FILE # 2041

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

MARCH 19, 1984 — THIS LICENSE OR PERMIT EXPIRES

JEFF GADE — LICENSEE OR PERMITTEE

5430 OTOE — ADDRESS

LINCOLN, NE 68506

T9N; R7E; Sec. 33; Bk 3; Lot 3; Deerhaven Acres — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	018754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. — Date and Amount

/43

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. 2041

DATE: 19 SEP 83

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. T9N ; Range R7E ; Section 33 ; Block 3 : Lot 3 : Addition ~~LOT 3, BLOCK 3,~~ DEERHAVEN ACRES
   Street Address _____

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

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

4. Distance to public sewer: _____ ft.

Jeff Gade
Signature of Applicant (Owner or Lessee)

5430 OTOE, Lincoln
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/19/83 . Date Frwd. 9/19/83 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 9/19/83 . Date Frwd. 9/19/83 . ACTION: Approved ☑ Disapproved ☐ Signature: Walt Stuht

3. City or County Engineer: Date Rec'd. 9-19-83 . Date Frwd. 9-19-83 . ACTION: Approved ☒ Disapproved ☐ Signature: Glenn Brooks

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 4/9/84 By: John Nelson

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. 2041

PROPERTY WHERE SOIL TESTED: LOT 3, BLOCK 3, DEERHAVEN ACRES

Location: Township_____; Range_____; Section & ¼ Section_____.
Property Dimensions: 530 E. ft. x 308 E. ft. Area: 3.13 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: 8-30-83 to 8-31-83. Weather: Precip. 0 Temp. 85°.

OWNER:_____

Address: S.56 & Deerhaven

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	36"	8-30	4:00 pm	8-31	4:00 pm	8-31	4:00 pm	6"	8:00 pm	5½"	30m	½"	
2	"	"	"	"	"	"	"	"	"	4½"	"	1½"	
3	"	"	"	"	"	"	"	"	"	5"	"	1"	
4	"	"	"	"	"	"	"	"	"	5½"	"	½"	
5	"	"	"	"	"	"	"	"	"	4½"	"	1½"	
6	"	"	"	"	"	"	"	"	"	5¼"	"	¾"	

William Hoagland
Signature of Person Conducting Test

Address 2701 N 27th Lot 22 Phone_____

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

(Do not write below this line)

REVIEWING ACTION

Remarks:_____

Soil Type (SCS): Wymore Silty Clay Loam & close to Pawnee Clay Loam

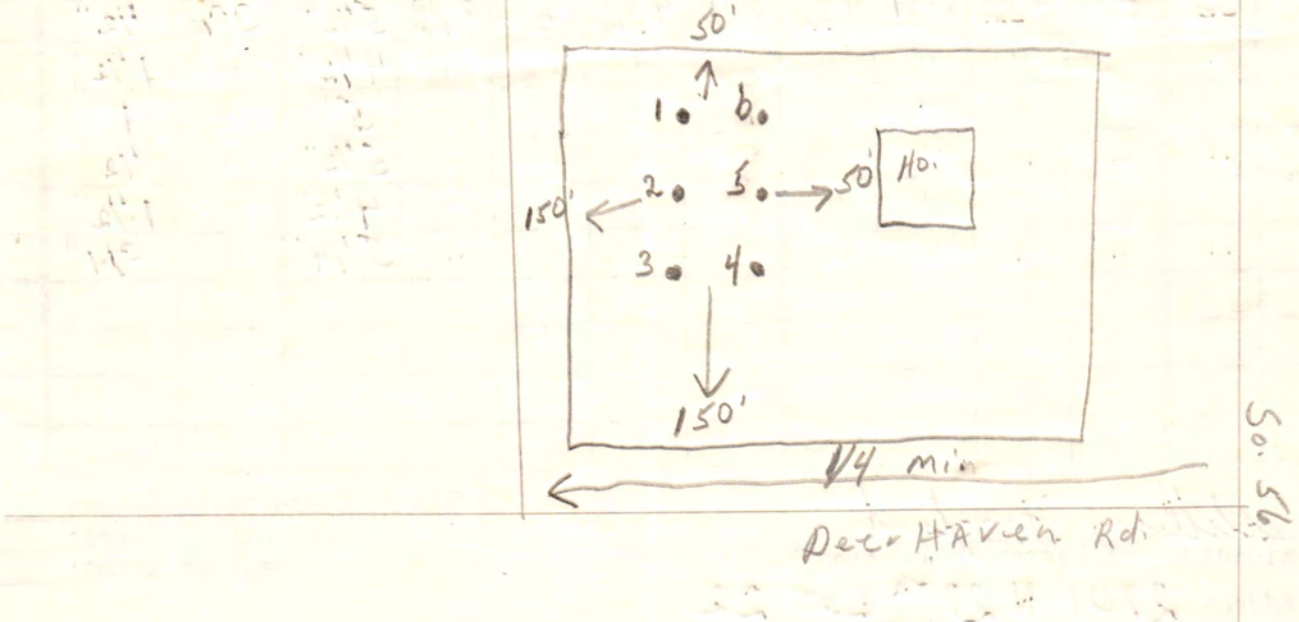
Date: September 19, 1983

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

Jerrold C. Hood
Signature of Reviewing Official

LOT 3, BLK 3, DEERHAVEN ACRE
LOCATED UPON A PART OF
N½ SW¼ SEC 33, T9N, R7E, OF 6PM LANCASTER CO.

N



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. 2041

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

REVIEWING ACTION

Remarks: _____

Date: September 19, 1983

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 516 sq.ft.

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: 474-1541

C

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

FILE NO. 1973

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

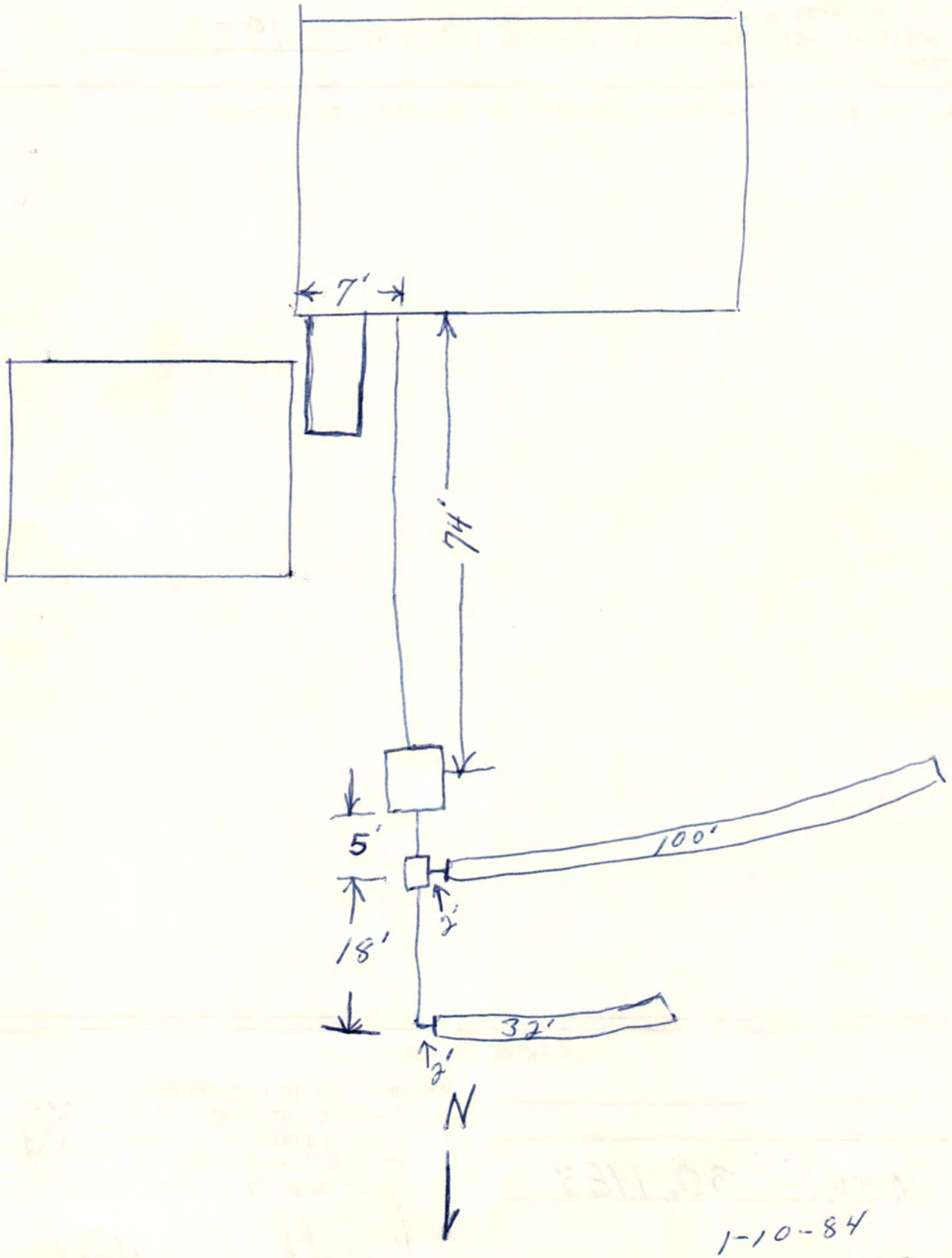
REVIEWING ACTION

Remarks: _____

Date: November 30, 1983

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 129 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 516 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official



1-10-84

Capital City Trenching

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: _____

FILE NO. _____

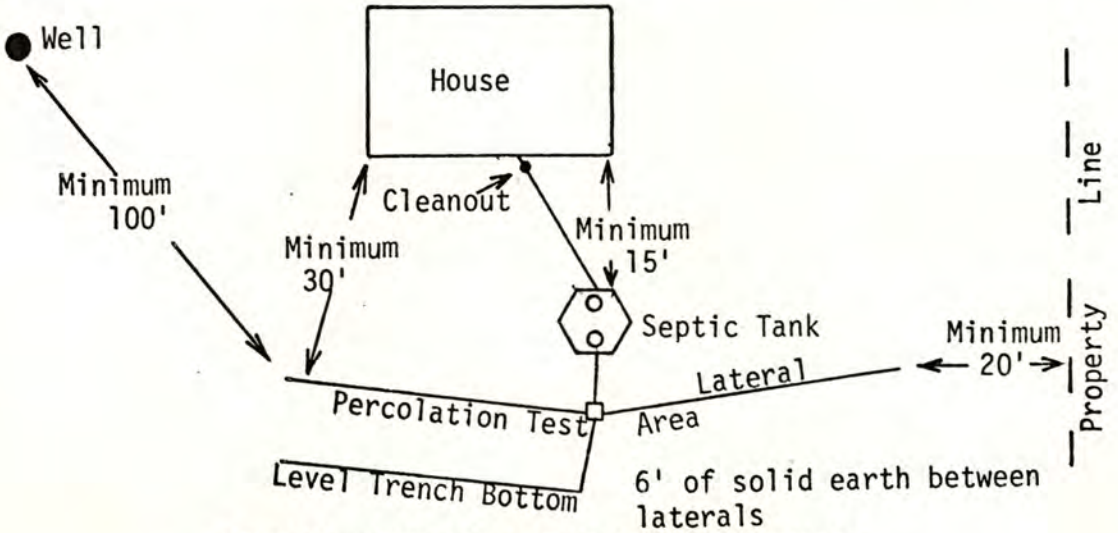
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 4 Pvc ; Diameter 4 in.
2. Distance above basement floor 40 in., or below basement floor ____ in.
3. Distance between dwelling and septic tank 77 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 _____.
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 12 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 4 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 2 ; Length of each line 100, 32, ____, ____, ____ ft.;
Total length of laterals 132 ft.;
Distance between lateral lines ____ ft.
3. Trench dimensions: Width 4 ft.; Slope 0 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.

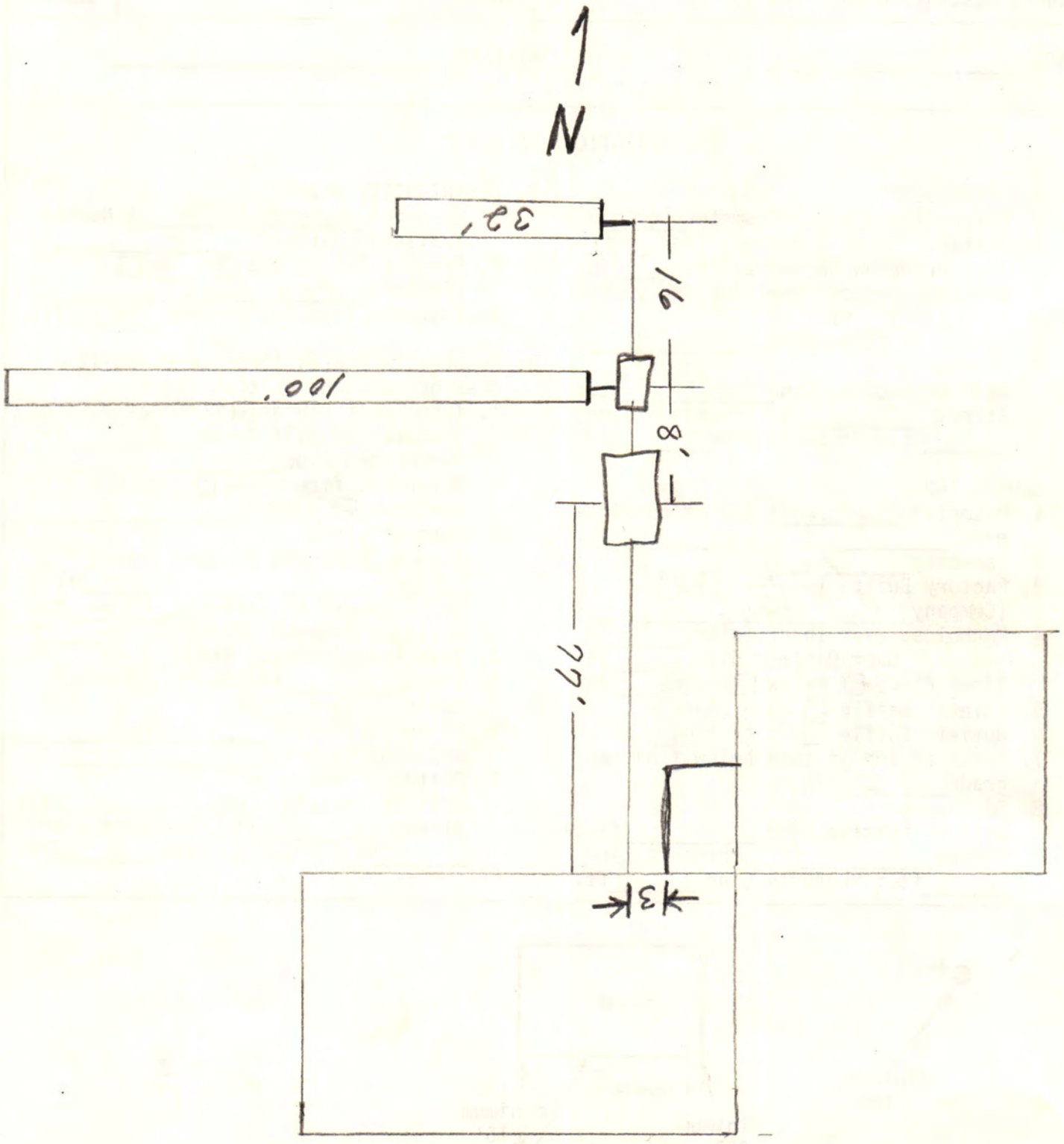


TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Deer Haven

AS BUILT DRAWING OF SYSTEM

DATE_____ INSTALLER_____



Capital City Trenching

004

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: _____

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

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

LOT 3 ; ADDITION DEERHAVEN ACRES ; Street Address 10801 S. 60 — L

Directions to Property 3.6 SO. OF OLD CHENEY ON 56TH — E. ON DEERHAVEN TO 60TH — GREY CEDAR 2 STORY ON THE RT.

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System N. SIDE OF HOUSE. Year Installed 86 1984

	NAME	ADDRESS	PHONE
Present Owner:	JEFF GADE II	10801 S. 60	423 0910
Tenant/Buyer:			
Return to:			

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

Signature of Applicant [signature] Address 10801 S. 60.

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HEALTH DEPARTMENT USE ONLY

Date Received 08/21/92 LO Received $150.00 Check ☑ # 412401 Cash ☐

PRELIMINARY STATUS--DATE 8/26/92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 8/26/92 by T.C.H.
Bacteria	☐	☐	Provisional:	☐	Date _____ by ___
Nitrate	☐	☐	Disapproved:	☐	Date _____ by ___

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

See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT?

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

APPROVED BY Gerald C. Hood R.E.H.S. DATE AUGUST 26, 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