Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

Permit # 01390070501

Issued 09/13/01
Expires 03/13/02
Revenue Code 3157

Establishment

RAY BLOOMQUIST
T9N R7E SEC 32
10701 S 56 ST

FEES: $100.00

Permittee

RAY BLOOMQUIST
10701 S 56 ST
LINCOLN NE 68514

TOTAL: $100.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

000096

#01390070S

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

☐ Municipal Code 24.38 ☐ County Resolution Number 2832

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 32 1/4 Section _____
   Block _____ Lot _____ Addition _____
   Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address 10701 So. 56

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe _____

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

4. **Description of proposed alteration, extension or repair** addition of 100'x4' wide Lateral

5. **Work to be done by:** ☐ owner ☒ contractor's name SOUTHWICK SERVICES

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 Ray Bloomquist Address 10701 So 56 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 9/13/01 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date 9/13/01 By Jerrold Hood
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 3/11/02 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: 09/13/01 Amount 100.00 Check No. 4419 Initials JS

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

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 9-13-01

Ray Bloomquist

System Location (Indicate correct number and street)

Address 10701 So. 56 (no rural route) City LINCOLN NE, Zip 68516

A. Building Sewer

sch 40

1. Material: CI To C.O. + PVC To Tank
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 30 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: Fiberglass
   Number of compartments: 1
2. Capacity: 1,000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 12 in.
   Over outlet, diameter 12 in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☒ tee
7. Depth to top of tank, below unfinished grade: 15 in.
8. Distances to: Well or suction line NA ft.
   Stream NA ft.
   Pressure line > 50 ft.
   Property line > 20 ft.

C. Distribution Box

1. Material: PVC
   Number available outlets: 7
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 8' ft.

D. Absorption Field

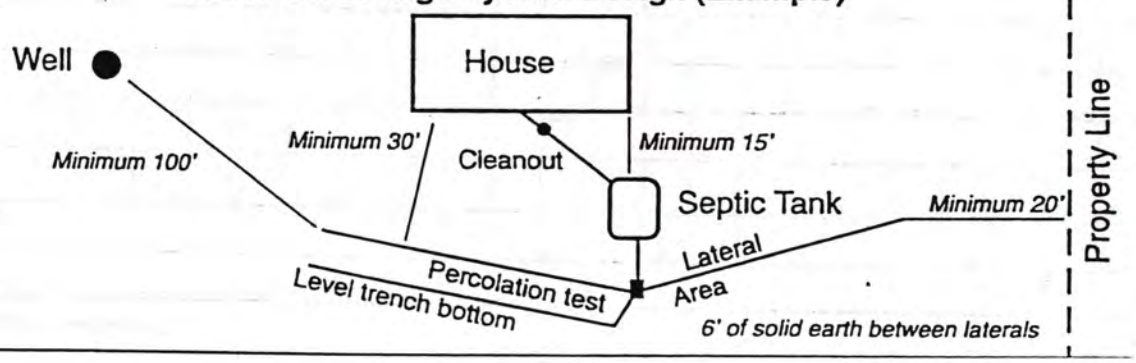
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 12" → 16"
   or perforated pipe: ADS Diffuser
   Material: ☒ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 100 ft. 94 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope ≤ 6 in/100 ft.
   Average depth 24 in
4. Filter material: Road Gravel
   Depth of material 16 in.
5. Distances to: Well or suction line NA ft.
   Stream > 50 ft.
   Pressure line > 30 ft.
   Property line > 20 ft.

Indicate North with Arrow

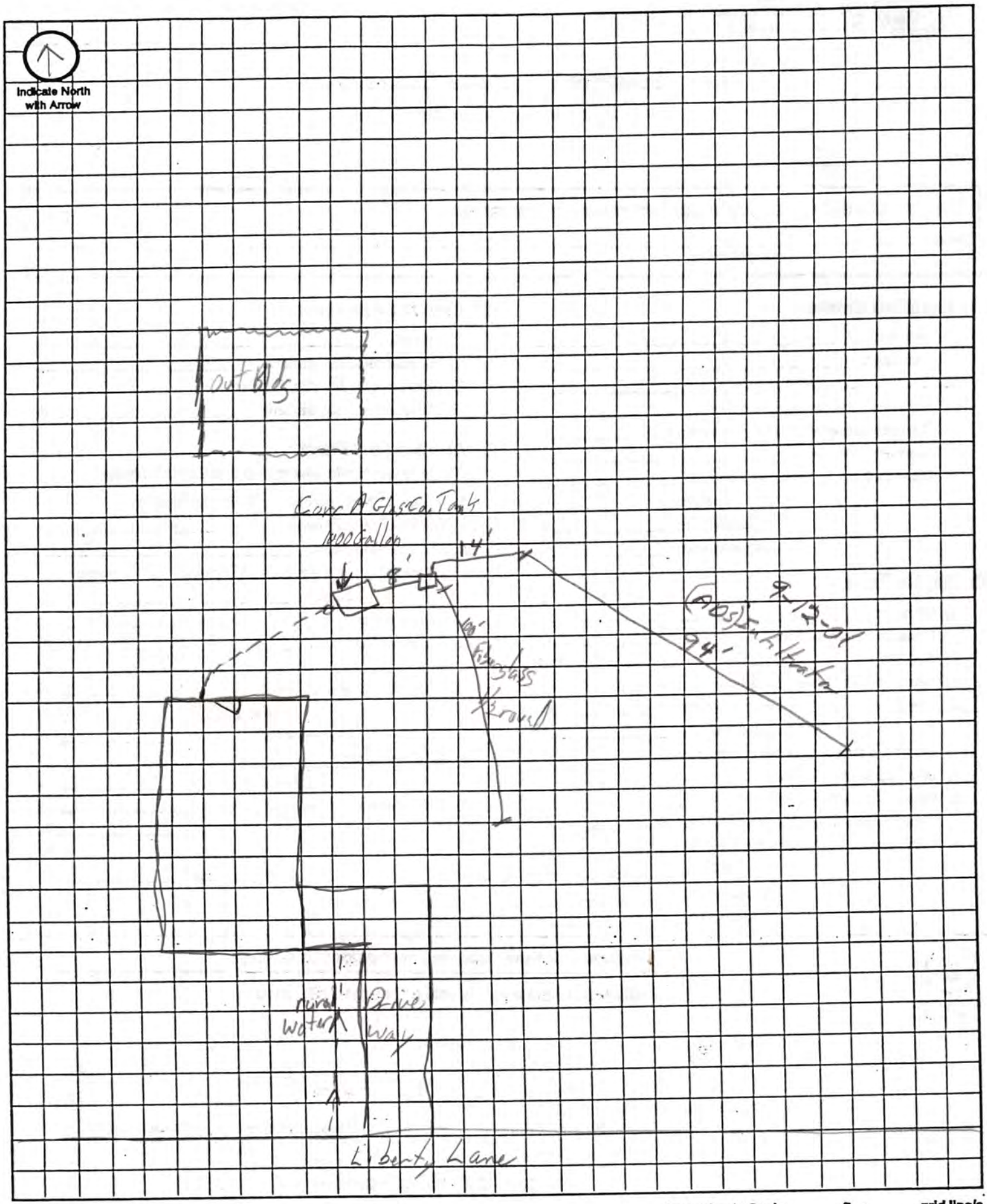
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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

RECEIVED JUN 2 2 1992

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-780

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / LC

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☐ Evaluation of the Individual Water System Date: 6/17/92

☑ Evaluation of the Sewage Disposal System ☑ Enclosed is $150.00

Legal Description of Property: TWP. 9N ; RANGE 7E ; SECTION 32 ; BLOCK 1

LOT 3 ; ADDITION Breezy Acres; Street Address 10701 S. 56TH

Directions to Property 3½ miles South from Old Cheney on 56th turn west on Liberty Lane, 1st house on right

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System 30ft of NE corner of house Year Installed 2

	NAME	ADDRESS	PHONE
Present Owner:	Raymond Bloomquist	10701 S 56th 68516	421-3705
Tenant/Buyer:			
Return to:			

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Raymond Bloomquist Address 10701 S. 56th

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HEALTH DEPARTMENT USE ONLY

Date Received JUNE 22, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE JUNE 23, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☐	Date 6/23/92 by J.C.H.
Bacteria	☐	☐	Provisional:	☐	Date _____ by ____
Nitrate	☐	☐	Disapproved:	☒	Date _____ by ____

Comments: LATERAL HAS RECENTLY SEEPED TO THE SURFACE OF THE GROUND. OLD WELL ON PROPERTY MUST BE PROPERLY ABANDONED IF NOT USED. MUST BE ABANDONED BECAUSE IT IS CLOSER THAN 100 FEET FROM THE LATERAL. See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☐

SEWAGE DISPOSAL SYSTEM: Approved: ☐ Provisional Approval: ☐

APPROVED BY _____ DATE _____

Approval or disapproval is based on written 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 operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832