LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2854-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

6 MONTHS — THIS PERMIT EXPIRES

ROY M. OTTE — ISSUED TO

ROUTE 1 WALTON, NE 68461 — ADDRESS

T9N; R8E; Sec. 4; Lot 21 I.T. — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION

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. ———

20109-0977

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

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

FILE NO. 2854-C

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

DATE: 6-15-89

The undersigned hereby applies for a permit to ALTER ☒, EXTEND ☐, or REPAIR ☒ an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 9N ; Range 8E ; Section 4 ;
Block ____ ; Lot 2 I.T. ; Addition ____
Street Address ____

2. Property Use: Residential X ☒; Commercial ____ ☐
No. Bedrooms 3
Describe ____
Other Use ☐
Describe ____

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

4. Description of proposed alteration, extension or repair: install SEPTIC SYSTEM IN PLACE OF LAGOON.

5. Work to be done by: Owner ☐ ; or Contractor ☒, Larry Schwarck
Contractor's Name

6. Estimated cost of project:

a. Materials	$	1500
b. Labor	$	1500
c. Other	$	
TOTAL	$	3000

Roy M. Otte
Signature of Applicant (owner or lessee)

RT. #1, WALTON, NEBRASKA 68461
Address

(Do not write below this line)

REVIEWING ACTION

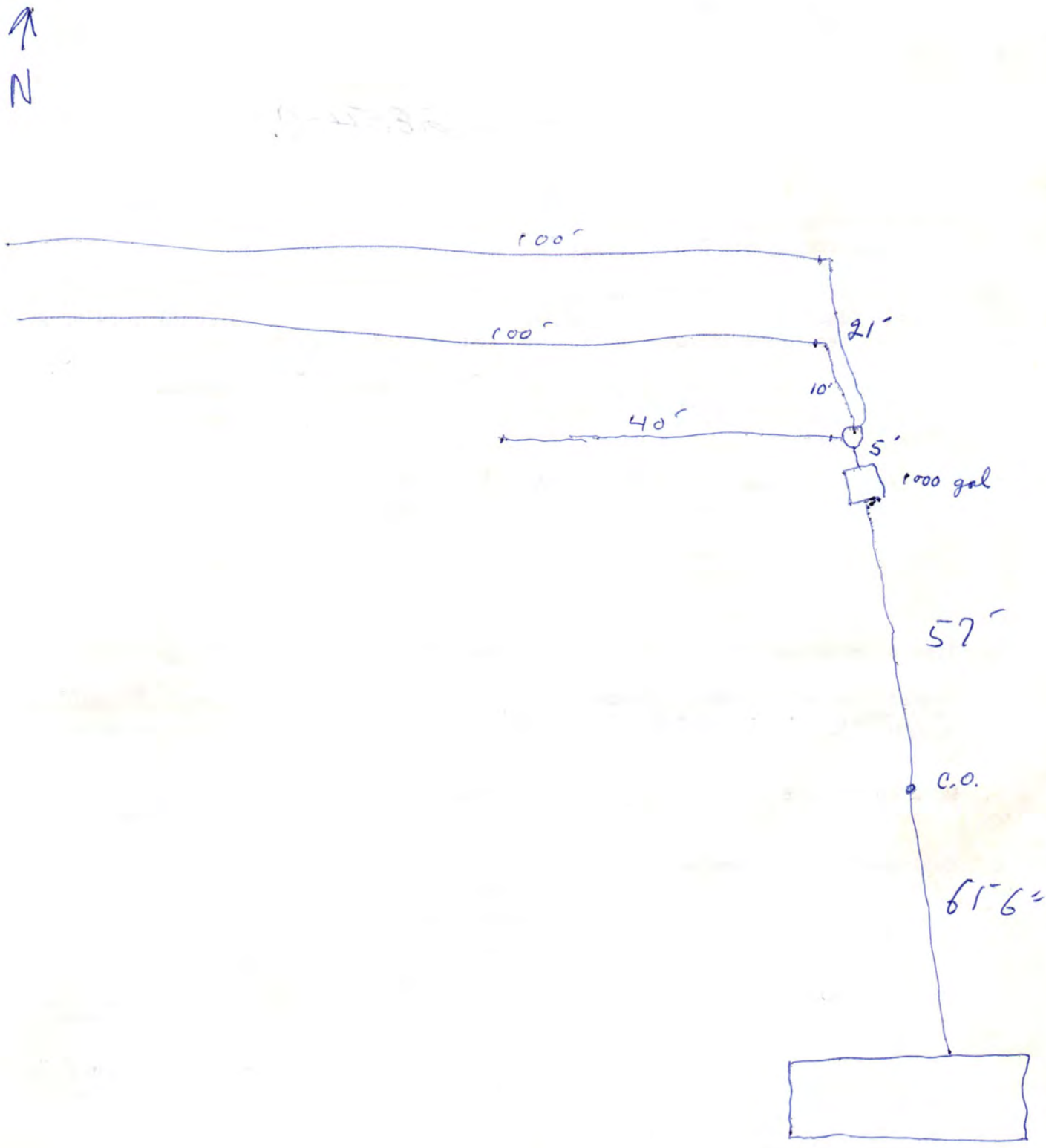
1. Date Rec'd: ____
Filing Fee: $ 30.00

2. Site Visits:
Date: 6/16/89 by: J.C. Hood
Date: ____ by: ____
Date: ____ by: ____

3. Date: Approved ☒; Disapproved ☐
by: Jerold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6/20/89 by: J.C. Hood

Larry Schwarck



RURAL WATER DISTRICT

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 718-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

April 28, 1976 — THIS PERMIT EXPIRES

Thomas McGinn — ISSUED TO

1125 Highland — ADDRESS

T9N; R8E; Sec. 4; — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
524-1535	110.16	148.14	6-2
RECEIPTED BY	DATE	AMOUNT	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

ISSUING OFFICER

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. 718-C

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

DATE: _____

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 8E ; Section 4 (4.76 ac in SE 4)
   Block _____; Lot _____; Addition See attached Subd. Permit # Parcel 2
   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.

Thomas McGinn
Signature of Applicant (Owner or Lessee)

1125 Highland (68521)
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/28/75 . Date Frwd. 10/28/75 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Rood

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

3. City or County Engineer: Date Rec'd. 10/29/75 . Date Frwd. 10/29/75 . ACTION: Approved ☐ Disapproved ☒ Signature: Henry Graf Recd 10/29/75 mcb

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. 718-C

DATE: _____

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 8E ; Section 4 ; Block ; Lot ; Addition .
   Street Address .

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

Thomas P. Gerin
Signature of Applicant (owner or lessee)

Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
   Date: by:
   Date: 3-31-76 by: mm
   Date: 5-21-76 by: mm

3. Date: Approved ☒; Disapproved ☐ 10/28/75
   by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 5-21-76 by: Ron Mangum N

Parcel 2: A tract of land in the southeast quarter (SE¼) of Sec. 4, T9N, R8E, of the 6th P.M., Lancaster County, Nebraska more particularly described as follows:

Referring to the south quarter (S¼) corner of said Sec. 4, thence easterly along the true section line a distance of 656.0 feet to the point of beginning; thence easterly along the true section line a distance of 320.0 feet; thence 94°52' left a distance of 539.29 feet; thence 42°31' left a distance of 113.3 feet; thence 47°23' right a distance of 200.0 feet; thence 90°9' left a distance of 192.0 feet; thence 89°56' left a distance of 817.94 feet to the point of beginning, except the south 40 feet thereof.

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 475-6221)

FILE NO. 718-C

PROPERTY WHERE SOIL TESTED: SE ¼ of Section 4, T. 9 N., R 8 E,

Owner: Thomas McGinn

Location: Township _____; Range _____
Section & ¼ Sect. _____

Address 1125 Highland

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 ☐

Dates of Tests: _____ to _____. Weather: Precip. ____ Temp. ____ F.

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				
Hole 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	36"	4-20	9:30	4-21	9:35	4-21	10:30	6	11:00	5	30	1	
2	36	"	9:35	"	9:40	"	10:35	6	11:05	4¾	30	1¼	
3	36	"	9:40	"	9:45	"	10:40	6	11:10	5	30	1	
4	36	"	9:45	"	9:50	"	10:45	6	11:15	5¼	30	1¾	
5	36	"	9:50	"	9:55	"	10:50	6	11:20	4¾	30	1¼	
6	36	"	9:55	"	9:60	"	10:55	6	11:25	4¾	30	1¼	

Thomas McGinn
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: _____

Approved Percolation Rate(s)
A. 27 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: April 25, 1975

Jerrold C. Hood
Signature of Reviewing Official

OFFICIAL SURVEY RECORD
LANCASTER COUNTY, NEBRASKA

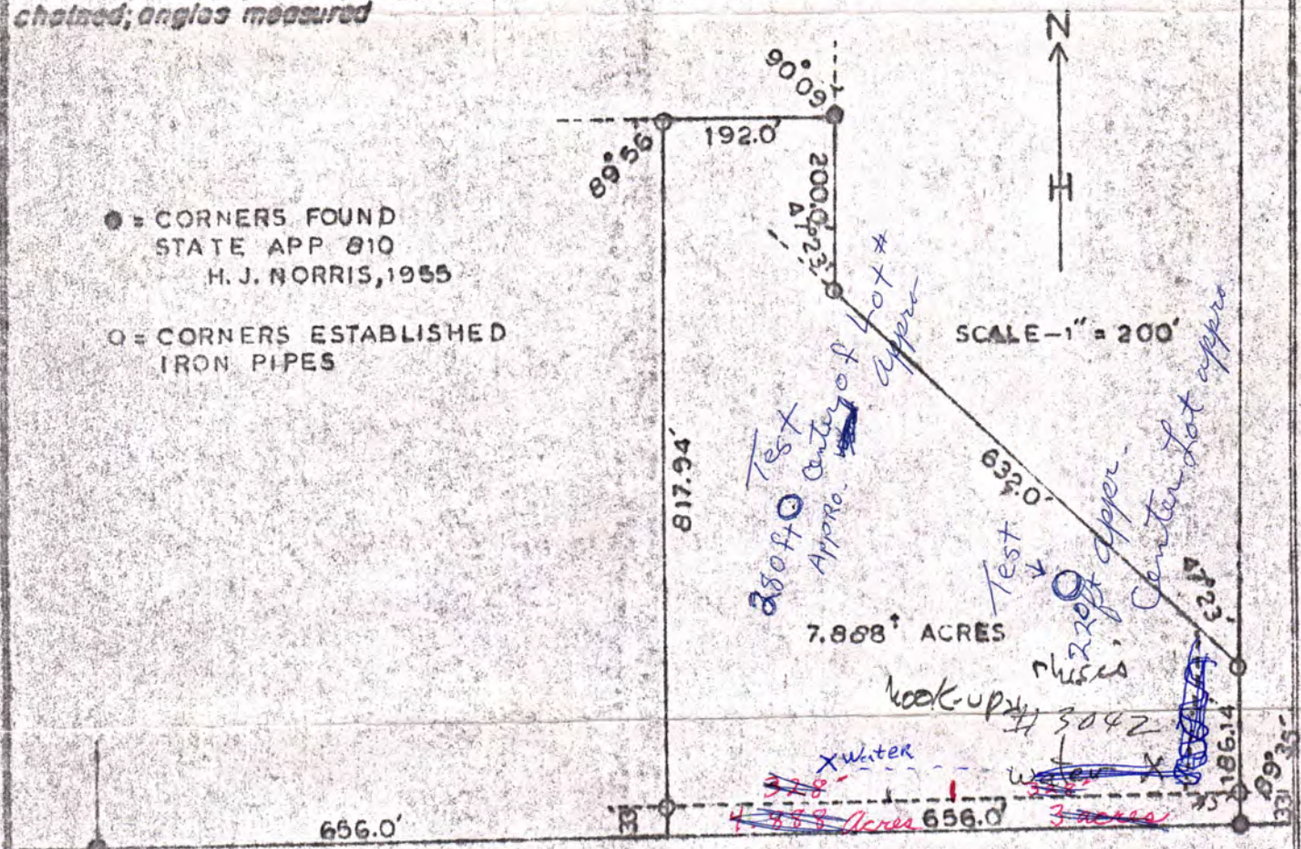
Survey of PART OF SE 1/4 Section 4, T 9 N, R 8 E, of 6th P.M.

County Survey No. _____

Surveyor's Proj No. _____

Date AUGUST 9 19 71 Weather _____

Field Notes: Origin of Survey, descriptions of corners found and restored; distances chained; angles measured



A tract of land in the SE¼ Section 4, T. 9 N., R. 8 E. of the 6th P.M. in Lancaster County, Nebraska more particularly described as follows:

Referring to the S¼ corner of said Section 4, thence easterly along the true section line a distance of 656.0 feet the point of beginning; thence continuing on the same true line a distance of 656.0 feet; thence 89°35' left a distance of 186.14 feet; thence 47°23' left a distance of 632.0 feet; thence 47°23' right a distance of 200.0 feet; thence 90°09' left a distance of 192.0 feet; thence 89°56' left and parallel to the west line of said SE¼ a distance of 817.94 feet to the point of beginning containing 7.888 acres more or less including a strip of land 33.0 feet wide along the south side for road right of way.

I hereby certify that I have surveyed and staked out the above tract of land.

NEBRASKA REGISTERED LAND SURVEYOR

Signed this 9th day of August 19 71

Name _____

Surveyor's license No. L.S. 100

Land Surveyor's Seal

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. 718-C

SPECIFICATIONS

DATE: _____

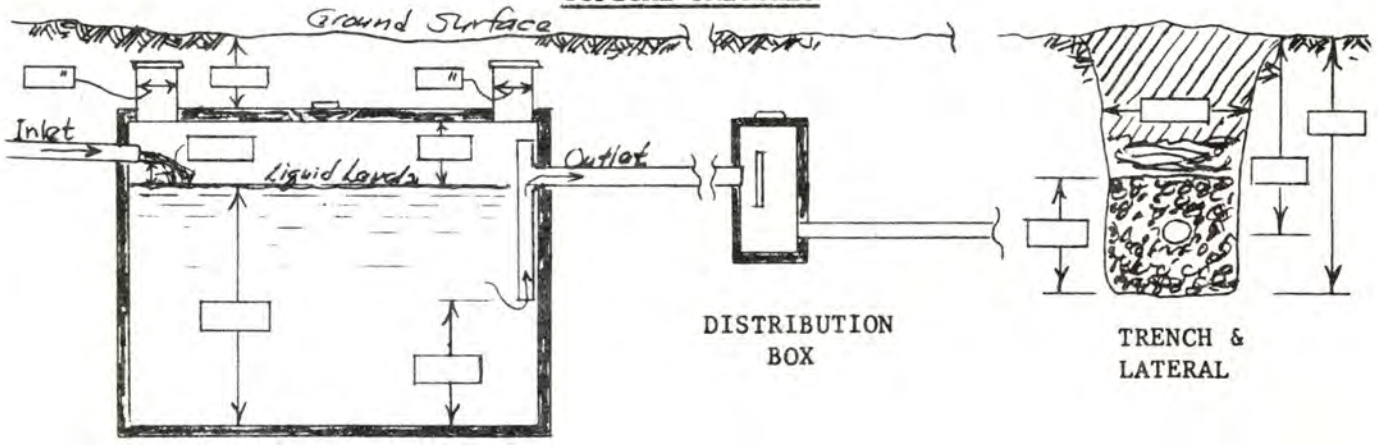
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☒ (Company pre Cast)
No ☐
4. Manholes: Over Inlet; diam. 24 in.
Over Outlet; diam. ___in.
Below Grade 6 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 24 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)
No ☐
3. Dimension: Length ____in.; Width ___in.
Depth ____in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Perforated plastic
2. Lateral Lines: Depth below grade 24 in.
Number ____; Length of each line ___ft
Total length of Laterals 238 ft.;
Slope ____in/100 ft. Diameter of pipe 4 in.; Shape Round
Material: concrete ☐; fiber asbestos ☐; clay ☐; other plastic
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 36 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

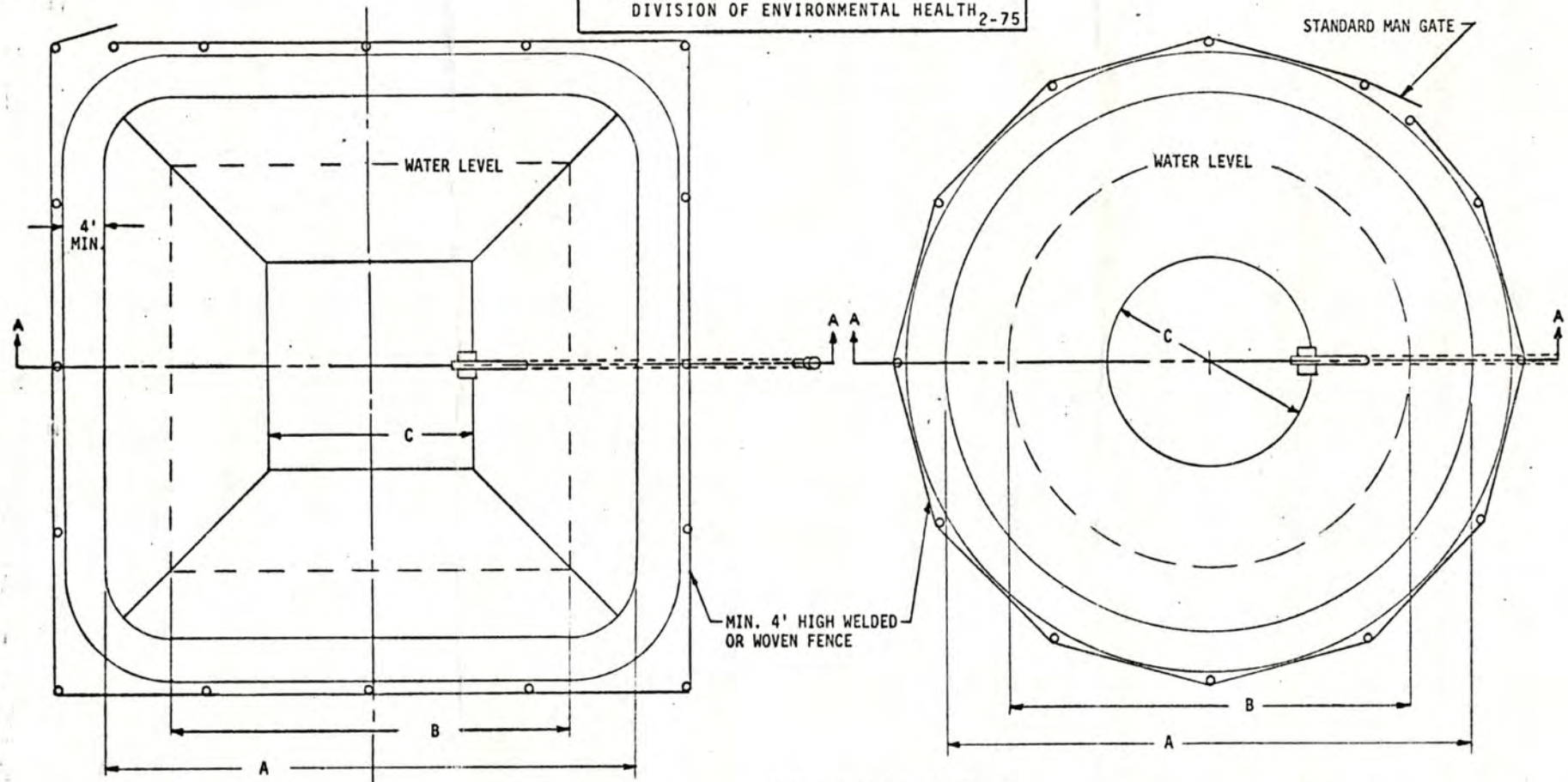
TYPICAL SKETCHES

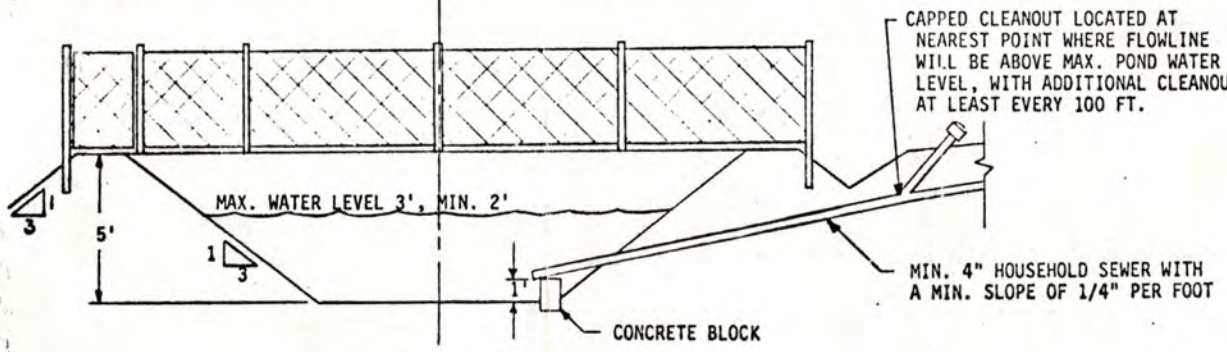


Thomas McGee
Signature of Applicant

WASTE STABILIZATION POND

LINCOLN-LANCASTER CO. HEALTH DEPT.
DIVISION OF ENVIRONMENTAL HEALTH 2-75





SECTION VIEW A-A
(APPLICABLE TO BOTH DESIGNS)

NUMBER OF BEDROOMS IN THE HOUSE	MINIMUM LAGOON DIMENSIONS (FEET)					
	SQUARE			ROUND		
	A	B	C	A	B	C
2-3	49	37	19	52	40	22
4	55	43	25	57	48	30

ADDITIONAL INFORMATION ON BACK

SIGNATURE OF APPLICANT Thomas McGann

HD-46(75)

004

Lincoln-Lancaster County Health Department

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

REAL ESTATE TRANSFER/LOAN

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

This form must be completed and returned to reque

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

Legal Description of Property: Street Address 11300 Pioneers Blvd (Walton
Twp 9N Range 8E Section 4 1/4 SE 1/4 ___ Block ___ Lot ___ Addition ___
Directions to Property 4± mi. to East of 84th St on Pioneers Blvd, North Side of Street, 2 story Gambrel, Brick with Yellow Clapboards
Location of Well Rural Water Front Yard 35' E. Tap Location: Inside ☑ Outside ☐
Location of Sewage System Septic + Lateral Back North of House Year Installed Circa 1959 by Roy Otte

	NAME	ADDRESS	PHONE
Present Owner:	Ed. Maureen Wilhendung	11300 Pioneers Blvd Walton NE 68461	488-3625
Tenant/Buyer:			
Return to:	1st Tier 56th & O Envelope Provided		

Signature of Applicant Edward Uberenz Address 11300 Pioneers Blvd Walton NE 68461 Date 12/11/93 488-3625

HEALTH DEPARTMENT USE ONLY

Date Received 12/13/93 Received $150.00 Check ☑ Cash ☐

PRELIMINARY STATUS--By Lerrald C. Hood **DATE:** 12/14/93

RURAL WATER DISTRICT

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 IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. NOTE: SNOW COVER ON GROUND AT TIME OF INSPECTION. See Attached Letter ☐

FINAL STATUS

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

Approved by Lerrald C. Hood R.E.H.S. Date 12/14/93

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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