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. 448-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. 12N; Range 7E; Section 14
Block _____; Lot Lot 10 I.T.; Addition _____
Street Address _____

2. Property Use: Residential _____ ☒; Commercial _____ ☐
No. of Bedrooms 3. Describe: 2 Story Frame home
Other Use _____ ☐
Describe: _____

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

4. Distance to public sewer: _____ ft.

Randy P. Johnson
Signature of Applicant (Owner or Lessee)

Waverly, Neb.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/14/74. Date Frwd. 5/14/74.
ACTION: Approved ☒ Disapproved ☐
Signature: Jerrold C. Hood

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

3. City or County Engineer: Date Rec'd. 5-17-74. Date Frwd. 5-17-74.
ACTION: Approved ☑ Disapproved ☐
Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

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

Mick Zipkin

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. 448-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. 12 N ; Range 7E ; Section 14 ; Block _____ ; Lot 101.T. ; Addition _____.
Street Address _____.

2. Property Use: Residential _____ ☒ Commercial _____ ☐
No. of Bedrooms 3 Describe: 2 Story Frame home
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).

Randy P. Johnson
Signature of Applicant (owner or lessee)

Waverly Neb.
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 6-4-74 by: jw
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐ 5/17/74
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-4-74 by: James Wenstrand

Jerry Hood

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. 448-C

PROPERTY WHERE SOIL TESTED: ~~SE 14~~

Owner: Randy Johnson

Location: Township 12 ; Range 7
Section & ¼ Sect. SE¼ Sec. 14

Address Wayne Neb. 68962

Property Dimensions: ____ ft. x ____ ft.
Area: 6.66 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: 5/13/74 to 5/14/74. Weather: Precip. ? Temp. 65 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	29"	5/13	2 PM	5/14	9 AM	5/14	9 AM	9"	9:30	7½	30	1½	
2	29							8½		7½		1	
3	29							8½		7½		1	
4	29							8½		7"		1½	
5	29							8½		7"		1½	
6	29							8½		7½"		1	

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

Randy P. Johnson
Signature of Person Conducting Test

Address Wayne Neb.
Phone: 786 7970

(Do not write below this line)

REVIEWING ACTION

REMARKS:

Approved Percolation Rate(s)
A. 24 min./inch
B. ____ min./inch
C. ____ min./inch

DATE: May 14, 1974

Gerald C. Hood
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. 448-C

SPECIFICATIONS

DATE: _____

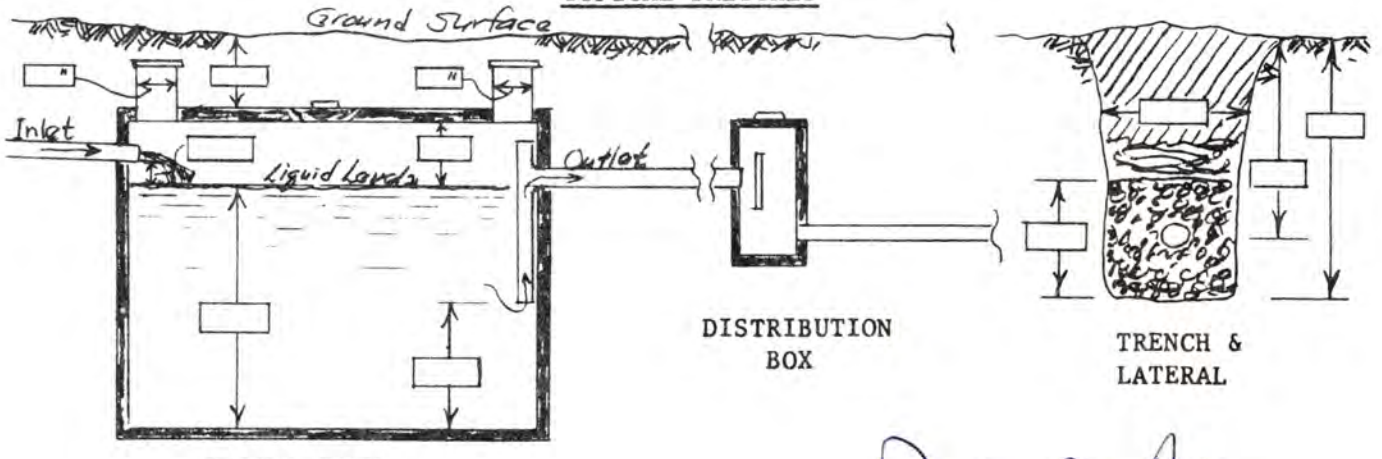
A. BUILDING SEWER:
1. Material Plastic and Cast Iron; Diameter 4 in.
2. Distance above basement floor 36 in.; or below basement floor ____ in.
3. Distance between dwelling and septic tank 70 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 100' ft.;
Stream ____ ft.; Pressure Line 100 ft.;
Property Line ____ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 47 in.
3. Factory Built: Yes ☒ (Company Pre-Cast)
No ☐
4. Manholes: Over Inlet; diam. 19 in.
Over Outlet; diam. 19 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 18 in.
8. Distances To:
Well or Suction Line 132' ft.;
Stream ____ ft.; Pressure Line 100' ft.;
Property Line ____ ft.

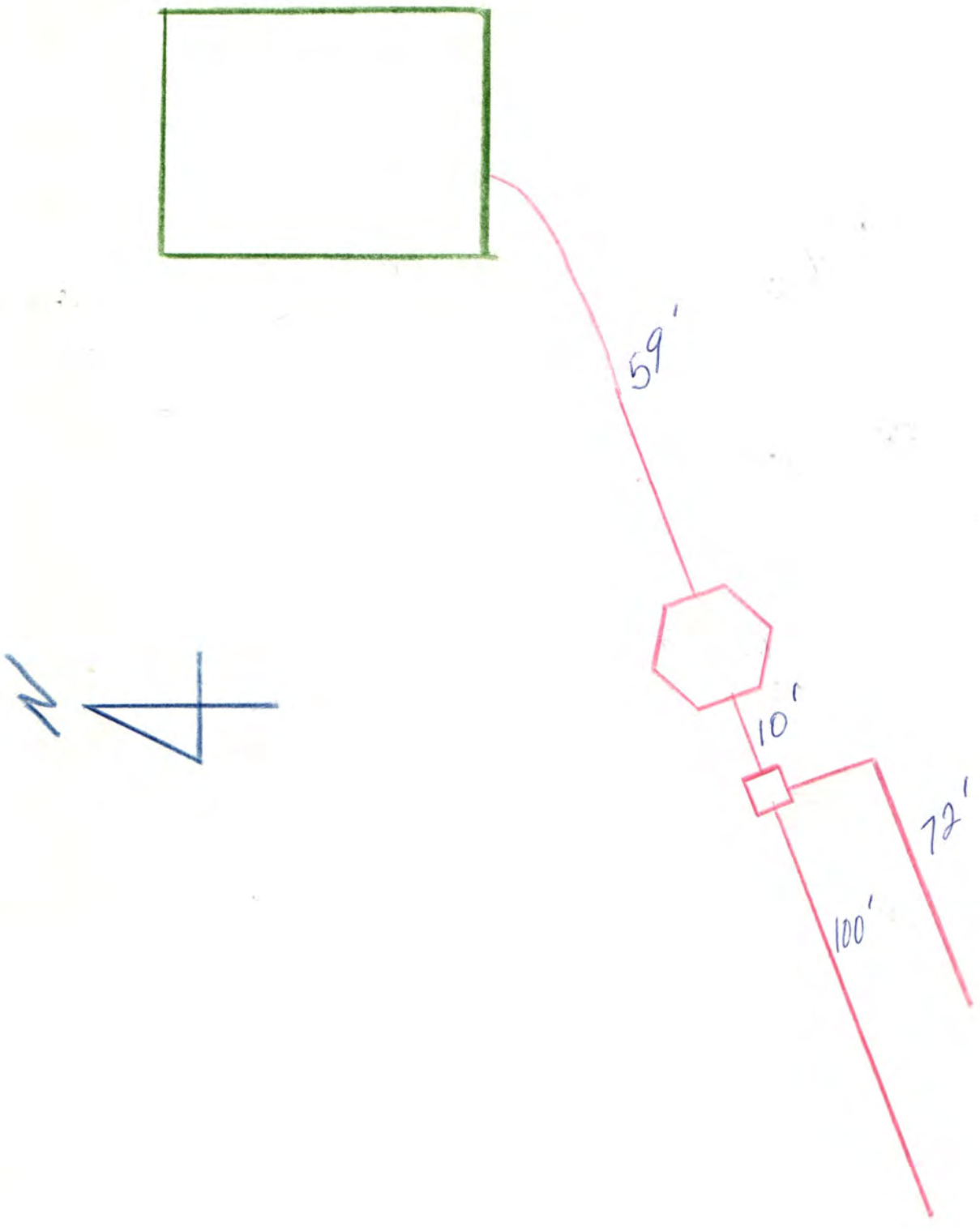
C. DISTRICTION BOX
1. Material Concrete; No. available outlets ____.
2. Factory Built: Yes ☒, (Company Pre-Cast)
No ☐
3. Dimension: Length 15 in.; Width 9 in. Depth 11 in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Concrete
2. Lateral Lines: Depth below grade ___ in.
Number 2; Length of each line 100 ft
Total length of Laterals 169 ft.; 72
Slope ____ in/100 ft. Diameter of pipe 4 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 142' ft.;
Stream ____ ft.; Pressure Line ____ ft.
Property Line ____ ft.
6. Percolation Rate: _____ minutes/inch

TYPICAL SKETCHES



Randy P. Johnson
Signature of Applicant


59'
10'
72'
100'
N

An irregular tract containing 6.61 commecing at the Southeast corner of Section 14. Thence West on the South line of the Southeast 1/4 1795.85 feet to the point of beginning thence continuing West on last described line 478.58 feet thence north perpendicular to South line a distance of 404.33 feet thence Northeasterly bearing North 7 degrees 38 east a distance of 144.65 thence bearing North 8603 degrees a distance of 393.82 feet thence bearing South 80 degrees 33 feet East a distance of 97.85 feet thence bearing South 3 degrees 01 feet West a distance of 559.2 feet to a point on South line of the Southeast 1/4. The said point being the point of beginning.

Harold K. Nansel

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 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 9200 Rock Creek Road
Twp 12N Range 7E Section 14 1/4 ___ 1/4 ___ Block ___ Lot ___ Addition ___
Directions to Property Route 77 North to Rock Creek Road, Right on Rock Creek for 2.5 miles, house on Left
Location of Well North of house Tap Location: Inside ☐ Outside ☒
Location of Sewage System Southwest of house Year Installed 1995

	NAME	ADDRESS	PHONE
Present Owner:	Patricia Herman, John Osterman	9200 Rock Creek Rd. Waverly NE 68462	785-2343 work: 472-5129 472-4934
Tenant/Buyer:	(send report to present owners)		
Return to:			

Signature of Applicant Pat L Herman Address 9200 Rock Creek Rd Waverly NE 68462 Date 6/26/95

HEALTH DEPARTMENT USE ONLY

Date Received 6/26/95 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Ron Marquart **DATE:** 6/27/95

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☒ corrected	Approved ☐	Date 6/29/95 by RM
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☒	Date ___/___/___ by ___
Nitrate	☒ 0.1 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: Evidence of seepage to the ground surface indicates that a subsurface lateral may be failing. Recommend not forming over lateral of septic system. Thus, a provisional approval.

See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Marquart, RS Date 7/10/95

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: June 1 1990

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

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 14; BLOCK ___

LOT 4C; ADDITION _____; Street Address _____

Directions to Property U.S. 77 - north to Davey Road - 1 mi east to 148th then north goes & Church to Rock Creek Road - Then west ½ mile on Rock Creek Rd

Location of Well 30 ft. North of home 5 gallon Bucket cover in ground on north side Tap Location: Inside ☒ Outside ☒

Location of Sewage System 50-60 ft SW of Home either Year Installed 1974 or 75

	NAME	ADDRESS	PHONE
Present Owner:	Mike & Diane Larson	9200 Rock Creek RD	785-5275
Tenant/Buyer:	John Osterman	1115 N 42nd	466-5343
Return to:	Don Searcy	Woods Bros - 3201 Pioneer Lincoln, Ne 68502	483-4151

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

Signature of Applicant _____ Address _____

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HEALTH DEPARTMENT USE ONLY

Date Received JUNE 1, 1990 Received $75.00 150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE JUNE 5, 1990

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 6/5/90 by CH
Bacteria	☒	☐	Provisional:	☐	Date _____ by ___
Nitrate	☒ .2	☐	Disapproved:	☐	Date _____ by ___

Comments: SEPTIC TANK SHOULD BE CHECKED TO SEE IF IT NEEDS PUMPING. SEPTIC SYSTEM IS EXACTLY 16 YEARS OLD.

_____ See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Harold C. Hood R.S. DATE JUNE 11, 1990

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