LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1943-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

November 3, 1977 — THIS PERMIT EXPIRES

Allen R. Schroeder, 4321 Pioneers Blvd, Lincoln, NE 68516 — ISSUED TO / ADDRESS

T9N, R8E, Section 20, Lot 6 & 7 I.T. — 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

Health — ISSUING OFFICER

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

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. 1043-C

DATE: May 2-77

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. 9 N ; Range 8E ; Section 20 ; Block ; Lot 6 + 7 ; Addition .
Street Address RR # 2 .

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).

ALLEN R SCHROEDER
Signature of Applicant (owner or lessee)

4321 PIONEERS 68516
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 10/20/77 by: L.C.H.
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 5/3/77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 2/10/78 by: Jerrold C. Hood

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. 1043C

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

DATE: 4-13-77

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 8E ; Section 20
Block ____ ; Lot 6 & 7 ~~I.T.~~ ; Addition ____
Street Address RR #2

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.

Allen R Schroeder
Signature of Applicant (Owner or Lessee)

4321 Pioneers Blvd Lincoln Ne 68516
Address

No easement needed Bounded by State R.O.W.

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/3/77 . Date Frwd. 5/3/77 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 5-3-77 . Date Frwd. ____ . ACTION: Approved ☐ Disapproved ☒ Signature: Tom Baasch

3. City or County Engineer : Date Rec'd. 5/3/77 . Date Frwd. 5/3/77 . 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-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. 1043-C

PROPERTY WHERE SOIL TESTED:
Location: Township 7N : Range 8E
Section & ¼ Sect. 20
Property Dimensions: ____ ft. x ____ ft.
Area: 14 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: ALLEN SCHROEDER
Address: 4321 PIONEERS

Dates of Tests: Apr 28 -77 to Apr 29-77 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	25	4/28	8:00	4/29	8:00	4/29	10:35	17 5/8	11:05	18 1/4	30	5/8	
2								18 1/2		19 3/8		7/8	
3								17 3/4		18 1/4		1/2	
4								16 1/2		17		1/2	
5								17		17 1/2		1/2	
6								15 7/8		16 1/8		1/2	

Norman Bengtson
Signature of Person Conducting Test

Address 3300 N 53
Phone 466 5210

Sum of Percolation Rates:
Average of Rates: .5833/30"
Mean of Rates:

(Do not write below this line)

REVIEWING ACTION

REMARKS: Wymore Silty Clay Loam
Judson Silt Loam (A&C.P.) Confirmed

DATE: May 3, 1977

Approved Percolation Rate (a)
A. 56 min./inch
B. ____ min./inch
C. ____ min./inch

James Wevertka
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. 1043C

SPECIFICATIONS

DATE: _____

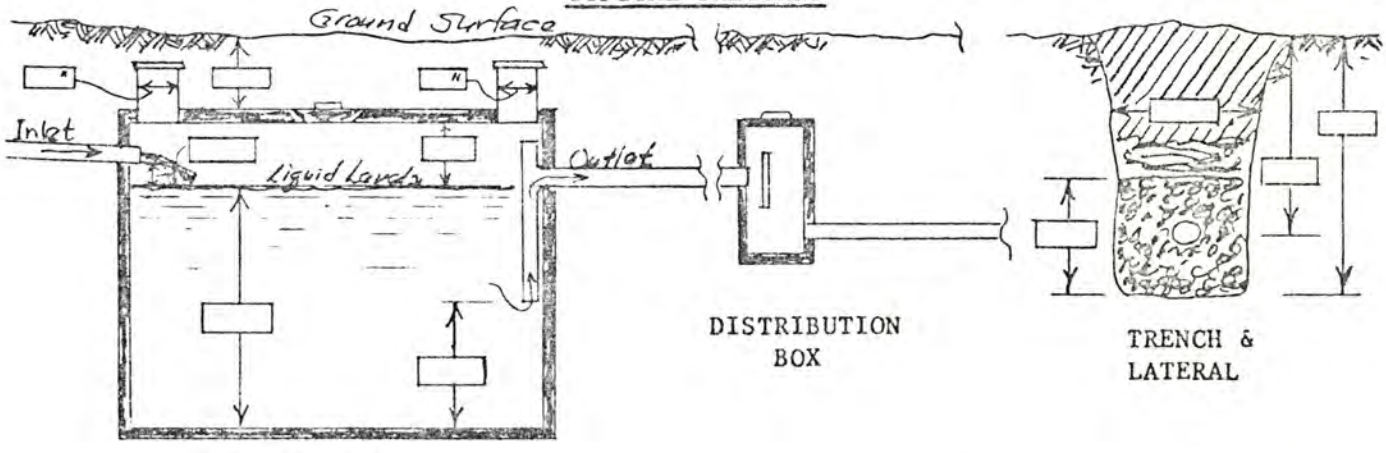
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material 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 238 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

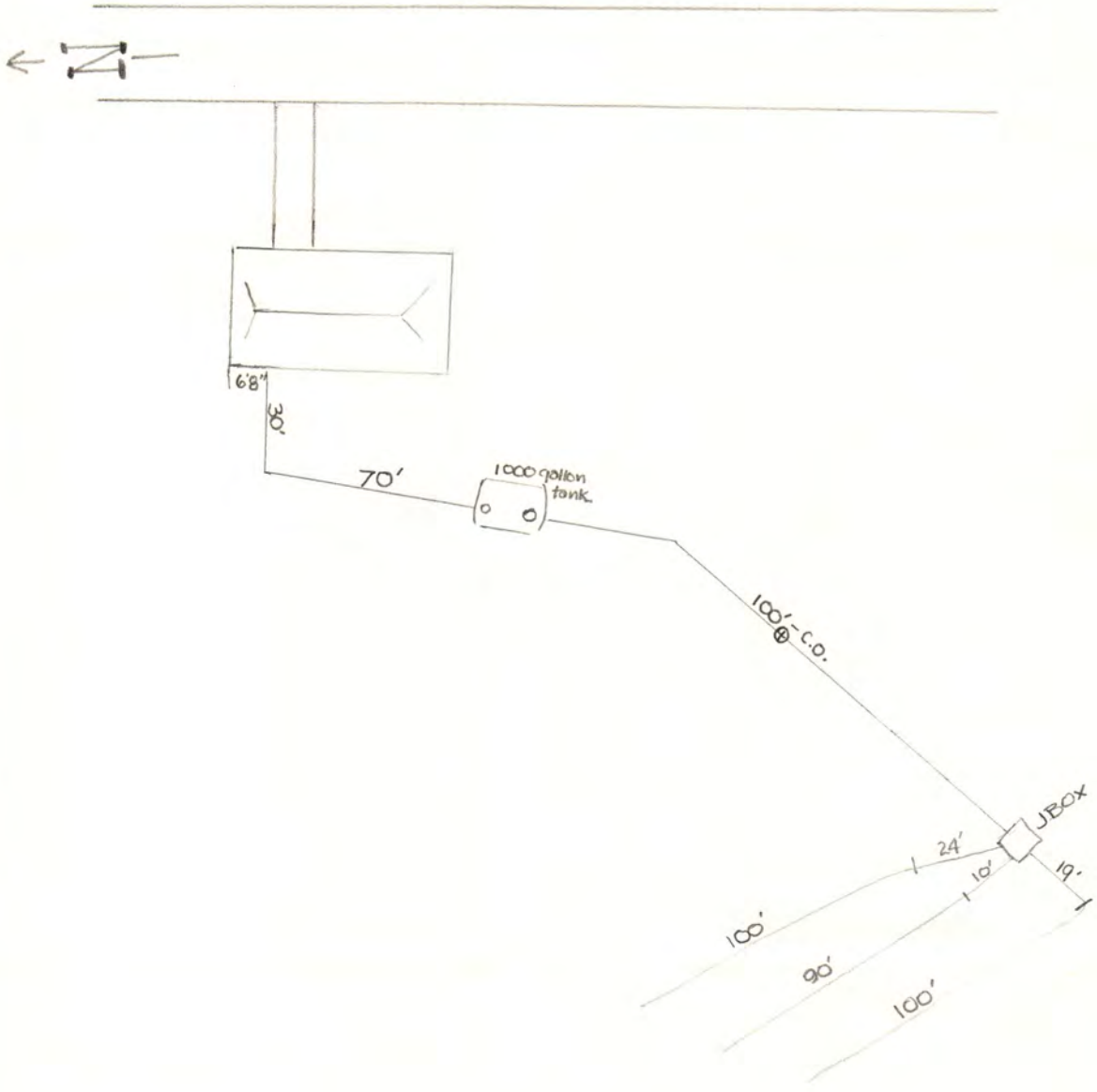


ALLEN R SCHROEDER
Signature of Applicant

FEB 10 1978

POTTYco PLUMBING

Allen Schroeder :



PHONE 791-5714 or MOBILE 435-1978 • BOX 232 • FIRTH, NEBRASKA 68358

083

Lincoln-Lancaster County Health Department

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

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

This form must be completed and returned to request a real estate transfer inspection.

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 7301 S. 134th, Walton NE.
Twp 9N Range 8E Section 30 1/4 ___ 1/4 ___ Block ___ Lot 6-7 Addition ___
Directions to Property ___

Location of Well Calle Owners Tap Location: Inside ☐ Outside ☐
Location of Sewage System Calle Owners Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	Sally + Jim Nabb	7301 S. 134th Walton NE	782-2840
Tenant/Buyer:	Mike + Jean Jeans	2930 Sewell Lincoln NE 68502	475-7887
Return to:	Firstier RC 732 Cindy	100 N 56 Lincoln NE	467-8042

Signature of Applicant ___ Address ___ Date 12/27/93
Cynthia Terrell for applicant

HEALTH DEPARTMENT USE ONLY

Date Received 12/29/93 Received $150.00 Check ☒ (CK # 1380) Cash ☐

PRELIMINARY STATUS--By [redacted] **DATE:** 12/29/93
PAUL D. ROSTERMANN

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ____/ml	☐ ____/ml
Nitrate	☐ ____ppm	☐ ____ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☐
Disapproved ☒

Additional Site Visits
Date 5/18/94 by P.D.
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: Sewage running onto ground surface. Tank should be pumped
5-18-94 No sewage on ground surface. Some repair work done by Rural Sanitation. See Attached Letter ☐

FINAL STATUS
WATER SYSTEM: Approved: ☒ (Rural Water District)
SEWAGE DISPOSAL SYSTEM Approved: ☒ Provisional Approval: ☐

Approved by Paul D. Rostermann Date 5/18/94

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.

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: 7-24-89

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $75.00

Legal Description of Property: TWP. 9N; RANGE 3E; SECTION N½ of 20; BLOCK ____

LOT 6 & 7; ADDITION _____; Street Address 7331 South 134th Street Waverly 68462

Directions to Property _____

_____

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System _____ Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	Mr. & Mrs. Gerald Arndt	7331 South 134th Waverly NE	786-2062
Tenant/Buyer:	Jon & Kelly Ahlvers	711 Dartmouth Plattsmouth	479-6789
Return to:	Victor Bank (Attn: Becky)	P.O. Box 5300 Lincoln, NE	465-7500

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

Signature of Applicant Jon Ahlvers Address Victor Bank P.O. Box 5300, Lincoln 68505

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HEALTH DEPARTMENT USE ONLY

Date Received JULY 25, 1989 Received $75.00 Check ☒ Cash ☐

RURAL WATER DISTRICT

PRELIMINARY STATUS--DATE 7/26/89

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 7/26/89 by J.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. SYSTEM IS NOT MORE THAN 11 YEARS OLD. See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT #1 LANCASTER COUNTY

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

APPROVED BY Jerold C. Hood R.S. DATE JULY 26, 1989

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