FILE #2471

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

OCTOBER 2, 1987
THIS LICENSE OR PERMIT EXPIRES

TOM K. KAREL, T. K. CONSTRUCTION, 4624 SOUTH STREET, LINCOLN, NE 68506
LICENSEE OR PERMITTEE — ADDRESS

T9N; R7E 6 PM; Sec E½ NW¼ Sec 33; Bk 1; Lot 4; Nealrene Acres 1st Add; 10521 Ricky Road
NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	018754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No.	Date and Amount

APPLICATION

HEALTH
ISSUING OFFICER OR DEPARTMENT

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

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2471

DATE: April 1, 1987

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9 North; Range 7E 6PM; Section 33 E½ of; NW¼
   Block 1 : Lot 4 : Addition Nealrene Acres 1st Addition
   Street Address 10521 Ricky Rd.
2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe
3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐
4. Distance to public sewer: 2 miles.

Tom K Kael
Signature of Applicant (Owner or Lessee)

4624 South St.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/1/87. Date Frwd. 4/2/87. ACTION: Approved ☒ Disapproved ☐ Signature: Harold C. Hoop
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 4/2/87. Date Frwd. 4/2/87. ACTION: Approved ☒ Disapproved ☐ Signature: Gary Skinner
3. City or County Engineer : Date Rec'd. 4/2/87. Date Frwd. 4/2/87. ACTION: Approved ☐ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL RURAL WATER DISTRICT

Site Visits:
Date: 8/12/87 by: J.C.H. Tanks, line & 1 lateral
Date: 8-18-87 by: rm
Date: by:

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-28-87 By: Ken Bergquist

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

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

FILE NO. 2471

PROPERTY WHERE SOIL TESTED:

Location: Township 9 North; Range 7E 6PM; Section & ¼ Section 33 E½ of NW ¼
Property Dimensions: 170 ft. x 346 ft. Area: 1.35 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: 10-14-83 to 10-15-83. Weather: Precip. — Temp. 60°.

OWNER: Tom + Cindy Karel
Address: 4624 South St.

All times P.M.

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	32	10-14	6:00	10-15	5:30	10-15	6:15	12"	6:45	11 1/8"	30	7/8"	34
2	36	10-14	6:00	10-15	5:30	10-15	6:15	12"	6:45	11 3/8	30	5/8"	48
3	36	10-14	6:00	10-15	5:30	10-15	6:15	12"	6:45	11 1/4	30	3/4"	40
4	36	10-14	6:00	10-15	5:30	10-15	6:15	12"	6:45	11 1/8	30	7/8"	34
5	36	10-14	6:00	10-15	5:30	10-15	6:15	12"	6:45	11 3/8	30	5/8"	48
6	32	10-14	6:00	10-15	5:30	10-15	6:15	12"	6:45	11 3/8	30	5/8"	48

Sum of Percolation Rates: 252
Average of Rates: 43
Mean of Rates:

Tom Karel
Signature of Person Conducting Test

Address 4624 South St Phone 488-8777

(Do not write below this line)

REVIEWING ACTION

Remarks:
Soil Type (SCS): WYMORE SILTY CLAY LOAM
Date: APRIL 14 1987

Approved Percolation Rate (a)
A. 40 min./inch
B. min./inch
C. min./inch

Jerrold C. Hood
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 ☐

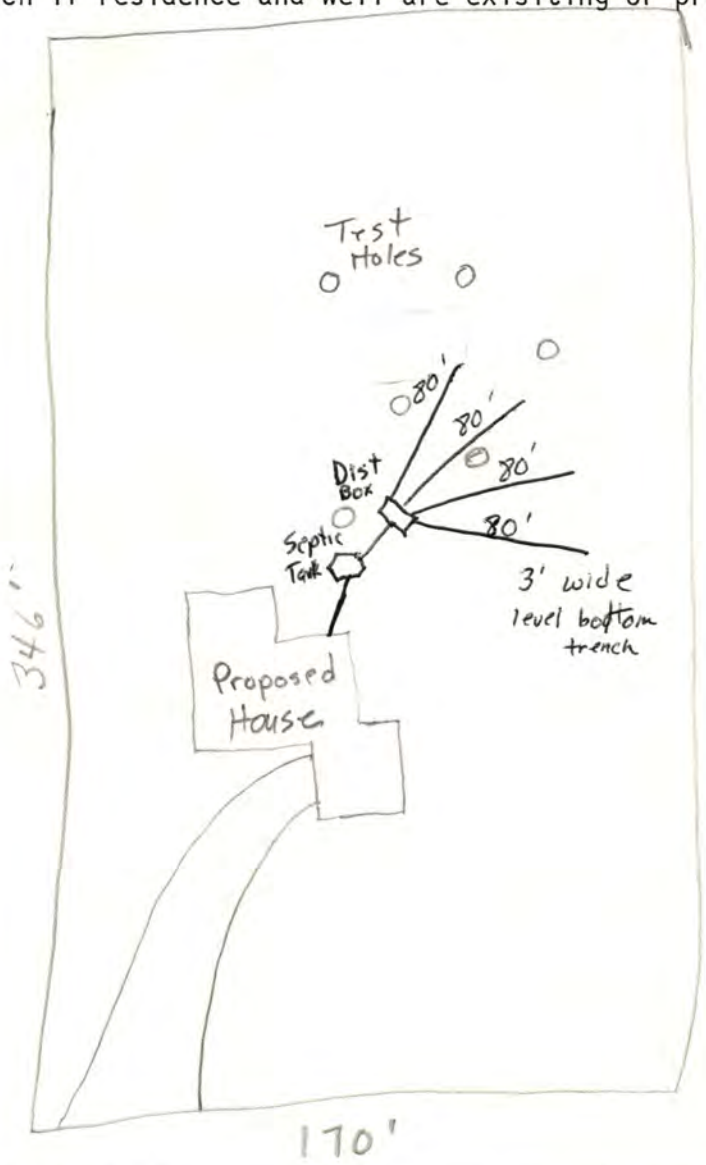
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 2471

Indicate on sketch if residence and well are exisiting or proposed.



No well needed, will hook to Rural water. Surrounding wells not close.

REVIEWING ACTION

Remarks: _____

Date: April 6, 1987

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 862 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

Tom Carol Neal Rose Acres

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. _____

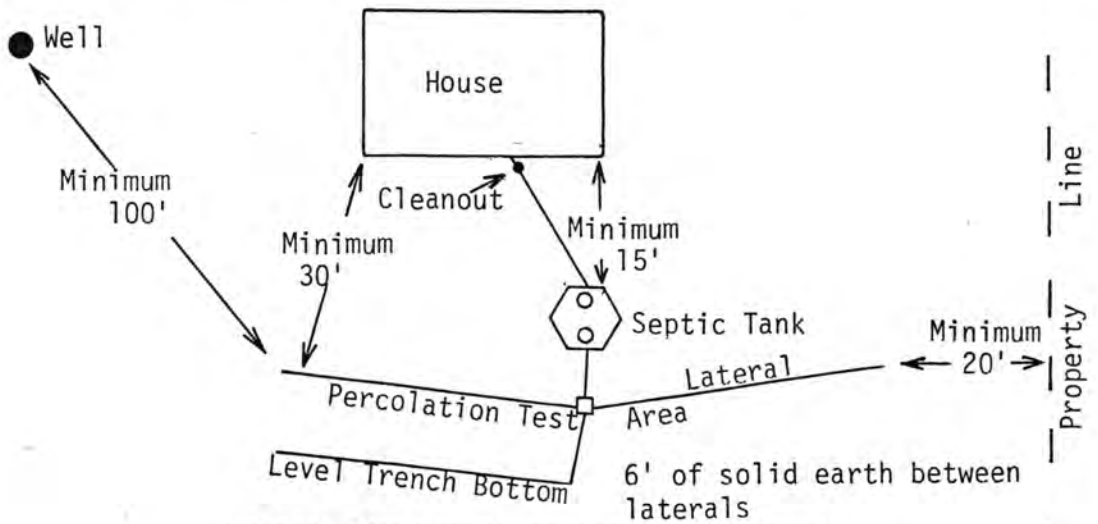
SPECIFICATIONS AS BUILT

A. BUILDING SEWER: Sch 40
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 32 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 Conc ; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Pre Cast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ 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 16 in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Concrete ; Number - available outlets 5 .
2. Factory Built: Yes ☑ No ☐
(Company Pre Cast)
3. Distance from Septic Tank 3 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 3 ; Length of each line 100, 100, 100, _____, _____ ft.;
Total length of laterals 300 ft.;
Distance between lateral lines 11 ft.
3. Trench dimensions: Width 4 ft.;
Slope _____ in/100 ft.; Average Depth 40 in.
4. Filter Material: Gravel
Depth of Material 24 in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

020

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

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

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

☒ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

☐ Evaluation of the Individual Water System ☒ Evaluation of the Sewage Disposal System

We are on Lanc. County Rural Water Dist #1

Legal Description of Property: Street Address 10521 Ricky Rd.

Twp 9N Range 7E Section 33 1/4 E½ 1/4 NW Block 1 Lot 4 Addition Nebraska Acres (1st Add.

Directions to Property Out south 56th to Rokeby then east approx. 3 blocks to Weeks Drive, then south 2 blocks on Ricky Rd.

Location of Well not applicable Tap Location: Inside ☐ Outside ☐

Location of Sewage System west of house Year Installed 1987

	NAME	ADDRESS	PHONE
Present Owner:	Thomas K Karel	10521 Ricky Rd	423-6871
Tenant/Buyer:	Thomas K Karel	10521 Ricky Rd	423-6871
Return to:	Thomas K Karel	10521 Ricky Rd Lincoln NE 68516	423-6871

Signature of Applicant Thomas K. Karel Address 10521 Ricky Rd Lincoln NE 68516 Date 4/30/93

HEALTH DEPARTMENT USE ONLY

Date Received 05/03/93 Received $150.00 Check ☒ #3792 Cash ☐

PRELIMINARY STATUS--By Gerald Hood **DATE:** 5/4/93

RURAL WATER DISTRICT WATER

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☐	☐	Approved ☒	Date___/___/___by___
Bacteria	☐_____/ml	☐_____/ml	Provisional ☐	Date___/___/___by___
Nitrate	☐_____ppm	☐_____ppm	Disapproved ☐	Date___/___/___by___

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

See Attached Letter ☐

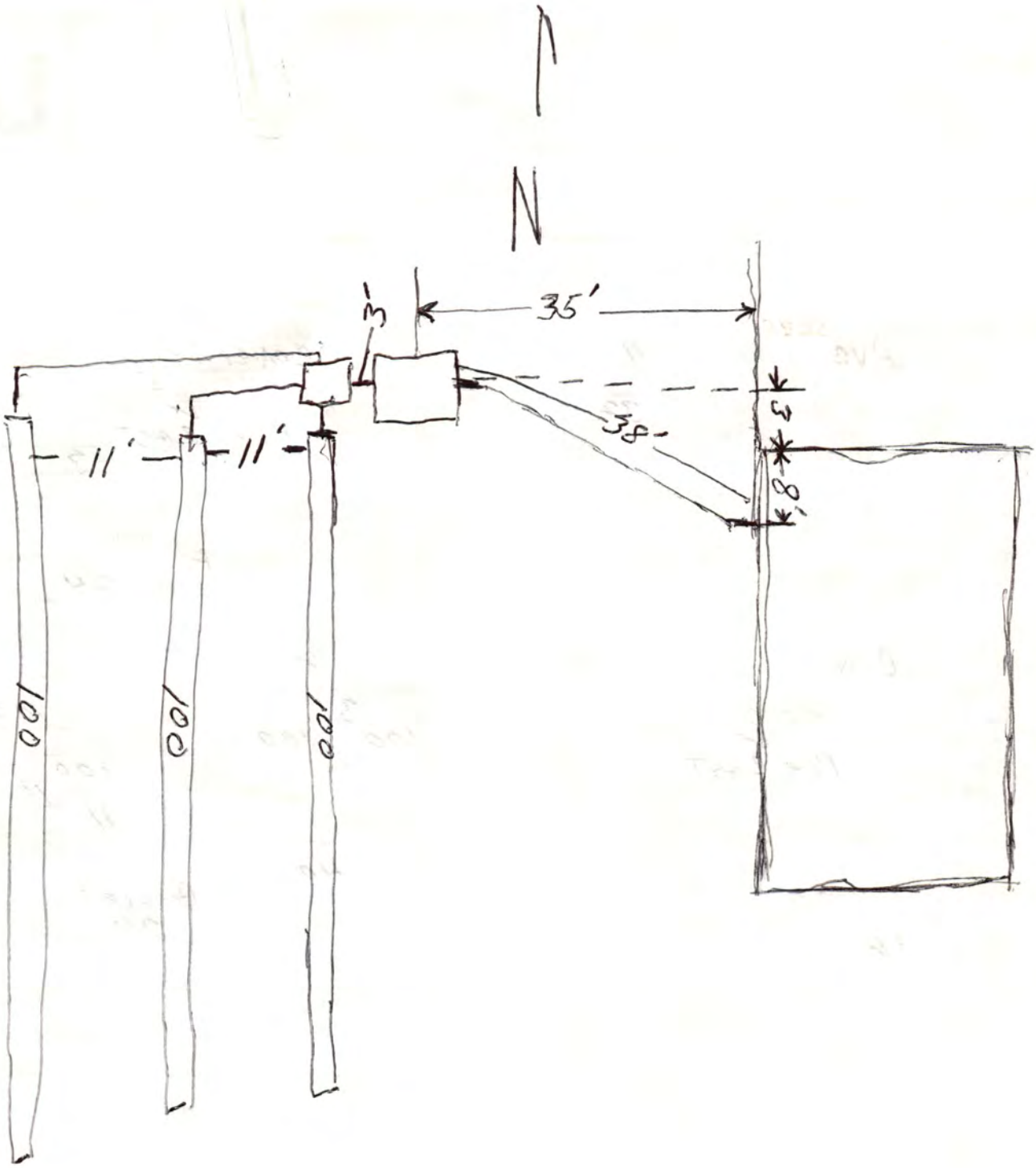
FINAL STATUS RURAL WATER DISTRICT WATER

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

Approved by Gerald C. Hood R.E.H.S. Date 5/4/93

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.

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Capital City Trenching
8-18-87