LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 758-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

August 11, 1976 — THIS PERMIT EXPIRES

Action Plumbing — ISSUED TO

5608 South 80 — ADDRESS

T9N; R8E; Sec. 16-SE¼; Lot N½ of 7 I. T.-LAGOON — 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

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

ISSUING OFFICER

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

Blo. 36
656.04

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. 758-C

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

DATE: Feb 11, 1976

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

N 1/2 of NE¼NE¼ of SE¼ except East 40 ft thereof approx 5 ac -

1. Legal description of property: Twp. 9 N ; Range 8 E ; Section SE 14 Sec 16
Block ____; Lot ~~N½ NE¼~~; Addition ____
Street Address ~~Lot~~ So. 148 Subd Permit # 200

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

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

4. Distance to public sewer: ____ ft.

Action Plumbing & Supply James J Krupa
Signature of Applicant (Owner or Lessee)

5608 So. 50
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 2/11/76 . ACTION: Approved ☒ Disapproved ☐
Date Frwd. 2/11/76 . Signature: Jerrold C. Hood

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

3. City or County Engineer: Date Rec'd. 2/11/76 . ACTION: Approved ☐ Disapproved ☒
Date Frwd. 2/11/76 . Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL ____

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

Rec'd 2/11/76 mcb

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. 758-C

DATE: Feb 11, 1976

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 8 E ; Section SE ¼ Sec 16 ; Block ; Lot Pt. Lot 7 I.T. ; Addition .
Street Address 6401 So. 148 .

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

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

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).

Action Plumbing Inc James J Krejci
Signature of Applicant (owner or lessee)

5648 So 50 Lincoln
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 8-6-76 by: JW
Date: by:
Date: by:

3. Date: Approved ☒ ; Disapproved ☐ 2/11/76
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-6-76 by: Jim Wewerka by Ray Sargent

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. 758-C

PROPERTY WHERE SOIL TESTED:
Location: Township 9 N ; Range 8 E
Section 5 ¼ Sect. SE 1/4 SE 1/4
Property Dimensions: 330 ft. x 622 ft.
Area: _____ acres. (Attach sketch of property showing hole location).

Owner: Dean Fischer
Address _____

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

Dates of Tests: 2-9-76 to 2-10-76. Weather: Precip. T Temp. 48°

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	2/9	2:30	2/10	1:30	2/9	1:30	25	5:30	27	30	¼	
								Drop	2"				
2	36	2/9	2:30	2/10	1:30	2/9	1:30	26¼	5:30	29	30	½	
								Drop	2¾"				

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

James J Kuifels
Signature of Person Conducting Test

Address 5608 So 50
Phone: 423-4964

(Do not write below this line)

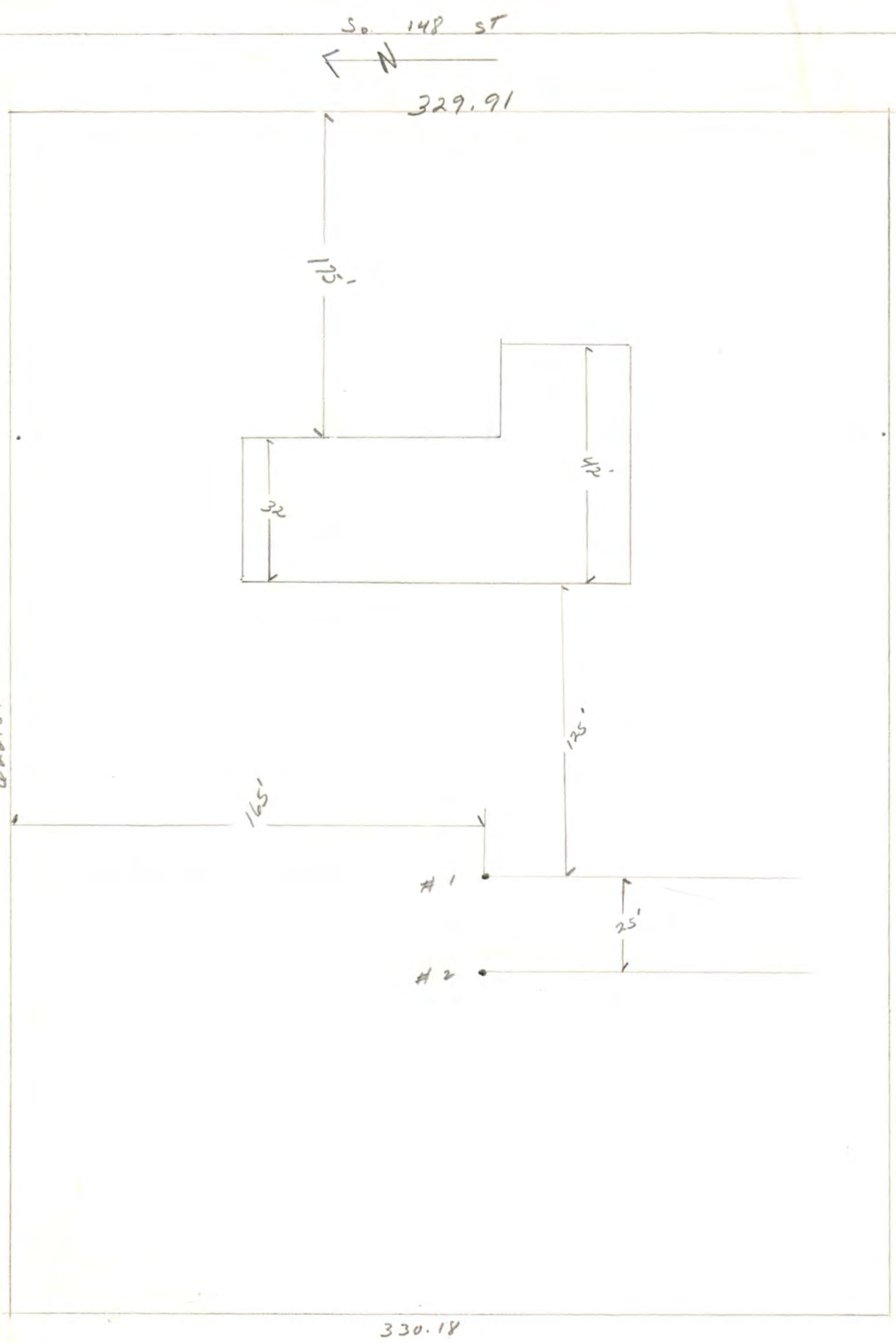
REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 80 min./inch
B. _____ min./inch
C. _____ min./inch

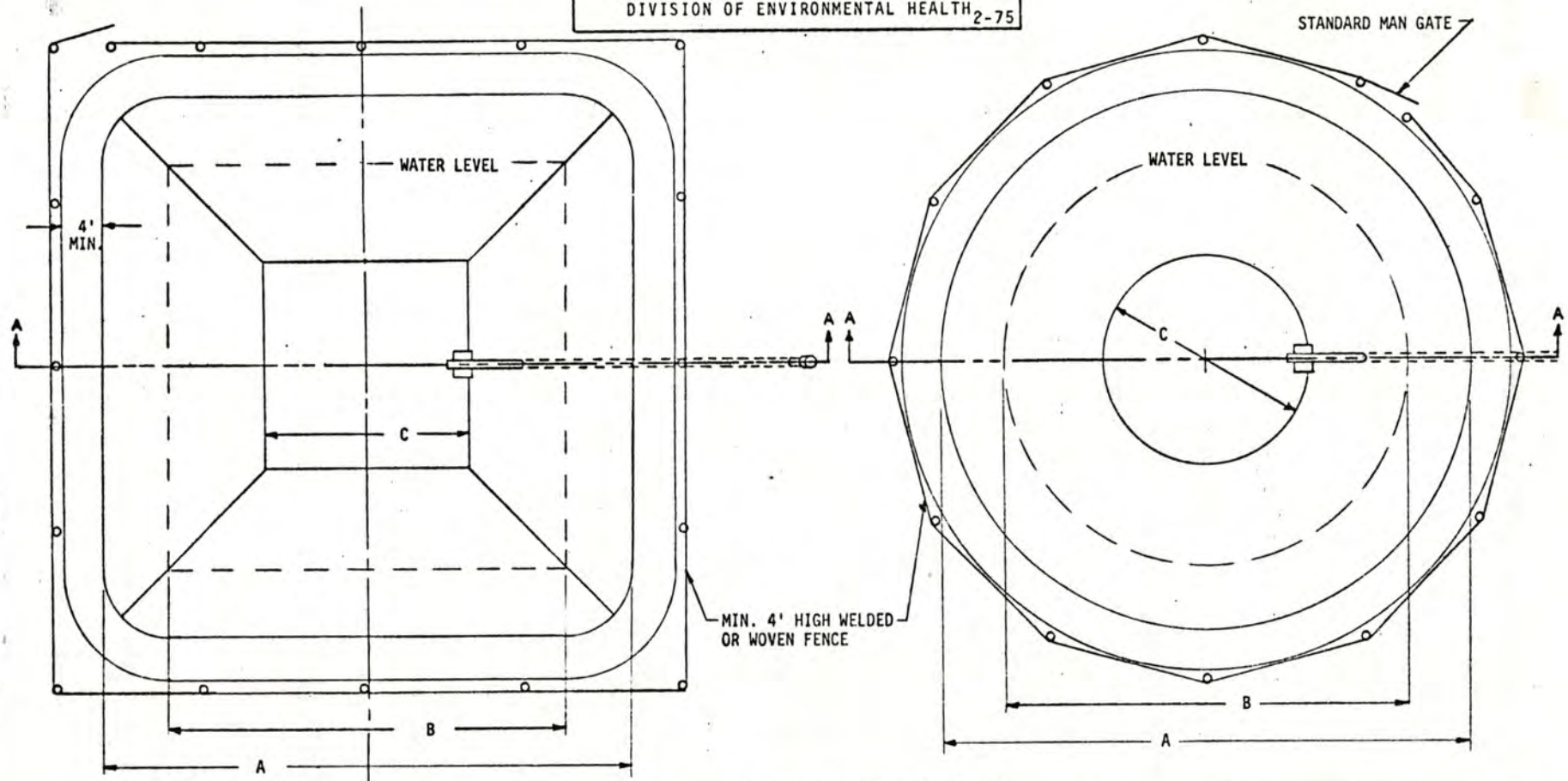
DATE: February 11, 1976

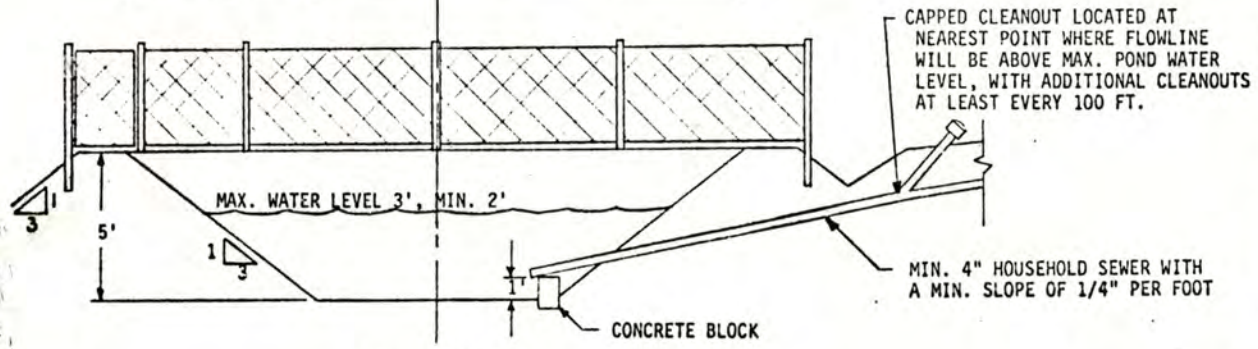
Jerrold C. Wood
Signature of Reviewing Official


So. 148 ST
N
329.91
75'
52'
32
622.81
165'
175'
#1
25'
#2
330.18

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 James J. Kreifels

HD-46(75)

Allen Plumbing Inc

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)

T9N, R8E, 16

FILE NO. _____

SPECIFICATIONS

DATE: _____

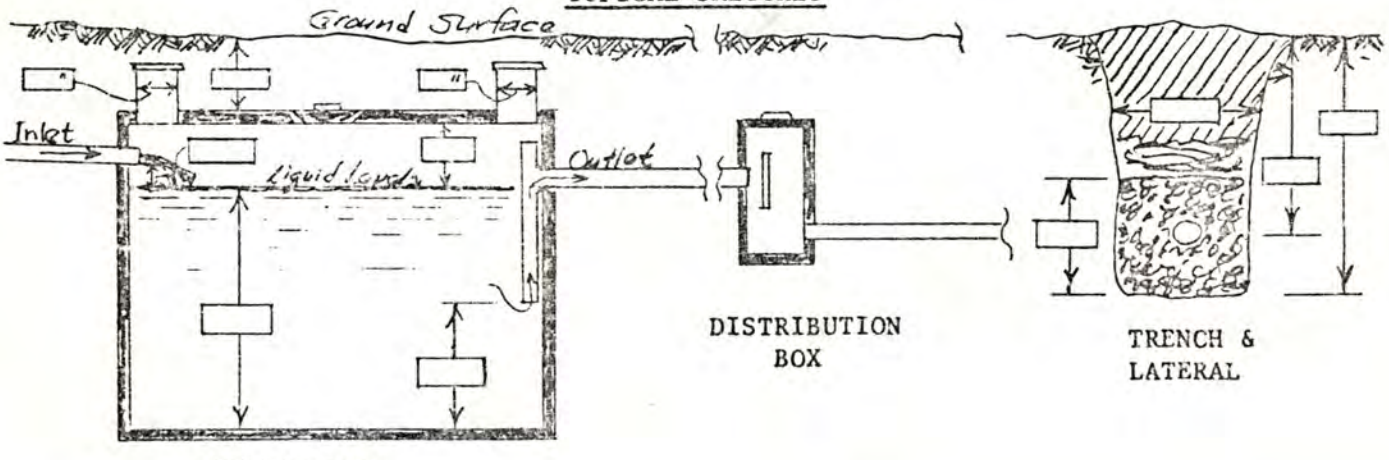
A. BUILDING SEWER:
1. Material PVC; Diameter 4 in.
2. Distance above basement floor ____in.; or below basement floor 18 in.
3. Distance between dwelling and ~~septic~~ lagoon tank 200 ft.
4. Number of clean-outs 2.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
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.)

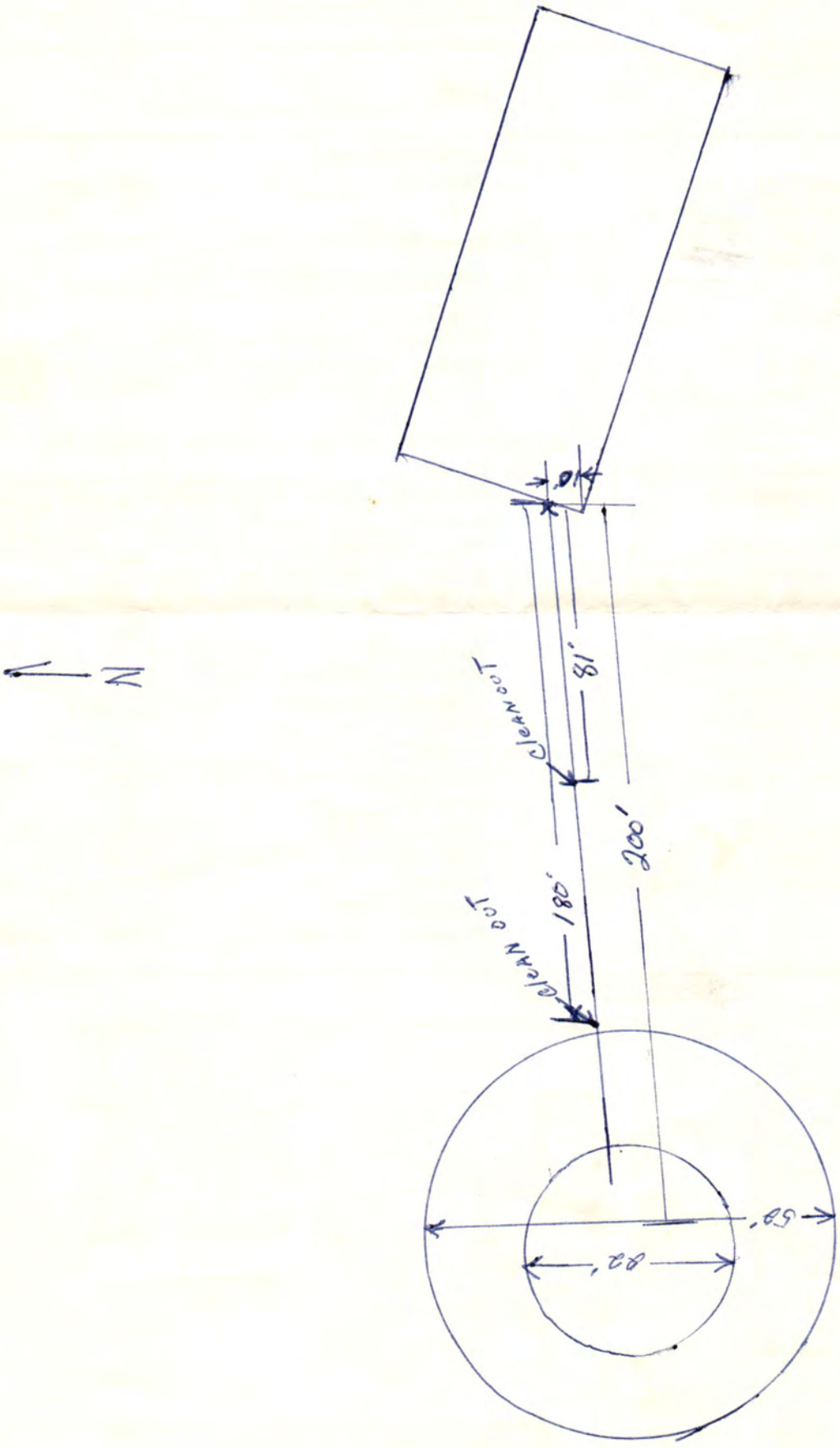
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___in. Number ____; Length of each line ___ft Total length of Laterals ____ft.; Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance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



SEPTIC TANK

_____
Signature of Applicant



8-6-76

Harold L Casemyer

001

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 $75.00

Legal Description of Property: TWP.____; RANGE ____; SECTION _____; BLOCK ____

LOT ____; ADDITION _____; Street Address _____

Directions to Property Ask owner

Location of Well Ask owner Tap Location: Inside ☐ Outside ☐

Location of Sewage System Lagoon Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	George + Bonnie Pollard	1401 S. 148th St Walton	H# 782-2644
Tenant/Buyer:	Same	Refinance	
Return to:	Visitor Bank	PO Box 5356 Lincoln NE 68505	465-7532

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

Signature of Applicant Bobby Mueller Address Visitor Bank

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HEALTH DEPARTMENT USE ONLY

Date Received OCTOBER 7, 1992 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE OCTOBER 14, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 10/14/92 by LCH
Bacteria	☐	☐	Provisional:	☐	Date _____ by ____
Nitrate	☐	☐	Disapproved:	☐	Date _____ by ____

Comments: _____

See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT

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

APPROVED BY _____ DATE OCTOBER 14, 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