FILE #1827

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

March 16, 1982 — THIS LICENSE OR PERMIT EXPIRES

BILL WIELAND — LICENSEE OR PERMITTEE

RFD 8, LINCOLN, NE — ADDRESS

T9N; R7E; Section 33; Block 2; Lot 5; Neal Rene Acres — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NONTRANSFERABLE (ALTER)

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
018754	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
588965516		30.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

HEALTH DEPARTMENT APPLICATION

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1827

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

DATE: 9-15-81

The undersigned hereby applies for a permit to ALTER [X], EXTEND [ ], or 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: Twp. 9N ; Range 7E ; Section 33 ;
Block 2 ; Lot 5 ; Addition NEAL RENE ACRES
Street Address _____

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. Bedrooms 3
Describe _____
Other Use [ ]
Describe _____

3. Type of existing Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Description of proposed alteration, extension or repair: LOOP END OF LATERALS TOGETHER WITH 8" WIDE TRENCH

5. Work to be done by: Owner [ ] ; or Contractor [X], SOUTHWICK SERVICES
Contractor's Name

6. Estimated cost of project:

a. Materials	$ 800	00
b. Labor	$ 600	00
c. Other	$	
TOTAL	$ 1400	00

Bill ~~Houston~~ Wieland
Signature of Applicant (owner or lessee)

RT 8 LINCOLN, NE
Address

(Do not write below this line)

REVIEWING ACTION

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

2. Site Visits:
Date: 9/15/81 by: J.C.H.
Date: 9/15/81 by: J.C.H.
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ] * EXPERIMENTAL
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL X
Date: 9/15/81 by: J.C. Hood

*EXPERIMENTAL. CONDITIONAL APPROVAL ONLY

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: 474-1541

D

DATE: 9-15-81

FILE NO. 1827

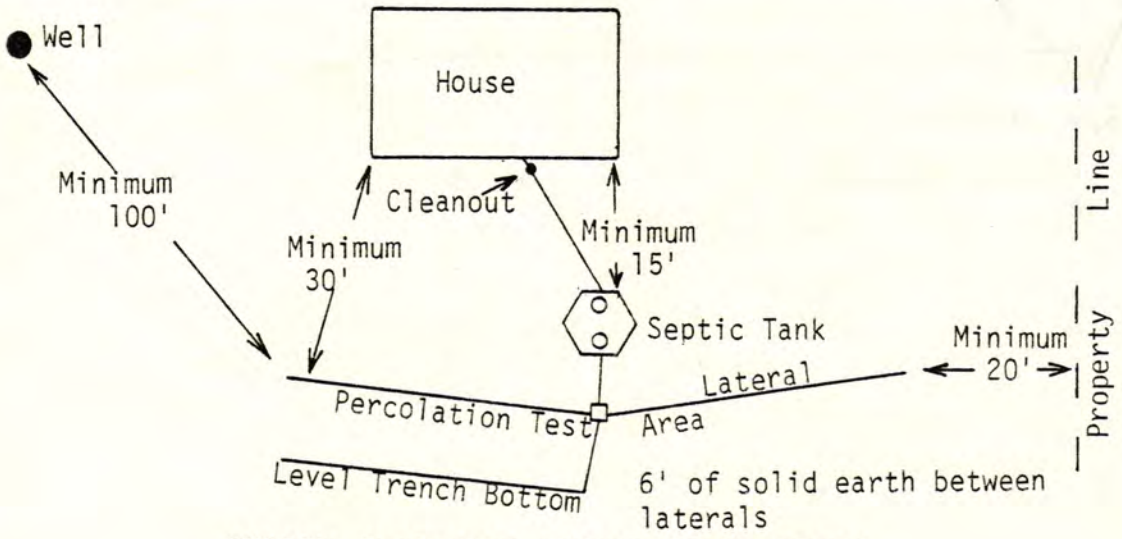
SPECIFICATIONS AS BUILT

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:
1. Material CONCRETE; No. of compartments 1.
2. Capacity 1,000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company BAILEY)
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 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 15 in.
8. Distances to:
Well or Suction Line 90 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 90 ft.

C. DISTRIBUTION BOX:
1. Material PLASTIC; Number - available outlets 7.
2. Factory Built: Yes ☒ No ☐
(Company CHEMLAB)
3. Distance from Septic Tank 4 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☒
Diameter of Half Round 12" or Perforated Pipe 4"
Material: fiberglass ☒ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 3; Length of each line 80, 80, 80, _____, _____ ft.;
Total length of laterals 240 ft.;
Distance between lateral lines _____ ft.
3. Trench dimensions: Width _____ ft.;
Slope _____ in/100 ft.; Average Depth _____ in.
4. Filter Material: ROAD GRAVEL
Depth of Material 15 in.
5. Distances to:
Well or Suction Line 30 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 33 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

COLI & NO_3 4/25/02

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

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☒ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 10200 Ricky Rd Lincoln, NE

Parcel ID ____-____-____-____-____ (i.e. 99-99-999-999-999)

Twp 9N Range 7E Section 33 1/4 ___ 1/4 ___ Block 2 Lot 5 Addition Nadine Rose Acres

Directions to Property TAKE S 56 to Rokeby Road turn EAST 3 1/2 mi to Works Rd TAKE A RIGHT to Ricky Rd Approx 1 Block

Location of Well North of North ENT to house SIDE WALK Tap Location: Inside ☐ Outside ☐

Location of Sewage System SW CORNER OF HOUSE Year Installed ____

Site Hazards (dogs, etc.) NONE SEPTIC HAS been PUMPED APPROX 45 days AGO. EAST OF HOUSE

	NAME	ADDRESS	PHONE
Present Owner:	William A Wieland	9924 County Rd 30 Hershey, Colo. 80498	970-389-1075
Tenant/Buyer:	DAN & SUE SEDLMAN	3011 Sardius Ct Lincoln NE 68516	402-421-1519
Return to:	MARK BRAICE WOODS BROS 7400 S 29 LINCOLN, NE 68516		(Fax)

Signature of Applicant Susan Sedlman Address 3011 Sardius Ct Lincoln NE 68516 Date 4/24/02

Dan R Sedlman

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 4/25/02 Amount $200.00 Check No. 4832 Initials CO

DATA ENTRY Date ____/____/____ Case No. ____ Initials ____

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 4/25/02

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ____ /ml
Nitrate	☒ 0 ppm	☐ ____ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☒
Disapproved	☐

Additional Site Visits

Date ____/____/____ by ____

Date ____/____/____ by ____

Comments: ANY UNUSED WELLS MUST BE PROPERLY ABANDONED. SEE LOWER PLATTE SOUTH NATURAL RESOURCE DISTRICT FOR FINANCIAL ASSISTANCE. ORIGINAL SEPTIC SYSTEM WAS BUILT PRIOR TO REGULATIONS AND INSPECTIONS. ADDITIONAL LATERAL ADDED 6/16/ TO MORE LATERAL AND EXPERIMENTAL SYSTEM ADDED 9/15/ HENCE

See Attached Letter ☐

FINAL STATUS APPROVAL IS PROVISIONAL. NO EVIDENCE OF MALFUNCTION. HOUSE WAS VACANT ON 4/25/02

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

Approved by Jerrold C. Hood R.E.H.S. Date 4/29/02

Approval or disapproval is based on State and local 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 operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00

AS BUILT DRAWING OF SYSTEM

DATE 9-15-87 INSTALLER BRAD SOUTHWICK
HICKMAN, NE
792-2462

