LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 590-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — October 1, 1975

TYPE OF PERMIT — THIS PERMIT EXPIRES

Lowell Heiliger — 721 Hazelwood

ISSUED TO — ADDRESS

T9N; R7E; Sec. 33; Bl. 1; Lot 3; Southdale Acres Add.

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

FRANK GOLDEN, Lancaster County Treasurer

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 3832

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. 590-C

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

DATE: 1/23/75

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 33
Block 1 ; Lot 3 ; Addition Southdale Acres
Street Address Southdale Rd

2. Property Use: Residential ☒ ; Commercial ☐
No. of Bedrooms 3 . Describe:

Other Use ☐
Describe:

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

4. Distance to public sewer: _____ ft.

Lowell Heiliger By R.V.O.
Signature of Applicant (Owner or Lessee)

731 Hazelwood
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 1/23/75 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 3/31/75 . Date Frwd. _____ . ACTION: Approved ☐ Disapproved ☐ Signature:

3. City or County Engineer : Date Rec'd. 3/31/75 . Date Frwd. 3/31/75 . ACTION: Approved ☒ Disapproved ☐ Signature:

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. 590-C

DATE: 1/23/75

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. 9 N ; Range 7 E ; Section 33 ; Block 1 ; Lot 3 ; Addition Sandhill Acres .
Street Address _____.

2. Property Use: Residential _____ ☒; Commercial _____ ☐
No. of Bedrooms 3
Describe: _____
Other Use _____
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).

Lowell Nielsen by R.D.O
Signature of Applicant (owner or lessee)

731 Wagelwood
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 6-12-75 by: _____
Date: 6-13-75 by: _____
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐ 1/23/75
by: Jerrold C. Hoob

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-13-75 by: James Newelka

Town + Country

FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 590-C

PROPERTY WHERE SOIL TESTED:
Location: Township _____
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: _____
Address _____

Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: Dec. 21 74 to Dec 22 74. Weather: Precip. 0 Temp. 20° F.

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
Hole No.	Hole Depth (in.)	Pre-Saturation Period Start Date (Mo. Day)	Pre-Saturation Period Start Time (Hr. Min.)	Pre-Saturation Period End Date (Mo. Day)	Pre-Saturation Period End Time (Hr. Min.)	Percolation Readings Start Date (Mo. Day)	Percolation Readings Start Time (Hr. Min.)	Percolation Readings Start Water Level (in.)	Percolation Readings End Time (Hr. Min.)	Percolation Readings End Water Level (in.)	Results Elapsed Time (Min.)	Results Water Level Drop (in.)	Results Percolation Rates (Min./inch)
1	36"	12/21	2 PM	12/22	12 PM	12/22	2 PM	12"	1 PM	11¼	30 M	¼	
2	"									11½		0	
3										5		2	
4										6¼		1½	
5										10¾		1½	
6										7		1¼	

Robert D Johnson
Signature of Person Conducting Test

Address 2614 N 63rd
Phone: 432 3595

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 32 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: January 23, 1975

Jerrold C. Hood
Signature of Reviewing Official

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 590-C

SPECIFICATIONS

DATE: _____

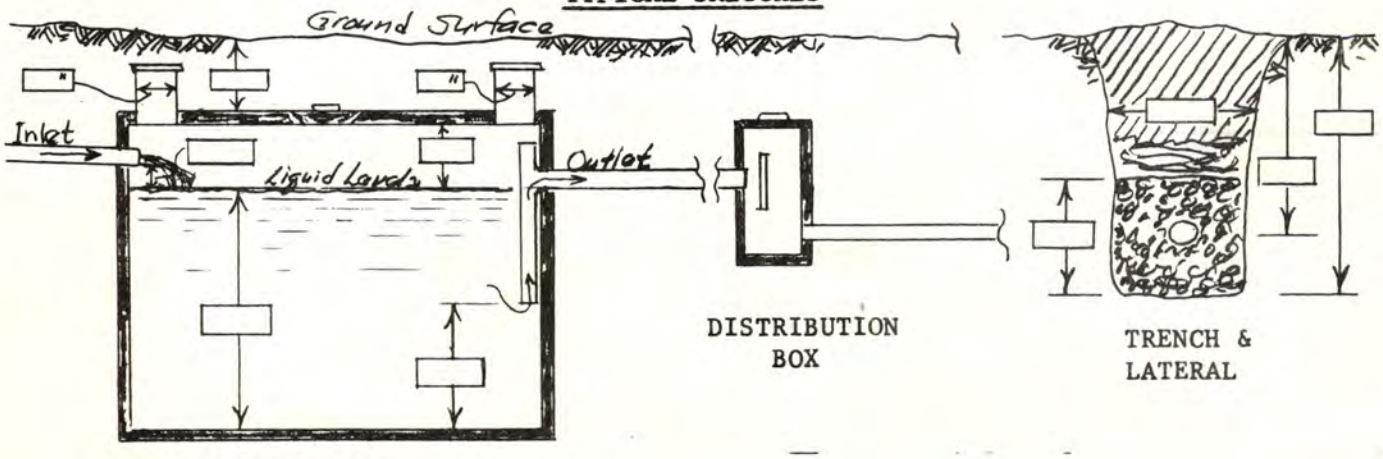
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material FIBERGLASS; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☒ (Company CORR-A-GLASS
No ☐
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☒; or Tee ☒
Depth of outlet below inlet 1 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.

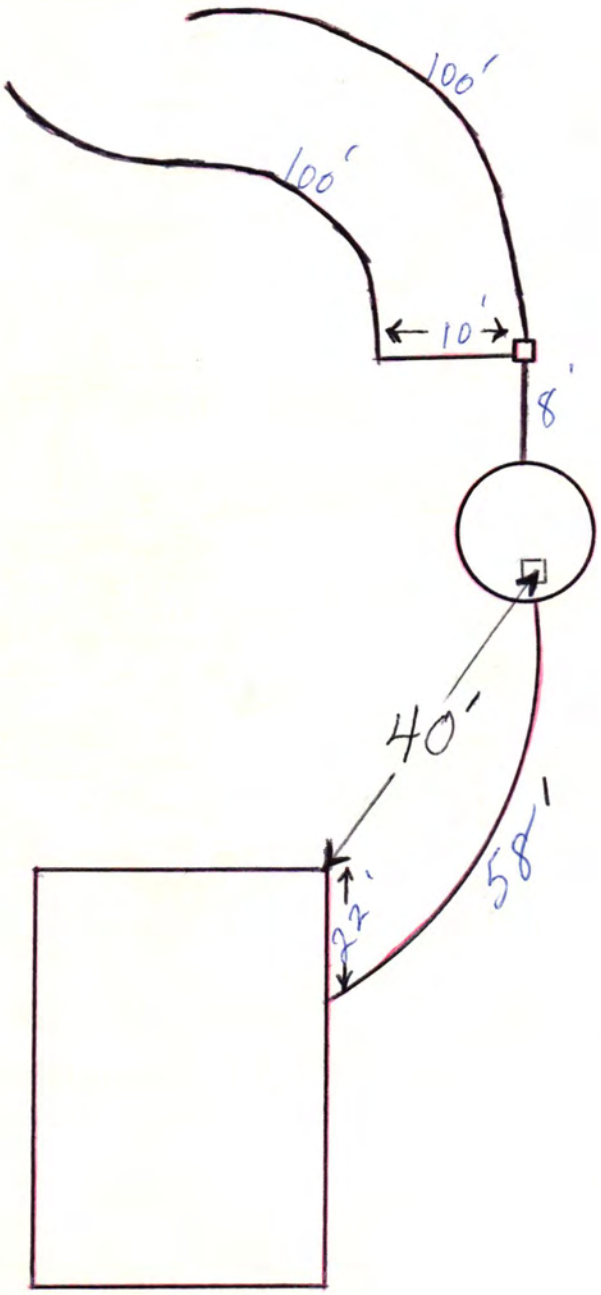
C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes ☒, (Company Pre Cast Step Co No ☐
3. Dimension: Length 24 in.; Width 18 in. Depth 20 in.
4. Distance from Septic Tank 8 ft.
5. Serial Distribution: Yes ☐, No ☒ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half moon
2. Lateral Lines: Depth below grade ___in. Number 2; Length of each line 100 ft Total length of Laterals 194 ft.; Slope 4 in/100 ft. Diameter of pipe 16 in.; Shape Half moon Material: concrete ☐; fiber asbestos ☐; clay ☐; other FIBERGLASS Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: road gravel. 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: 32 minutes/inch

TYPICAL SKETCHES



Signature of Applicant





4' wide

3 1/2 - 4' deep

008

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800 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: 6/5/92

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

Legal Description of Property: TWP. 9N ; RANGE 7E; SECTION 33 ; BLOCK 1

LOT 3 ; ADDITION Southdale Acres; Street Address 5900 Southdale Road

Directions to Property NE from S. 56th & Saltillo Rd (8 miles S of "O" on 56th)

Location of Well LANCASTER COUNTY RURAL WATER DISTRICT Tap Location: Inside ☐ Outside ☐

Location of Sewage System WEST OF HOUSE Year Installed 1975

	NAME	ADDRESS	PHONE
Present Owner:	Roger D. and Audree K. Boveia	5900 Southdale Rd	423-8671
Tenant/Buyer:	" "	" "	" "
Return to:	SECURITY FEDERAL SAVINGS	6801 "O" ST. suite 100 (68)	477-4444

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

Signature of Applicant Kelly Sutowski Address ~~3401 Winthrop~~ 6801 "O" Street Suite 100 2nd flr

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HEALTH DEPARTMENT USE ONLY

Date Received 06/08/92 Received $150.00 Check ☒ #29497 Cash ☐

LANCASTER COUNTY RURAL WATER DISTRICT PRELIMINARY STATUS--DATE JUNE 10, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 6/10/92 by J.C.H.
Bacteria	☐	☐	Provisional:	☐	Date _____ by _____
Nitrate	☐	☐	Disapproved:	☐	Date _____ by _____

Comments: _____

See Attached Letter ☐

FINAL STATUS LANCASTER COUNTY RURAL WATER DISTRICT

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

APPROVED BY Jerrold C. Hood R.E.H.S. DATE JUNE 10, 1992

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