LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1031-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

October 14, 1977 — THIS PERMIT EXPIRES

John D. Vermaas — ISSUED TO

Box 6293, Lincoln, NE 68506 — ADDRESS

T9N, R7E, Section 33, Lot 4, Block 3, Addition Southdale Acres.

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	

Health

ISSUING OFFICER

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

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. 1031-C

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

DATE: APR. 12-77

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 3 ; Lot 4 ; Addition SOUTHDALE 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. Distance to public sewer: _____ ft.

no basement needed

JOHN D. VERMAAS
Signature of Applicant (Owner or Lessee)

BOX 6293 LINCOLN. 68506
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 4/14/77 . Date Frwd. 4/14/77 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____ Date Frwd. 4/15/77 ACTION: Approved ☐ Disapproved ☐ Signature: _____

3. City or County Engineer : Date Rec'd. 4/14/77 . Date Frwd. 4/14/77 . ACTION: Approved ☐ Disapproved ☒ Signature: Henry 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. 1031-C

DATE: Apr 12-77

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 33 ; Block 3 ; Lot 7 ; Addition SOUTHDALE 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).

JOHN D. VERMAAS
Signature of Applicant (owner or lessee)

BOX 6293 LINCOLN NEBR. 68506
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
   Date: 6-14-77 by: mm
   Date: _____ by: _____
   Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐ 4/14/77
   by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 6-15-77 by: Ron Magnuson

FORM HD-43 (73) 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 474-1541)

FILE NO. 1031-C

PROPERTY WHERE SOIL TESTED:
Location: Township 9N : Range 7E
Section & ¼ Sect. 33 SW ¼
Property Dimensions: ____ft. x ____ft.
Area: ____acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: JOHN D. VERMAAS
Address: BOX 6293 LINCOLN

Dates of Tests: APR 11-77 to APR 12-77. Weather: Precip.____ Temp.____

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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	30"	APR 11	10:00 AM	APR 12	10:00 AM	APR 12	1:40 PM	24	2:10 PM	26	30	2	
2								16 3/8		18 1/2		1 7/8	
3								17 1/2		19 3/8		1 7/8	
4								22		23 1/2		1 1/2	
5								20 7/8		22 1/4		1 7/8	
6								22 1/4		21 1/4		1 3/4	

Norm Reynolds + JIM W.
Signature of Person Conducting Test

Sum of Percolation Rates: ____
Average of Rates: ____
Mean of Rates: ____

Address -
Phone ____

(Do not write below this line)

REVIEWING ACTION

REMARKS: Wymore silty clay loam designation
DATE: April 14, 1977

Approved Percolation Rate (a)
A. 17 min./inch
B. ____ min./inch
C. ____ min./inch

Jerrold C. Wood
Signature of Reviewing Official

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. 1031-C

SPECIFICATIONS

DATE: Apr 12 - 77

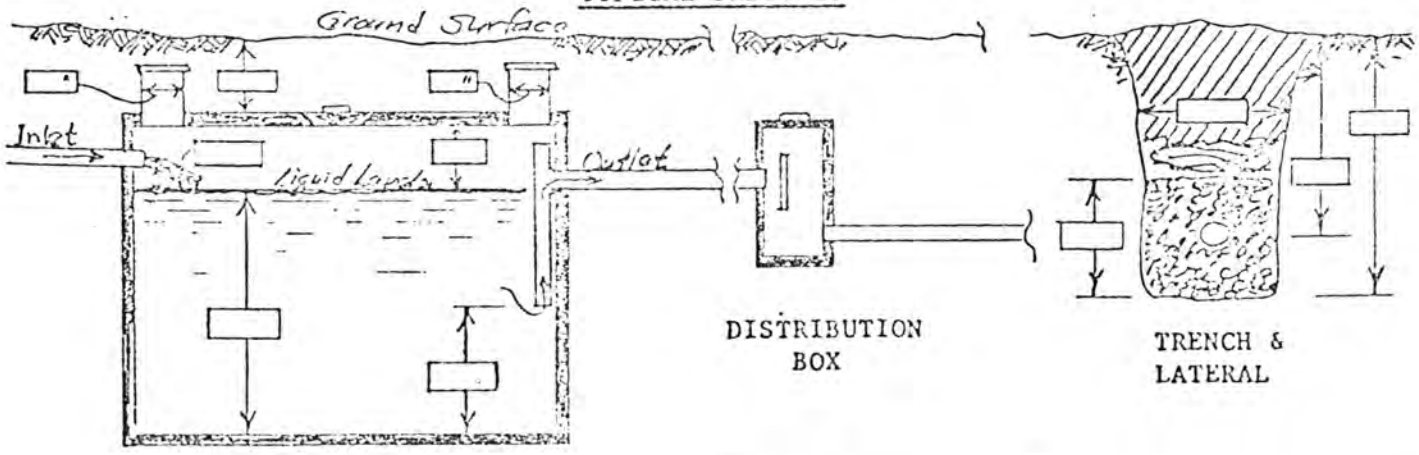
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material FIBER GLAS 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: HALF ROUND
2. Lateral Lines: Depth below grade ___in. Number ____; Length of each line ___ft. Total length of Laterals 149 ft.; Slope ____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. _____

SPECIFICATIONS

DATE: June 15-77

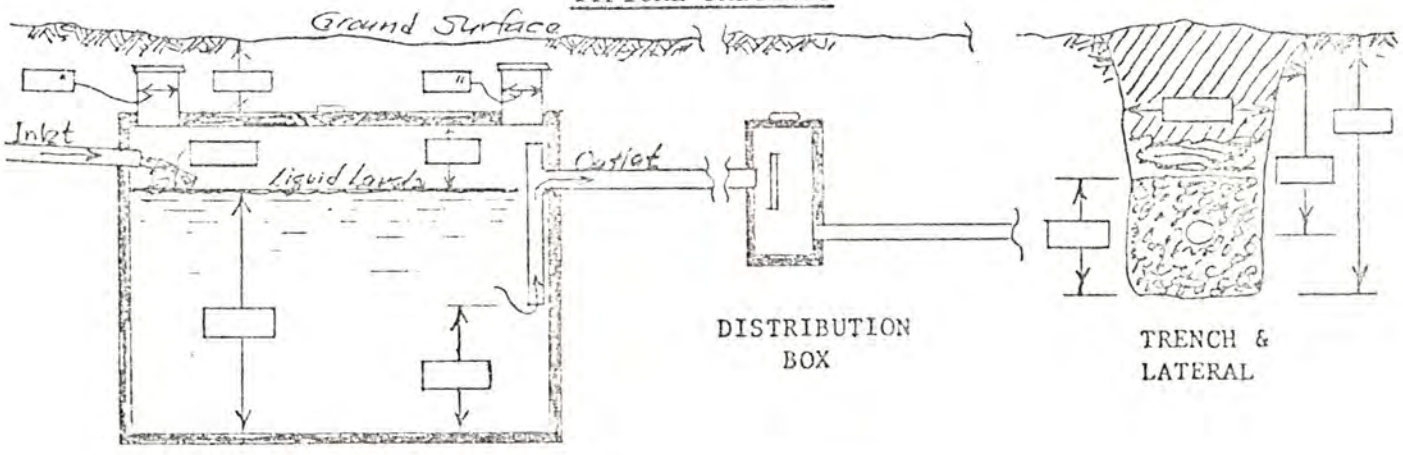
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity _____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.

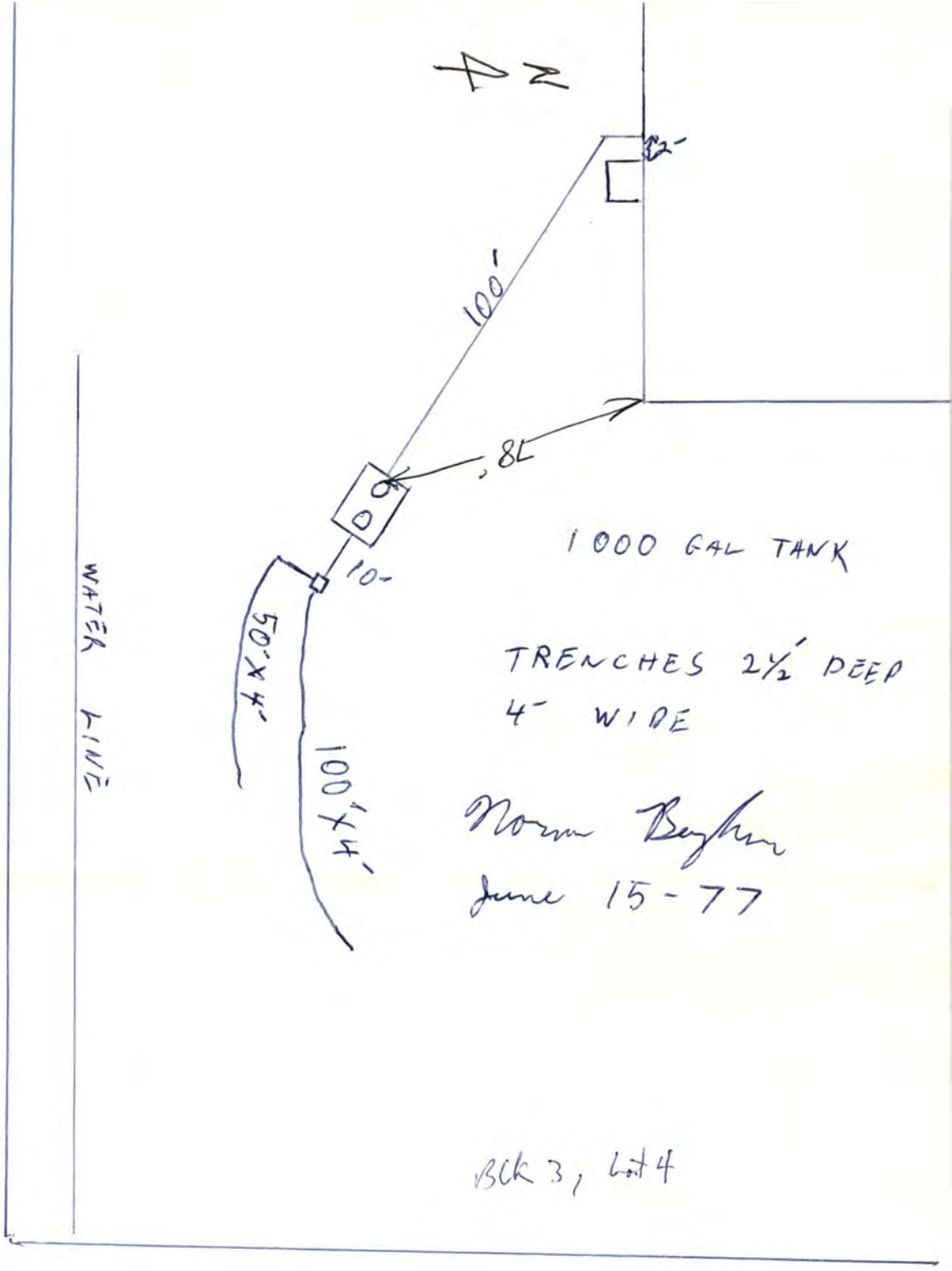
C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____ No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: HALF ROUND
2. Lateral Lines: Depth below grade ___in. Number ____; Length of each line ___ft Total length of Laterals ____ft.; Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth 30 in.; Width 48 in.
4. Filter Material: 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: _____minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant



9, 7, 33

John Vermaas

003

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: 1-23-92

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

Legal Description of Property: TWP. 9N ; RANGE 7E ; SECTION 33 ; BLOCK 3

LOT 1 ; ADDITION SOUTHDALE ACRES ; Street Address _____

Directions to Property Southdale Acres Lincoln Lancaster County, Nebraska

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System SOUTHEAST OF HOUSE Year Installed 1977

	NAME	ADDRESS	PHONE
Present Owner:	David + Mari Stueck	5900 Saltillo Rd	483-0995
Tenant/Buyer:			
Return to:	BARB HILL, FIRST COMMERCE MORTGAGE	7501 "O" ST., SUITE 100 LINCOLN, NEBR.	483-0000

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

Signature of Applicant Mari A. Stueck Address 5900 Saltillo Rd

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HEALTH DEPARTMENT USE ONLY

Date Received JANUARY 23, 1992 Received $150.00 Check ☒ Cash ☐

RURAL WATER DISTRICT PRELIMINARY STATUS--DATE 1/23/92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 1/23/92 by J.C.H.
Bacteria	☐	☐	Provisional:	☐	Date _____ by ____
Nitrate	☐	☐	Disapproved:	☐	Date _____ by ____

Comments: OWNER INDICATES SEPTIC TANK HAS NOT BEEN PUMPED FOR AT LEAST 6 YEARS IT SHOULD BE CHECKED AS IT IS PROBABLY IN NEED OF PUMPING. PLACES SUNKEN OVER LATERAL SHOULD BE FILLED IN WITH DIRT. See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT

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

APPROVED BY Jerrold C. Hood R.E.H.S. DATE JANUARY 23, 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