LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 916-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

March 16, 1977 — THIS PERMIT EXPIRES

Franklin Mitchell (for Warren Anderson) — ISSUED TO

Route #8, Lincoln, NE — ADDRESS

T9N; R7E; Sec. 32; Lot 36 I.T. — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 916-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 9-7-76

The undersigned hereby requests SITE CLEARANCE 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 32
   Block ____; Lot 36 I.T. ; Addition ____
   Street Address ____

2. Property Use: Residential ____ ☑ ; Commercial ____ ☐
   No. of Bedrooms 2 . Describe: ____
   Other Use ____ ☐
   Describe: ____

3. Type of Individual Sewage Disposal System: Septic Tank ☑ ; Other ☐

4. Distance to public sewer: ____ ft.

Franklin Mitchell Builder
Signature of Applicant (Owner or Lessee)

RR8 Lincoln, Nebr. 68506
Address
489-8766

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 9/13/76 . Date Frwd. 9/13/76 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd. ____ . Date Frwd. ____ . ACTION: Approved ☐ Disapproved ☐ Signature: R. Franck
3. City or County Engineer : Date Rec'd. 9-13-76 . Date Frwd. 9-13-76 . ACTION: Approved ☑ Disapproved ☐ Signature: Henry J. Graff

REMARKS OR REASONS FOR DISAPPROVAL ____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT 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: 475-6221)

FILE NO. 916-C

DATE: 9-7-76

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N ; Range 7E ; Section 32 ; Block 36 I.T. ; Lot ; Addition .
Street Address .

2. Property Use: Residential ☑ ; Commercial ☐
No. of Bedrooms 2
Other Use
Describe:
Describe:

3. Type of Individual Sewage Disposal System: Septic Tank ☑ ; Other ☐

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Franklin Mitchell Builder
Signature of Applicant (owner or lessee)

RR8 Lincoln, Nebr. 68506
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;
Filing Fee: $ 30.00

2. Site Visits:
Date: 10-8-76 by: jw
Date: by:
Date: by:

3. Date: Approved ☒ ; Disapproved ☐ 9/7/76
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10-8-76 by: James Wevelka

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. 916-C

SPECIFICATIONS

DATE: _____

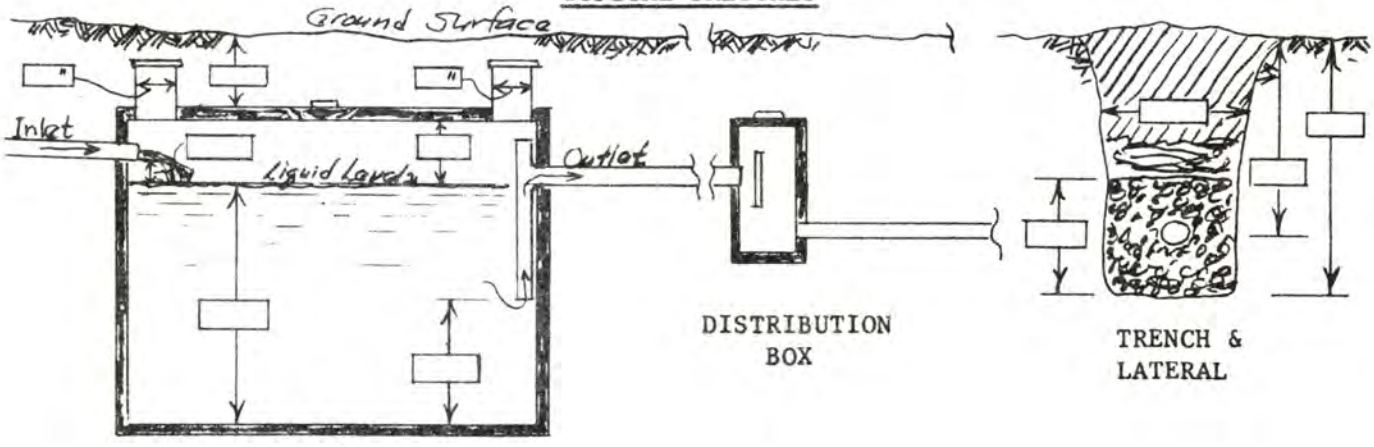
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____)
No ☐
3. Dimension: Length ____in.; Width ___in.
Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___in.
Number 3; Length of each line ___ft
Total length of Laterals 223 ft.;
Slope level in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.;
Width 48 in.
4. Filter Material: _____.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. 916-C

SPECIFICATIONS

DATE: _____

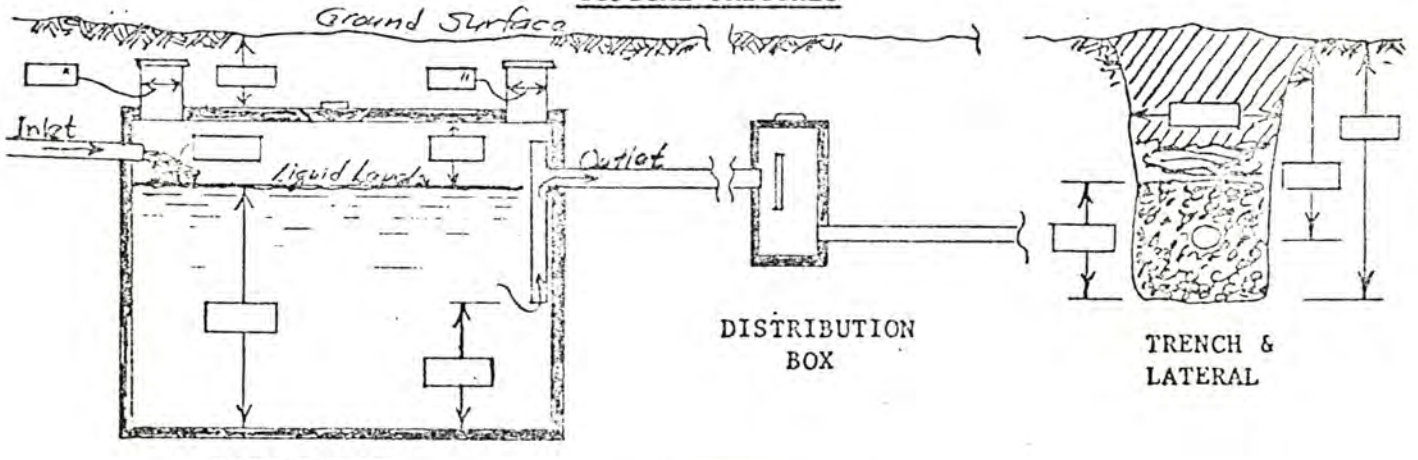
A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 10" in.
3. Distance between dwelling and septic tank 32 ft.
4. Number of clean-outs 0.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☑ (Company Precast Co.)
No ☐
4. Manholes: Over Inlet; diam. ___ in.
Over Outlet; diam. ___ in.
Below Grade ___ in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___ in.
7. Depth of top of tank below finished grade 12 in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

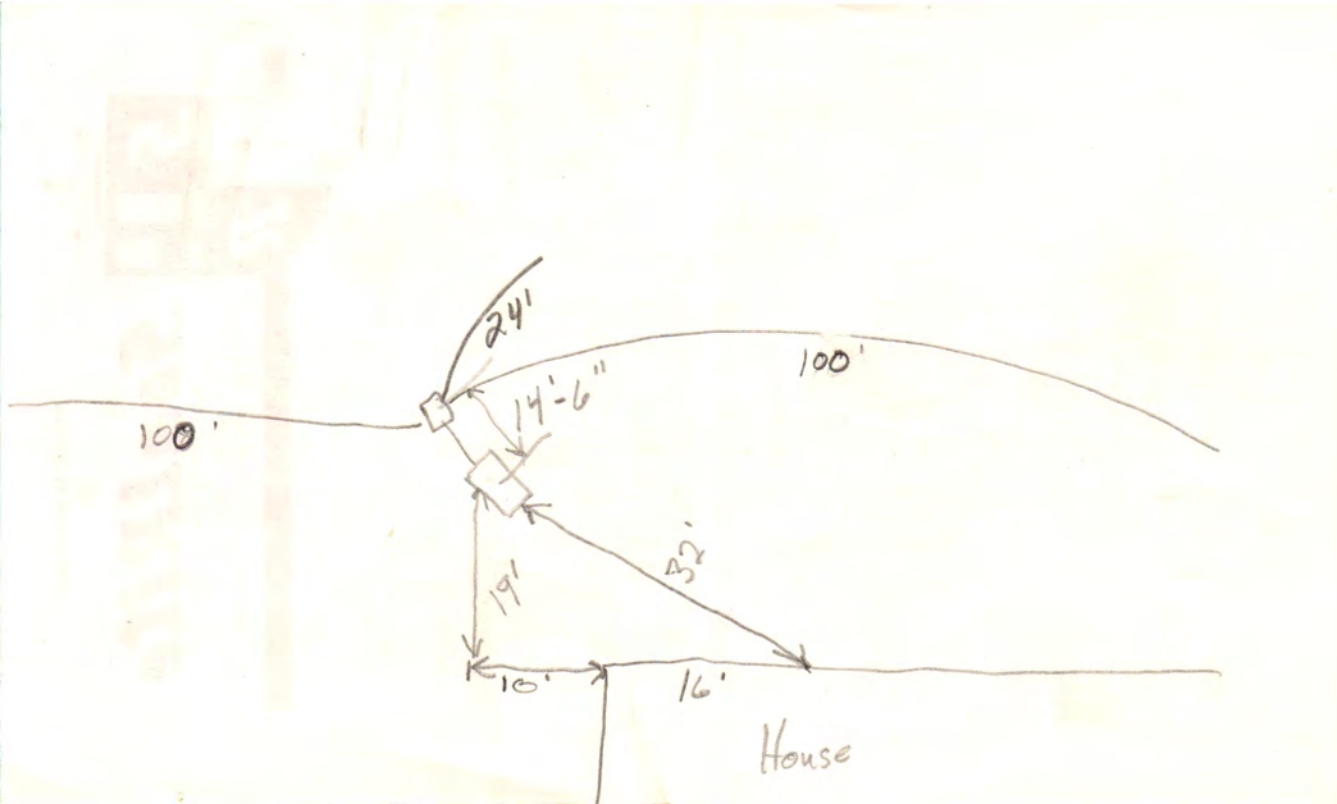
C. DISTRIBUTION BOX
1. Material concrete; No. available outlets 5.
2. Factory Built: Yes ☑, (Company Precast Co No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 14' ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: half moon
2. Lateral Lines: Depth below grade 12 in. Number 3; Length of each line 100 ft Total length of Laterals 224 ft.; 100 24
Slope 4 in/100 ft. Diameter of pipe 24 in.; Shape ∩
Material: concrete ☑; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth 36 in.; Width 48 in.
4. Filter Material: gravel.
Depth of material from trench bottom 30 in.
5. Distances To:
Well or Suction Line 120 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line 100 ft.
6. Percolation Rate: ___ minutes/inch

TYPICAL SKETCHES



Signature of Applicant


24'
100'
14'-6"
100'
19'
32'
10'
16'
House

003

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-78

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / L

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: Aug 12 [illegible] $150.00

☐ Evaluation of the Sewage Disposal System ☒ Enclosed is $75.00

Legal Description of Property: TWP. 9N; RANGE 6E; SECTION 22; BLOCK 40

LOT [redacted]; ADDITION [redacted]; Street Address 5[illegible] Saltillo Rd

Directions to Property Lincoln Airport [illegible] 56th Street

Location of Well [illegible] Tap Location: Inside ☐ Outside ☐

Location of Sewage System S.W. [illegible] Year Installed 1940 1976

	NAME	ADDRESS	PHONE
Present Owner:	Peggy L. Pederson/Virginia M. Hinton	[illegible]	[illegible]
Tenant/Buyer:	Kevin W. & Sue A. Wills	1916 Meadowlark Station I	[illegible]
Return to:	Terry Lintstrom	6940 "O" St. Ste 300 Lincoln	467-3000

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

Signature of Applicant Heather Mangelsen Address [illegible] St. Ste 300

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HEALTH DEPARTMENT USE ONLY 150.00

Date Received AUGUST 13, 1996 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE AUGUST 13, 1996

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 8/13/96 by LCH
Bacteria	☒	☐	Provisional:	☐	Date _____ by ____
Nitrate 1.4 ppm	☒	☐	Disapproved:	☐	Date _____ by ____

Comments: IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY [illegible] Ward C. Hoot M.E.H.D. DATE AUGUST 26, 1996

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

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

013

2200 St Marys Avenue Phone (402) 471-8000 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

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: _____

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

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

LOT 36; ADDITION SE 32-9-7; Street Address 5200 Saltillo

Directions to Property West of 56th & Saltillo

Location of Well North of house Tap Location: Inside ☒ Outside ☐

Location of Sewage System Southwest of Home Year Installed 1977

	NAME	ADDRESS	PHONE
Present Owner:	Sue & Kevin Wells	Same	423-4725
Tenant/Buyer:	Valarie R. Kapustka	3209 Ryons, Lincoln, Ne. Suite 312	435-0826
Return to:	Crown Clarity	6940 O St Lincoln Ne.	464-1200

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

Signature of Applicant Valarie R. Kapustka Address 3209 Ryons, Lincoln, Ne.

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HEALTH DEPARTMENT USE ONLY

Date Received 03/01/96 lp Received $150.00 ✓ Check ☒ Cash ☐ #1164

PRELIMINARY STATUS--DATE MARCH 5, 1996

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date _____ by ___
Bacteria	☒ 0	☐	Provisional:	☒	Date _____ by ___
Nitrate	☒ 0.3 ppm	☐	Disapproved:	☐	Date _____ by ___

Comments: HEALTH DEPARTMENT HAS NO RECORD OF SEPTIC SYSTEM. HENCE APPROVAL IS PROVISIONAL. NO EVIDENCE OF MALFUNCTION. IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED SEE IF IT IS NEEDED. See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Jerrold C. Hood R.E.H.S. DATE MARCH 8, 1996

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
INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

FG.4120