER BUILDERS

Address 2310 S. 61 ST City/State/Zip LINCOLN, NE 68506

☐ Check if contractor designed system Work Phone 489-3003

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name HAROLD CASEMENT Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 4 Is there a Whirlpool Bathtub (YES) NO

☐ Commercial Establishment/Other Facility Specify _____

Design flow in gallons per day _____ Type of Wastewater: ☐ Domestic ☐ Non-Domestic.

DO NOT WRITE BELOW THIS LINE

Approval Process ☒ Municipal Code 24.38 ☐ County Resolution No. 2832

1. **Health Department**	Date rec'd 4/2/99 Date frwd 4/19/99	**ACTION** ☒ Approved ☐ Disapproved Signature Jerrold E. Hood	
2. **Supt. Bldg. Insp. or Village Clerk**	Date rec'd 4.19.99 Date frwd 4.19.99	**ACTION** ☒ Approved ☐ Disapproved Signature _____	
3. **City or County Engineer**	Date rec'd 4-19-99 Date frwd 4-19-99	**ACTION** ☒ Approved ☐ Disapproved Signature _____	

Installation Final Written Approval

By _____

Date 9-8-99

Business Office Use Only

Date Rec'd 04/02/99
Amt Paid 150 ck
Rec'd By _____ Cash/Check No. 4750

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

Also well

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

B

Permit Number:

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

Lot 3 Blk 4 County View Acres

System Location (Indicate correct number and street)

Address 9525 So 67th (no rural route) City Lincoln NE, Zip

Owner Jim Jenkins Addresss 4240 Pinewood Ln 16

Soil Type (SCS): SHARPSBURG SILTY CLAY LOAM Percolation Rate: 39 min./inch

Date of Tests 13 - July to 14 - July Weather: Precipitation — Temperature 85°

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/In)
1	30	7-13	8:30 AM	7-14	7:00 Am	7-14	9:30	21	7@14	10:00	30	1	30 MIN/IN
~~2~~								~~23½~~				~~½~~	
3								18½				¾	40 MIN/IN
4								16½				¾	40 MIN/IN
5								17				1	30 MIN/IN
6								24				⅝	48 MIN/IN
7								21¼				⅝	48 MIN/IN

Person Conducting Percolation Tests

Name: Larry Scheevaerts

Phone: 489 7294

Address 8201 old Cheney Rd

Sum of Percolation Rates:

Average of Rates:

Rate Used for Calculation: 39

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

- All lots are a minimum of 3.0 acres; the majority are walkouts



Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

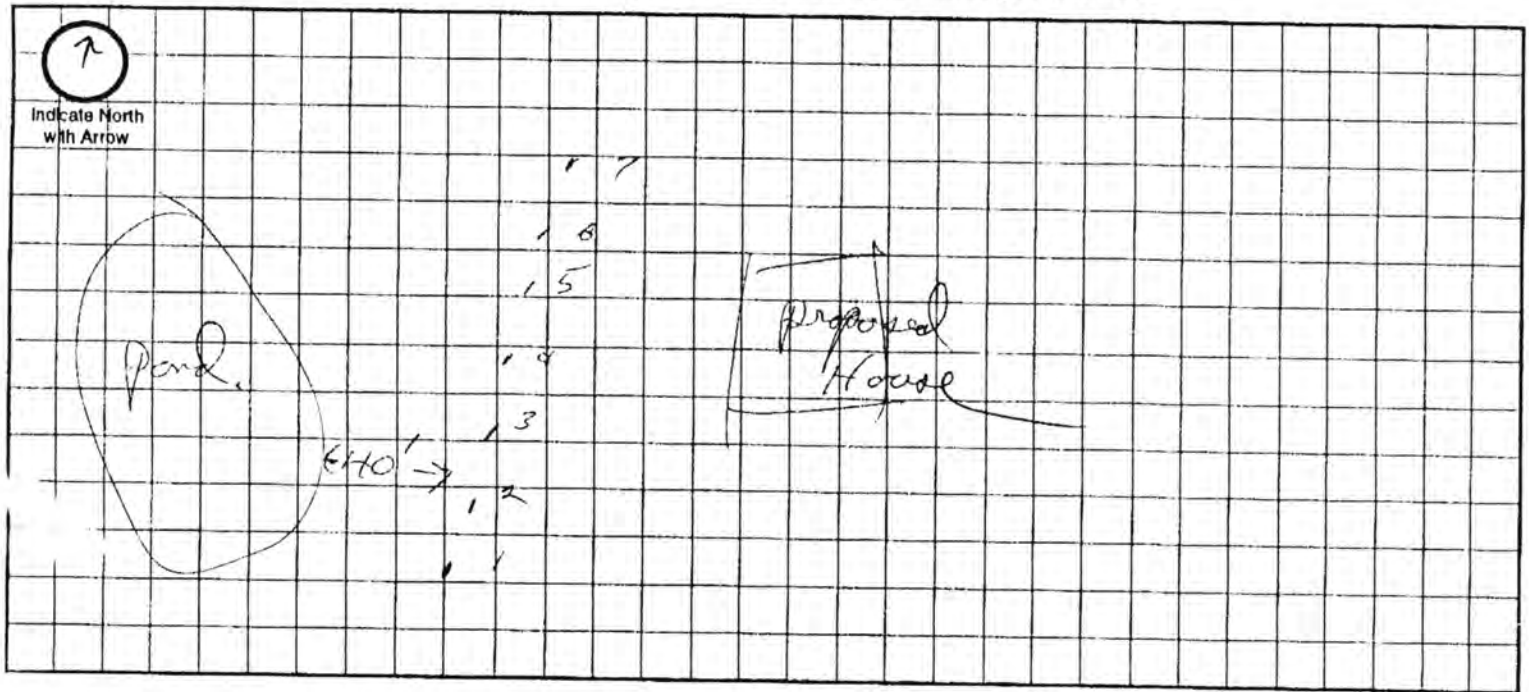
C

Permit Number:

Lot 3 Blk 4
County Views

Sewage Disposal System
Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.



Approximate Scale: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 9525 So 67th City Lincoln NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 39 (min. per Inch) Soil Type: SHARPSBURG SILTY CLAY LOAM Land Slope: 1% %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other Infiltrator

Total Square Feet of Field Required: ~~1395~~ 1230 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: Infiltrator

Capacity of Septic Tank 1500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals ~~352~~ 308 ft. Number of Trenches 4 Trench Width 4

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☒	25 ☒	20 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☒	40 ☒	☒
Lagoon (ft)	100 ☒	500 ☒	50 ☒	N/A ☒	30 ☒	50 ☒	100 ☒	200 ☒	☒

E. Required Signatures

Home Building Contractor _____ Date 4/16/99

Installer Larry Schweitzer Date 7-14-98

FORM 23-102 10-96

- **All lots are a minimum of 3.0 acres; the majority are walkouts.**

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

D

Permit Number: 99 3801 9690 1

Sewage Disposal System

As Built Plans & Specifications

Date 9-7-99

System Location (Indicate correct number and street)

Address 9525 So 67TH (no rural route) City LINCOLN NE, Zip _____

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 43 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 100 + ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: CONCRETE
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☑ below grade 12 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12 in.
8. Distances to: Well or suction line 100 + ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: CONCRETE
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 3'6" ft.

D. Absorption Field

(Provide as-built drawings on back of this form)

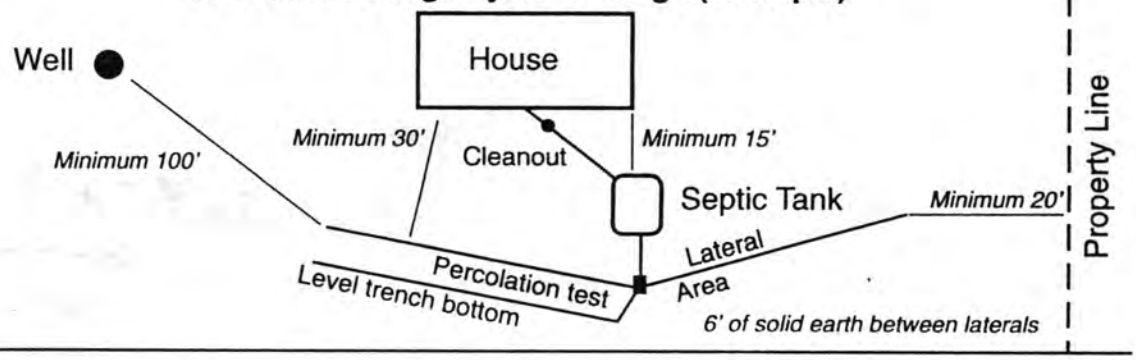
1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: 18
   or perforated pipe: _____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 100 ft. 100 ft.
   85 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope _____ in/100 ft.
   Average depth 36 in
4. Filter material: Gravel
   Depth of material _____ in.
5. Distances to: Well or suction line 100 + ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

4 Bedroom

Complete "As Built" drawing on back of this form.

Indicate North with Arrow

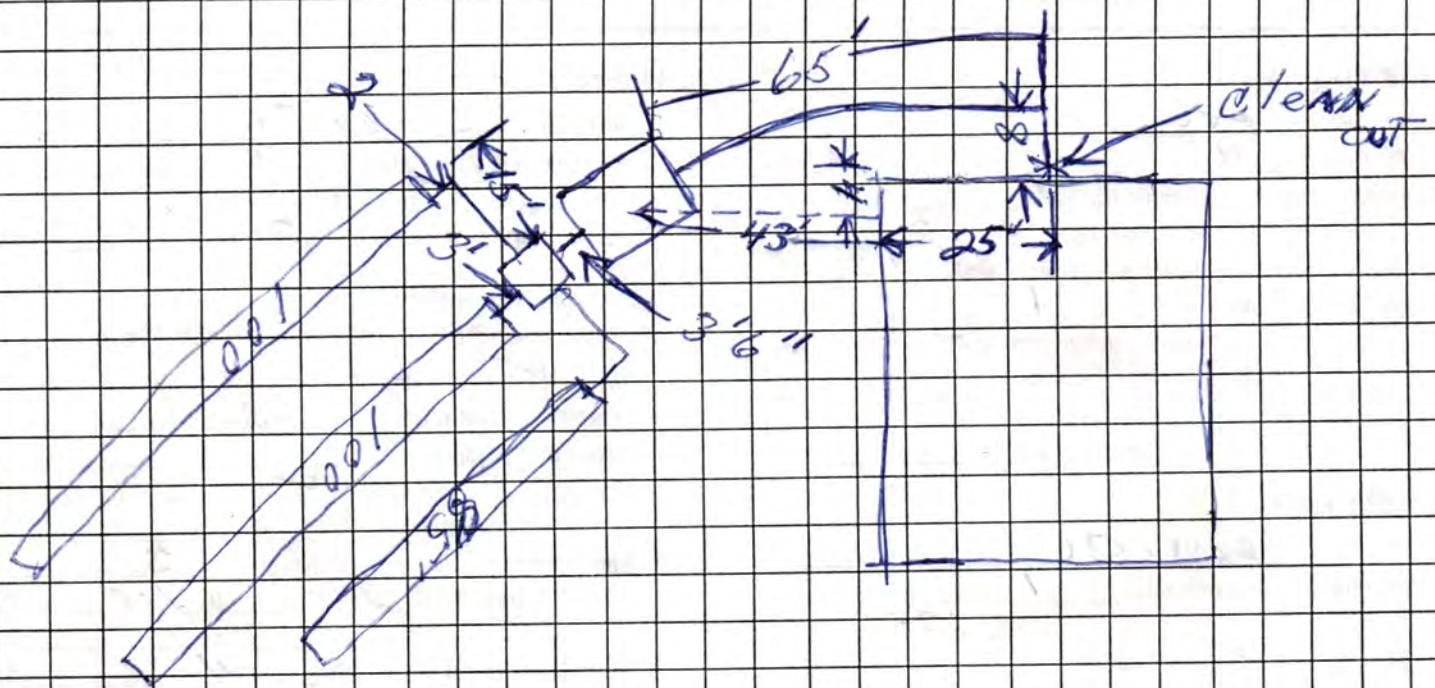
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

Indicate North with Arrow



Capitol City Trenching
9-5-99

Approximate Scale: _____ ft. = _____ grid line/s

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit No. 99400082201

WATER WELL
NEW WATER WELL CONSTRUCTION

Issued 04/05/99
Expires 10/05/99
Revenue Code 3162

PAID

Establishment

JAMES JENKINS
T9N R7E SEC 28
COUNTRYLANE ESTATES BLK 4 LOT 3
9525 S 67 ST

FEES: $75.00

TOTAL $75.00

Permittee

JAMES JENKINS
4240 PINEWOOD LN
LINCOLN NE 68516

Issued By Health Director
Lincoln-Lancaster County Health Department

009055

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

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street ● Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit No. _____

Request for Site Clearance and Permit for Individual Water Well

The undersigned hereby requests:

- [x] Site Clearance and Permit to construct a new individual water well - $75.00
- [ ] Annual Permit for an existing well - $50.00
- [ ] Permit to repair or alter existing well involving opening of well - $25.00

1. Well Site Address 9525 S. 67 ST City Lincoln, NE Zip NE 68516
(No Rural Route Please)
Legal description of property:
Twp 9N; Range 7E; Section 28; Block 4; Lot 3; Addition COUNTRY LANE ESTATES

2. Well use: [x] Residential; [ ] Commercial; [ ] Other; Describe: _____

3. Distance to Public Water Supply N/A feet.

Signature of Owner _____

Print Name JAMES JENKINS
Current Address 4240 PINEWOOD LANE
LINCOLN NE 68516
Current Home Phone 423-7994
Work Phone _____

Signature of Contractor [signature]

Print Name PAUL SWINSON
Address 2310 S. 61
LINCOLN, NE 68506
Home Phone 488-3788
Work Phone 489-3003
Cellular Phone 430-4133

Sewage Permit Applied for: [x] Yes [ ] No [ ] Not applicable

Please Submit Permit Fee with This Request
Please Do Not Write Below This Line

Approval Process: Lincoln Municipal Code 8.44

1. Health Department — Date received 4/2/99; Date forwarded 4/5/99
ACTION [x] Approved [ ] Disapproved Signature: Jerrold C. Hood

2. Building & Safety — Date received 4/5/99; Date forwarded 4/5/99
ACTION [x] Approved [ ] Disapproved Signature: [signature]

3. City Engineer — Date received 4/5/99; Date forwarded 4/5/99
ACTION [x] Approved [ ] Disapproved Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL: Will require back flow preventer if & when connected to city water.

Site Visits:
Date: 5/25/00 By Jerrold Hood
Date: ___/___/___ By _____
Date: ___/___/___ By _____

Installation Final Written Approval
By: Jerrold C. Hood
Date: 5/31/00

Distribution:
White - Health Dept. Lt. Green - Engineer Lt. Blue - Bldg Inspector

Nitrate Level 0.7 mg/L
Chloride Level _____ mg/L
Bacteriological Analysis Satisfactory
Yes X No ____
Other _____

Business Office Use Only
Date Rec'd: 04/02/99
Amt Paid: $ 75.00
Rec'd By [signature] Cash/Check No. 4750

ALSO Sewage

October 1995
DWR Form 145

STATE OF NEBRASKA
DEPARTMENT OF WATER RESOURCES
WATER WELL REGISTRATION

FOR DEPARTMENT USE ONLY

Registration Date 9-24-98 Sequence No. 114639 Registration No. G-97882
Owner Code No. 51960 Receipt No. 98532 Lower Platte South NRD

1. Well Owner JIM JENKINS Telephone Number (402)423-7994
Address 4240 PINEWOOD LANE
City LINCOLN, State NE Zip Code 68516+

2. Drilling Firm MOSER WELL DRILLING & SERVICE, INC. Telephone Number (402) 792-2515
Address P. O. BOX 308 Contractor's License No. 19033
City HICKMAN State NE Zip Code 69372-03080

3. Permit Number(s)

4. Purpose of well (indicate one): ___Dewatering (over 90 days) XX Domestic ___Geothermal ___Ground Heat Exchanger
___Ground Water Source Heat Pump ___Industrial ___Injection ___Irrigation ___Livestock ___Monitoring
___Observation ___Public Water Supply (with spacing (46-638)) ___Public Water Supply (without spacing) ___Recovery ___Aquaculture
___Other ___
(indicate use)

5. Replacement and abandoned well information
A. Is this well a replacement well? ___Yes XX No B. Registration number of abandoned well: ___
C. Replacement well is ___ feet from abandoned well. D. Abandoned well last operated ___, 19___
E. Original well pump column size: ___ inches. P. Completion of original well abandonment on ___, 19___
G. Location of water use of abandoned well: ___

6. A. Well location: SOUTHEAST 1/4 of the ___1/4 of Section 28, Township 9 North, Range 7 East/West, LANCASTER County.
B. The well ~~is~~ 1,300 feet from the (North or (South)) section line and 1,300 feet from the (East or West) section line
~~SEE C BELOW~~ (Circle one) (Circle one)
C. Street address or block, lot and subdivision, If applicable: COUNTRY VIEW ESTATES - 9525 SOUTH 67TH - ~~THE WELL IS LOCATED ON MY 3 ACRE PROPERTY AT THIS ADDRESS ABOUT 10 FT FROM THE SOUTH LOT LINE, 100 FEET FROM THE EAST LOT LINE.~~
D. Location of water use, if applicable (give legal descriptions): SEE C ABOVE
E. If for irrigation, the land to be irrigated is ___ acres.
F. Well reference letter(s), if applicable: ___

7. Pump Information.
Is pump installed at this time? XX Yes ___No
If yes, complete items A through F.
If no, complete items A and D with estimated information for those wells in which pump will be installed.
A. Actual pumping rate, if applicable: 15 gallons per minute. Measured ☒ Estimated ☐
B. Pump column diameter: 1 1/4" inches. C. Length of pump column: 220' feet
D. Pumping equipment installed 8/13/98, 19___ E. Brandl Type: DEMPSTER 5H" + 1 1/2HP-15
F. Pump installed by: Contractor ☐ Owner ☐ Pump Installer ☒ License No. 29202

AUG 1 9 1998

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. 9940000822

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

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 28 T. 9 R. 7 Block 4 Lot 3 Addition COUNTRY VIEW ESTATES/9525 S. 67TH

Owner JIM JENKINS Address 4240 PINEWOOD LANE, LINCOLN, NE 68516

LOG OF WELL	
Depth ft. --to--	Description
0- 40	BRN & YEL CLAY
40- 45	BRN SAND
45- 70	YEL CLAY
70- 80	BLUE CLAY
80- 95	RED SHALE & SANDSTONE
95-195	MOSTLY FINE SS, SOME SHALE
195-230	MED FINE YEL SS
230-240	MED ORANGE SS
240-258	VERY CRS SS & SOME GRAVEL
258-275	BLUE SHALE

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER

Depth (from ground level), Ft. 258'

Date Completed 7/17/98

Casing: Length, Ft. 258' ; Dia. In. 4"

Wall Thickness, Inc. .214 ; type PVC

Screen: Length, Ft. 20' Dia. In. 4"

Type PVC WOP & SLOTTED , slot Size .030 & .025

Drop Pipe: Length, Ft. 220' Dia. In. 1 1/2"

Water Level, Surface to top of water, Ft.:

Static 172', Pumping 180' EST

Yield: 20 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)

P. O. BOX 308
Address Hickman, Nebraska 68372-0308

REMARKS NITRATE NITROGEN 0.7ppm, BACTERIOLOGICAL O.K.

Date 17 AUGUST 1998

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

G-97882

8. Well Construction Information.

A. Total well depth 258' feet. B. Static water level: 172' feet. C. Pumping water level: 180'
☒ Estimated or ☐ Measured

D. Well Construction began 7/15/98 , 19 E. Well Construction completed 7/17/98 , 19

F. Bore hole diameter: 8.5" inch(es).

G. Plain Casing: Diameter 4.046" ID 4.5" OD inches. Type of material: PVC
Wall thickness: .214" inches. Joints--Welded/Glued/Threaded/Other: GLUED
Length(s) and placement(s) depth from 6' ft. to 238' ft. from ft. to ft.

H. Screen 4.026" ID 4.843" & 4.5" OD in.; Type of material PVC WOP & SLOTTED
Screen apenings (slot size): .030 & .025 Trade name: JAYCO Guides at ft.
Length(s) and placement(s) depth from 238' ft. to 248' ft. from 248' ft. to 258' ft.

1. Gravel pack interval(s) from 40' ft. to 230' ft. from 230' ft. to 259' ft. Grade size: "B"

J. Grouted/Sealed from 6' ft. to 40' ft., with HOLEPLUG (type)
from ft. to ft., with (type)

K. Drilling method: ROTO L. Drilling fluid WATER

M. Well development technique (total time and method): AIR/AIR TESTED AT 20 GPM

N. Will chemicals, fertilizer or antifreeze be injected or utilized in the system? ___Yes XX No
If yes, what will be used

9. Geologic Materials Logged

DEPTH IN FEET FROM	T	DESCRIPTIO	DEPTH IN FEET FRO	T	DESCRIPTIO
0	40	BRN AND YEL CLAY			
40	45	BRN SAND			
45	70	YEL CLAY			
70	80	BLUE CLAY			
80	95	RED SHALE & SANDSTONE			
95	195	MOSTLY FINE SS, SOME SHALE			
195	230	MED FINE YEL SS			
230	240	MED ORANGE SS			
240	258	VERY CRS SS & SOME GRAVEL			
258	275	BLUE SHALE			

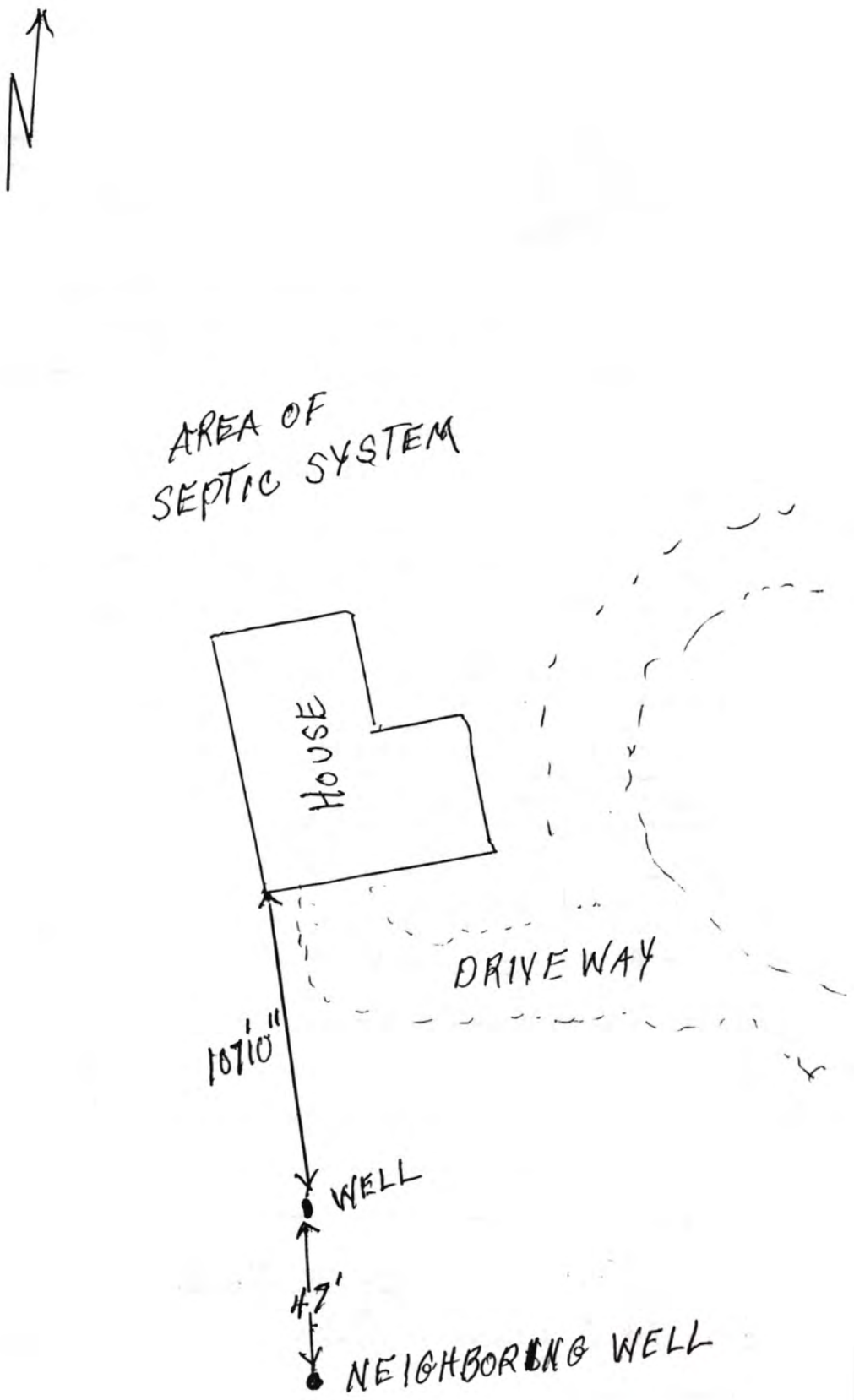
(Additional sheets may be submitted)

10. I am familiar with the information submitted on this registration, and to the best of my knowledge it is true.

Water Well Contractor's Signature — 8/17/98 Date

Water Well Owner's Signature — 9/12 Date

PRINTED ON RECYCLED PAPER


AREA OF
SEPTIC SYSTEM
HOUSE
DRIVE WAY
10'10"
WELL
47'
NEIGHBORING WELL