LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 471-8000

NON TRANSFERABLE

P E R M I T

Permit
SEWAGE INSTALLATION

No. 92380089901

Issued 08/19/92
Expires 02/19/93
Revenue Code 18754

Establishment
EUGENE PEGLER
T9N R8E SEC 26
16969 YANKEE HILL RD

FEES: $150.00

TOTAL $150.00

Permittee
EUGENE PEGLER
1001 ANTHONY LN
LINCOLN NE 68520

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

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: $ 150.00

FILE NO. _____

DATE: 8-18-92

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. 9N ; Range 8N ; Section 26 ; SE¼ NW¼
   Block _____ : Lot _____ : Addition _____
   Street Address 16969 Yankee Hill Rd.
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: _____ ft. (Unavailable)

Eugene F. Peyton
Signature of Applicant (Owner or Lessee)

1001 Anthony Ln. Lincoln NE 68520
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/19/92. Date Frwd. 8/19/92. ACTION: Approved ☒ Disapproved ☐ Signature: Harold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 8/19/92. Date Frwd. 8/19/92. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]
3. City or County Engineer: Date Rec'd. 8/19/92. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 8/19/92 by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

8/5/03 no evidence of malfunction

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 7/27/06 By: J. C. Hood

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

* SEE ENCLOSED LETTER

FORM 23-43

488-1622
437-6763

476-6090
437-8863

FORM 20105-0477
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: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 8E ; Section & ¼ Section 26 .
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 2-24 to 2-25 . Weather: Precip. 0 Temp. 30-40

OWNER: Eugene Pesler

Address: _____

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	36	2/24	9:30	2/25	8:30	2/25	11:30	22¼	12:00	23	30	¾	
2			A		A			23		23⅝		⅝	
3								21		21¾		¾	
4								21⅜		22¼		⅞	
5								21⅜		22		⅝	
6								20¾		21⅝		⅞	
7								24⅝		25½		⅞	
8								26		26⅝		⅝	

Sum of Percolation Rates: 5.875
Average of Rates: .73
Mean of Rates: _____

4 l/min/in

Signature of Person Conducting Test

Address _____ Phone _____

(Do not write below this line)

REVIEWING ACTION

Remarks: 3.6 mins

Soil Type (SCS): Mayberry Clay Loam 35# 28#

Date: AUGUST 19, 1992

Approved Percolation Rate (a)
A. 40 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM 20104-0477
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
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D

DATE: 8-19-92

FILE NO. _____

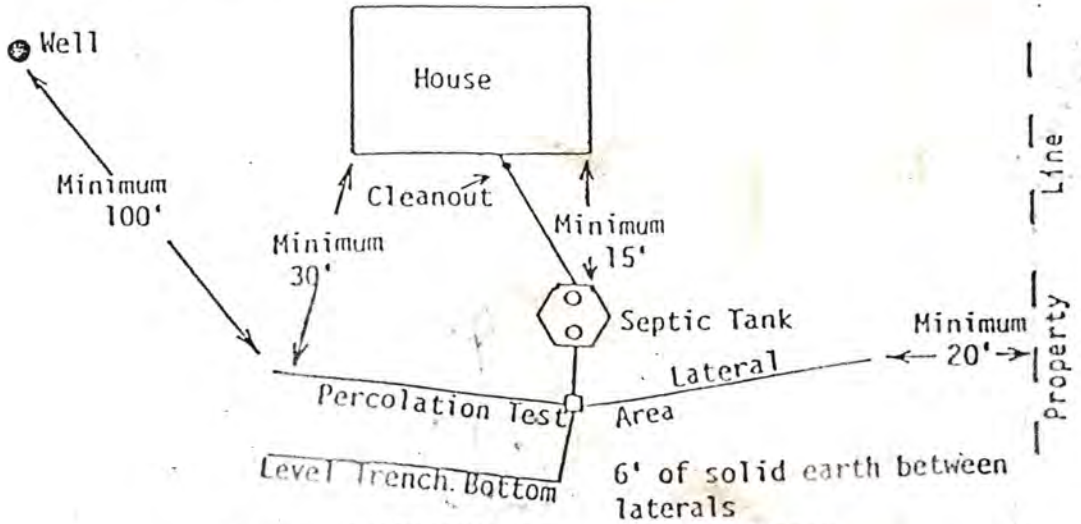
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Sealed 40; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 48 in.
3. Distance between dwelling and septic tank 75' ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line 75' ft.;
Stream — ft.; Pressure Line 25 ft.; Property Line 2500 ft.

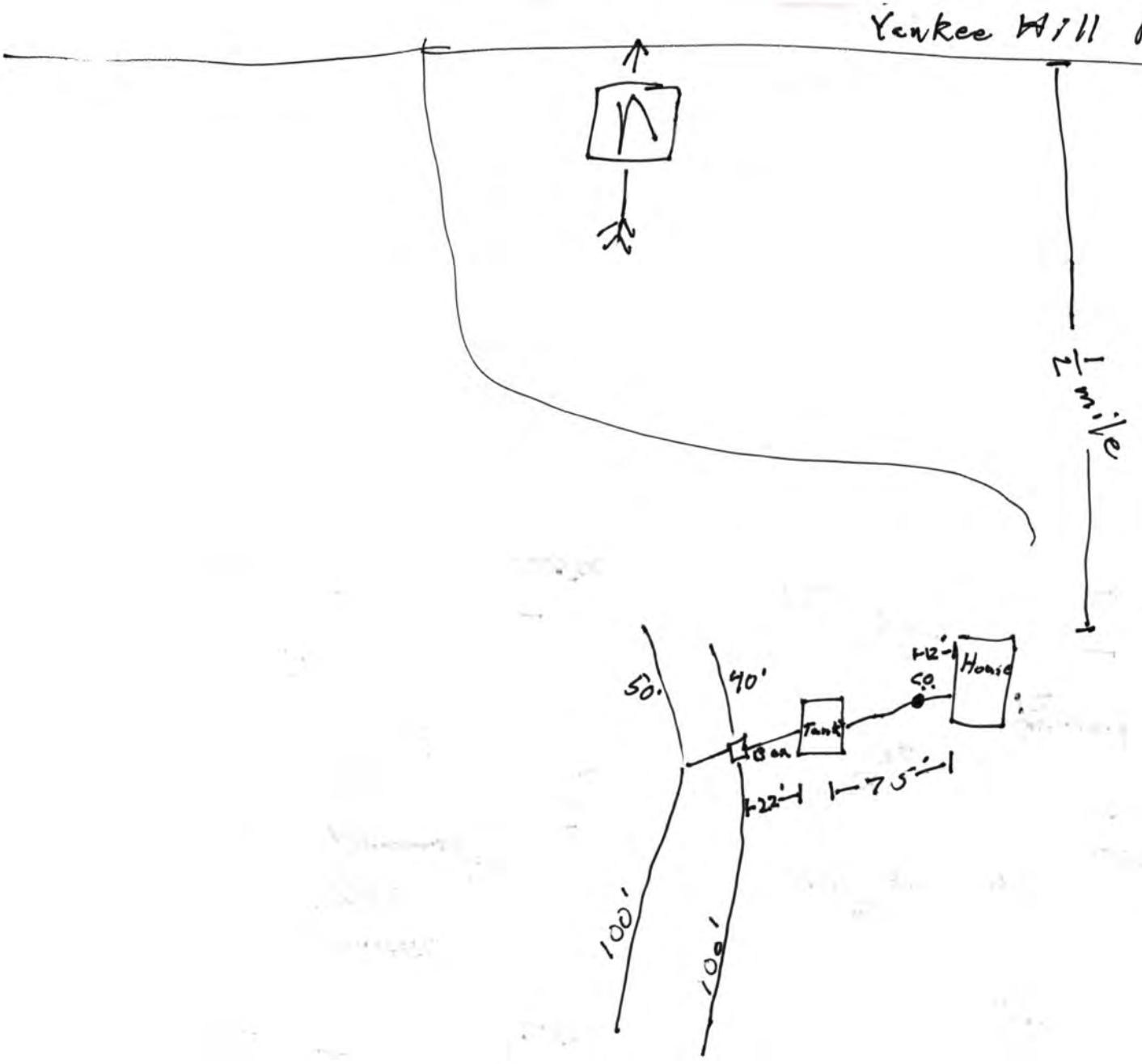
B. SEPTIC TANK:
1. Material Concrete; No. of compartments 3.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Precast)
4. Manholes: Over Inlet; diam. — in.
Over Outlet; diam. — in.
Riser Above ☑ Below ☐ Grade 6 in.
5. Inlet: Baffle ☑; or Tee ☐
6. Outlet: Baffle ☑; or Tee ☐
7. Depth of top of tank below finished grade 16 in.
8. Distances to:
Well or Suction Line — ft.;
Stream — ft.; Pressure Line 100 ft.; Property Line 2500 ft.

C. DISTRIBUTION BOX:
1. Material plastic; Number - available outlets 5.
2. Factory Built: Yes ☑ No ☐
(Company ?)
3. Distance from Septic Tank 22 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☑
Diameter of Half Round _____ or
Perforated Pipe 4".
Material: fiberglass ☐; plastic ☑; concrete ☐; other _____.
2. Lateral Lines:
Number 4; Length of each line 100, 100, 50, 40, _____ ft.;
Total length of laterals 290 ft.;
Distance between lateral lines 9 ft.
3. Trench dimensions: Width 3 ft.;
Slope 3 in/100 ft.; Average Depth 36 in.
4. Filter Material: Gravel
Depth of Material 12 in.
5. Distances to:
Well or Suction Line — ft.;
Stream 75 ft.; Pressure Line 120 ft.; Property Line 2500 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN



16969 Yankee Hill Rd.

Weltmann
Plumbing

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

NEED RUSH!

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

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☒ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 16969 YANKEE HILL RD

Parcel ID 125 - NW - 26 - 9 - 8 (i.e. 99-99-999-999-999)

Twp 9N Range 8E Section 26 1/4 NW 1/4 Block ___ Lot 25 Addition Irrey Tract

Directions to Property _____

Location of Well RURAL WATER Tap Location: Inside ☐ Outside ☐

Location of Sewage System SEE BIRD FEEDER - UNDER IT Year Installed ≈1992

Site Hazards (dogs, etc.) HSE VACANT

	NAME	ADDRESS	PHONE
Present Owner:	STAR BLDGS INC	2425 Calvert Lincoln, NE (02)	430-7394
Tenant/Buyer:	GREG BOUVIER	6430 BEAVER CREEK LN LINCOLN NE (16)	328-9786
Return to:	SHARON WULF	7100 S 29 LINCOLN NE (16)	432-0226 434-3605 (Fax)

Signature of Applicant Sharon Wulf Address 7100 S 29 LINCOLN, NE 68516 Date 8/4/03

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 8/5/03 Amount $200.00 Check No. 4231 Initials LS

DATA ENTRY Date ___/___/___ Case No. _____ Initials _____

PRELIMINARY STATUS--By Jerrold C. Wood RURAL WATER DISTRICT **DATE:** 8/5/03

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

SEWAGE SYSTEM	
Approved	☐
Provisional	☒
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECK TO SEE IF IT IS NEEDED. LOW SPOTS OVER SEPTIC LATERALS SHOULD BE FILLED WITH SOIL TO PREVENT WATER FROM PONDING OVER THE LATERALS. NO EVIDENCE OF MALFUNCTION. See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: RURAL WATER DISTRICT Approved ☒ **SEWAGE DISPOSAL SYSTEM:** Approved ☐ Provisional Approval ☒ PROVISIONAL HOUSE WAS VACANT AT TIME OF LOAN INSPECTION. SEE ENCLOSED LETTER REASON FOR APPROVAL

Approved by Jerrold C. Wood R.E.H.S. Date 8/5/03

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.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00