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. 95380133901

Issued 09/05/95
Expires 03/05/96
Revenue Code 18754

Establishment
PATRICK BURNS
T9N R7E SEC 29
KENSINGTON EST 1ST BLK 4 LOT 6

FEES: $150.00

TOTAL $150.00

Permittee
PATRICK BURNS
5009 GOLDENROD 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 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

Test Location
NW. Corner of 53rd + Johnson Rd.

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

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: 5-20-95 to 5-21-95. Weather: Precip. 0 Temp. 56.

Holes 1-2 had water in From Pre-Test

OWNER: Patrick Burns
Address: 5009 Goldenrod Lane

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"	5-20	2:30 pm	5-21	7:30 Am	5-21	7:30 Am	6"	9:30 Am	5 7/8"	30m	1/8"	
2	36"	5-20	2:30 pm	5-21	7:30 Am	5-21	7:30 Am	6"	9:30 Am	5 7/8"	30m	1/8"	
3	36"	5-20	2:30 pm	5-21	7:30 Am	5-21	7:30 Am	6"	9:30 Am	5 3/8"	30m	5/8"	
4	36"	5-20	2:30 pm	5-21	7:30 Am	5-21	7:30 Am	6"	9:30 Am	5 5/8"	30m	3/8"	
5	36"	5-20	2:30 pm	5-21	7:30 Am	5-21	7:30 Am	6"	9:30 Am	5 5/8"	30m	3/8"	
6	36"	5-20	2:30 pm	5-21	7:30 Am	5-21	7:30 Am	6"	9:30 Am	5 3/4"	30m	1/4"	

Mike Haugland
Signature of Person Conducting Test

Address 2700 Dan Ave Lincoln, NE Phone 464-0638

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

(Do not write below this line)

REVIEWING ACTION

Remarks: TOO SLOW FOR CONVENTIONAL SEPTIC
Soil Type (SCS): PAWNEE CLAY LOAM
Date: AUGUST 28, 1995

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

Jerrold C. Hoop
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 ☐

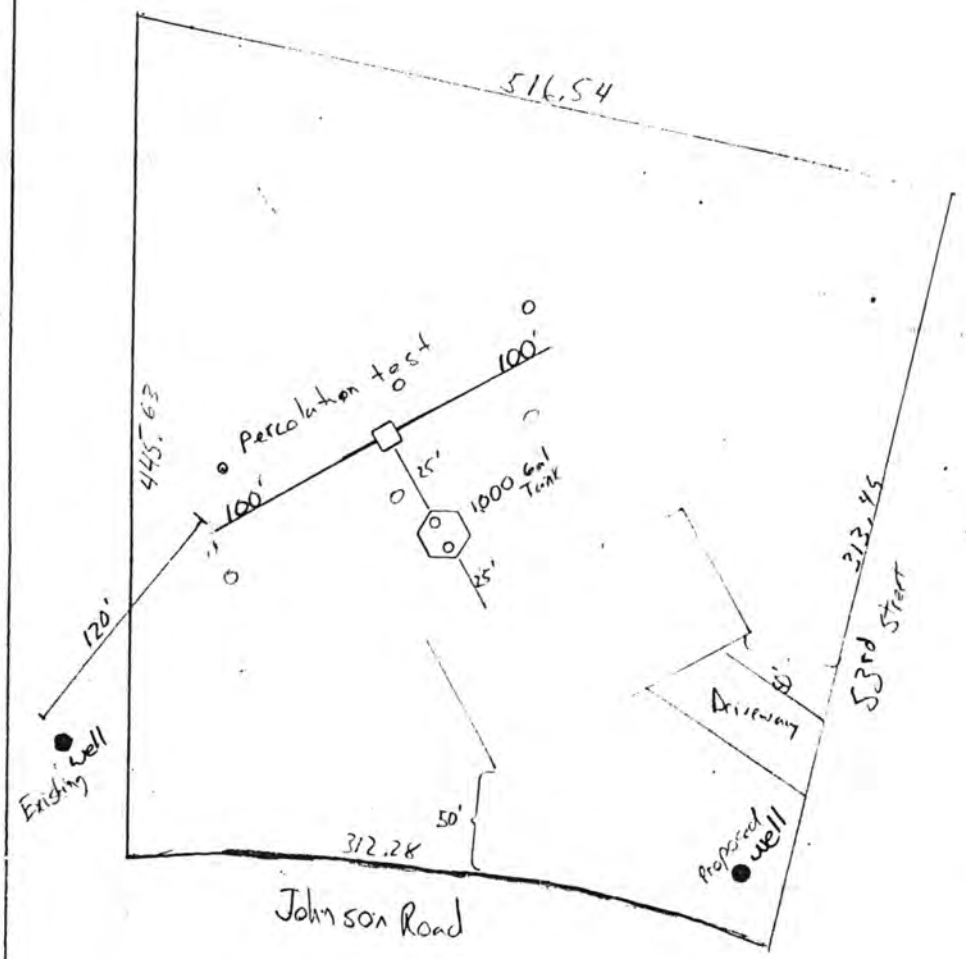
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

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: 8/16/95

Minimum Design Requirement
1. Capacity of Septic Tank 1,000 gals.
2. Total Length of Laterals 200' ft.
3. With a Trench Width of 8'0" in.
4. Total Area of Lateral needed ____ sq.ft.

_____
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. _____

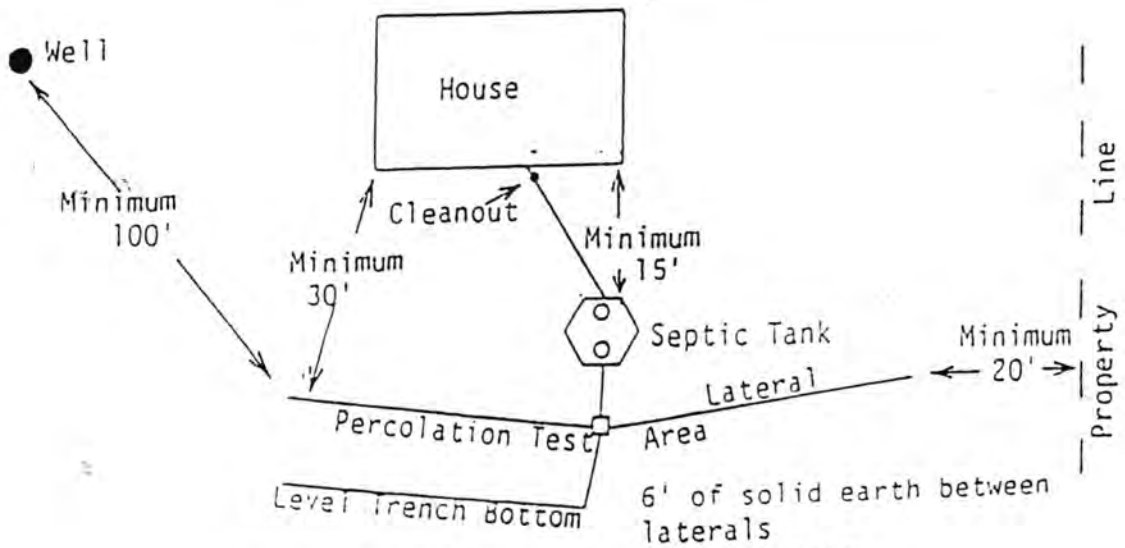
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic ; Diameter 4" in.
2. Distance above basement floor _____ in., or below basement floor 10" in.
3. Distance between dwelling and septic tank 25' ft.
4. Number of clean-outs 0 .
5. Distances to:
Well or Suction Line 150' ft.; Stream 450' ft.; Pressure Line _____ ft.; Property Line 110' ft.

B. SEPTIC TANK:
1. Material Concrete ; No. of compartments 3 .
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Precast Industries)
4. Manholes: Over Inlet; diam. 12" in.
Over Outlet; diam. 12" 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 18" in.
8. Distances to:
Well or Suction Line 220' ft.; Stream 400' ft.; Pressure Line _____ ft.; Property Line 200' ft.

C. DISTRIBUTION BOX:
1. Material Concrete ; Number - available outlets 4 .
2. Factory Built: Yes ☒ No ☐
(Company Precast Industries)
3. Distance from Septic Tank 25 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 24" or Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other _____.
2. Lateral Lines:
Number 2 ; Length of each line 100', 100', _____, _____, _____ ft.;
Total length of laterals 200' ft.;
Distance between lateral lines _____ ft.
3. Trench dimensions: Width 8 ft.;
Slope 6" in/100 ft.; Average Depth 36" in.
4. Filter Material: Gravel
Depth of Material 24" in.
5. Distances to:
Well or Suction Line 120' ft.; Stream 350' ft.; Pressure Line _____ ft.; Property Line 100' ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

Permit No. 96400055301

WATER WELL

Issued 05/30/96
Expires 10/30/96
Revenue Code 19851

Establishment

PATRICK BURNS
T9N R7E SEC 29
KENSINGTON EST 1ST BLK 4 LOT 6

FEES: $75.00

TOTAL $75.00

Permittee

PATRICK BURNS
5009 GOLDENROD 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"

001908

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 $ 75.00

FILE NO. _____

DATE: 5/24/96

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 29
   Block 4 : Lot 6 : Addition Kensington Estates 1st Addition
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: ____ Ft.
4. Intended use of well _____

Patrick & Bonnie Burns
Signature of Applicant (owner or lessee)

5009 Goldenrod Lane
Address

423-9427

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 5/28/96. Action: Approved ☒ Disapproved ☐
   Date Frwd. 5/28/96. Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 5/28. Action: Approved ☒ Disapproved ☐
   Date Frwd. 5/28. Signature: _____
3. City or County Engineers: Date Rec'd 5/28/96. Action: Approved ☒ Disapproved ☐
   Date Frwd. 5/28/96. Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10/18/04 by Jerrold Hood
Date: _____ by _____
Date: _____ by _____

Nitrate Level 0.0 PPM
Bacteriological Analysis Satisfactory
Yes ☒ No ☐

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/20/04 By: J.C. Hood

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

M 23-13

AUG 6 1996

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13553
FILE NO._____

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

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 29 T. 9 R. 7E Block ___ Lot ___ Addition 9449 S. 53RD - KENSINGTON

Owner PATRICK BURNS Address 5009 GOLDENROD LANE, LINCOLN, 68512

LOG OF WELL	
Depth ft. --to--	Description
0- 35	YEL CLAY
35- 50	RED & YEL SHALE
50- 70	BLUE & RED SHALE
70- 75	BLUE SHALE
75- 80	RED, YEL & BLUE SHALE
80- 95	FINE YEL SS & YEL SHALE
95-115	FINE YEL SS
115-160	MED FINE WHITE SS
160-169	MED CRS WHITE SS
169-178	YEL SHALE
178-195	MED CRS WHITE & LIGHT
	YEL SS
195-200	YEL SHALE TRNG DARK RED

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER

Depth (from ground level), Ft. 195
Date Completed 7-22-96

Casing: Length, Ft. 179 ; Dia. In. 4"
Wall Thickness, Inc. 214 ; type PVC

Screen: Length, Ft. 16 Dia. In. 4"
Type PVCWOP&SLOTTED, slot Size .030 & .025

Drop Pipe: Length, Ft. 120 Dia. In. 1 1/4"

Water Level, Surface to top of water, Ft.:
Static 95', Pumping 100' EST

Yield: 150 gpm, 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 5 AUGUST 1996

REMARKS NITRATE NITROGN 0.0p.p.m.
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 ☒