LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2265-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

APRIL 8, 1986 — THIS PERMIT EXPIRES

JERRY EISLER R.F.D. — ISSUED TO

GREENWOOD, NE 68366 — ADDRESS

T12N; R8E; Sec 15 NE¼; ½ Mile west of N 162 St. & Agnew Rd.
LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION ½

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

R. J. NUERNBERGER Lancaster County Treasurer
VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

Health
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

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. 2265-C

DATE: 10-7-85

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. 12N; Range 8E; Section 15 NE¼;
   Block _____: Lot _____: Addition _____
   Street Address ¼ mile West of N 162nd & Agnew road

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: Miles ft.

Jerry Eisler
Signature of Applicant (Owner or Lessee)

R.F.D. Greenwood
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/7/85. Date Frwd. 10/7/85. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 10/8/85. Date Frwd. 10/8/85. ACTION: Approved ☒ Disapproved ☐ Signature: Gary N. Steward

3. City or County Engineer: Date Rec'd. 10/8/85. Date Frwd. 10/8/85. ACTION: Approved ☒ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL OK for farm - 20 Ac + Garage

Site Visits:
Date: 10/24/85 by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11/12/85 By: Jerrold C. Hood

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

(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-~~1511~~ 7800

B

FILE NO. 2265-C

PROPERTY WHERE SOIL TESTED: 1/4 mile west of Corner N162 St & A Grew road

Location: Township Mill; Range 8E 12E; Section & ¼ Section 15 NE ¼.
Property Dimensions: _____ ft. x _____ ft. Area: 1/2.0 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☒; Silty Clay Loam ☐; Sandy Loam ☐; Silt Loam ☐; Clay Loam ☐.
Dates of Tests: 6-10-85 to 6-11-85. Weather: Precip. .30 Temp. 70.

OWNER: Jerry Eisler

Address: RFD Greenwood

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	30"	6/10	6:00 PM	6/11	8:00 AM	6/11	8:25	12	9:00	13 3/4	35	1 3/4	20/1"
2	30"	"	"	"	"	"	8:28	12	9:00	14 1/2	33	2 1/2	13.2/1"
3	30"	"	"	"	"	"	8:28	12	9:02	14	34	2	17/1"
4	30"	"	"	"	"	"	8:29	12	9:03	14	34	2	17/1"
5	30"	"	"	"	"	"	8:32	12	9:04	13 1/4	32	1 1/4	25.6/1"

Sum of Percolation Rates: 168"/9 1/2"
Average of Rates: 33.6/1.9"
Mean of Rates: _____

Wayne Williamson Todd Valley P&H
Signature of Person Conducting Test

Address 1334 Silver St. Ashland NE Phone 944-7016

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: OCTOBER 8, 1985

Approved Percolation Rate (a)
A. 15 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.

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

REVIEWING ACTION

Remarks: _____

Date: OCTOBER 8, 1985

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 570 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

FORM CONTROL NUMBER 08138

LANCASTER COUNTY
CASH RECEIPT

PAGE OF

TRANSACTION CODE	C R	CASH RECEIPT NUMBER	DATE OF DEPOSIT	ACCOUNTING PERIOD	BUDGET FY
		19298	M M D D Y Y: 10 08 85	M M Y Y	YY

ACTION: ☐ ORIGINAL ENTRY (E) ☐ ADJUSTMENT (M)

BANK ACCOUNT

OFFSET CASH ACCOUNT

COMMENTS: INDIVIDUAL SEWAGE DISPOSAL PERMIT

REFERENCE INVOICE NUMBER	REFERENCE INVOICE LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	REVENUE SOURCE	SUB REV SRCE	JOB NUMBER	REPT. CATEG	BAL SHEET ACCT.	OBJECT	PROVIDER VENDOR CODE	DESCRIPTION	AMOUNT	INC./DEC IND	P/F IND
		011	999				2559							2265-C	60.00		

TOTAL 60.00

PREPARED BY:
NAME _____ TITLE _____

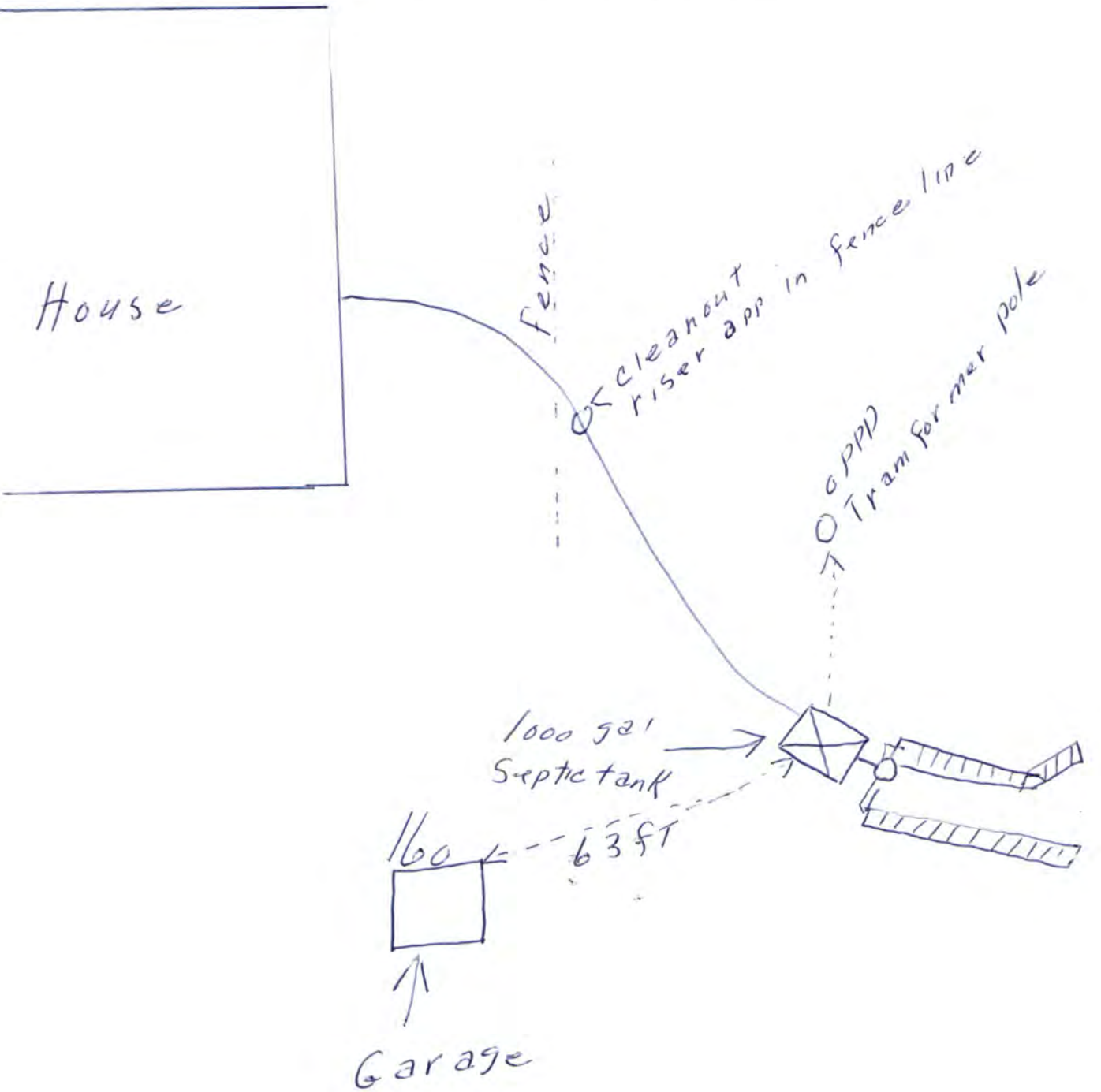
APPROVED BY:
NAME _____ TITLE _____

APPROVED BY:
NAME _____ TITLE _____ DATE 10-8-85

ORIGINAL

Todd Valley Plumbing & Heating, Inc.

WAYNE WILLIAMS, President
1334 Silver St., Ashland, Nebr. 68003
Phone (402) 944-7016



Marion Eisler
RFD Greenwood