LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 2437-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JUNE 30, 1987 — THIS PERMIT EXPIRES

JAYNE OR LOYAL NYHOFF — ISSUED TO

ROUTE #1, BOX 15550 RAYMOND, NE 68428 — ADDRESS

T12N; R6E; Sec 32; Bk 2; Lots 11 & 12; Willard Estates 2nd Addition, 15550 Willard Circle, Rt #1, Raymond — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
CB	4/8/87	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

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

20109-0977

REC'D DEC 23 1986

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: $ 60.00

FILE NO. 2437-C

DATE: 12-5-86

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. 12N ; Range 6E ; Section 32 ; Block 2 : Lots 11+12 : Addition Willard Estates 2nd Add'n ~~to Lincoln~~
   Street Address Rt. 1 Box 15550 Raymond, NE

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

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

4. Distance to public sewer: greater than ~~ft.~~ 1 mi.

Jayne M. Nyhoff
Signature of Applicant (Owner or Lessee)

Rt. 1 Box 15550 Raymond, NE 68428
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 12/30/86. Date Frwd. 12/30/86. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 12-21-86. Date Frwd. 12-21-86. ACTION: Approved ☒ Disapproved ☐ Signature: D Jeske, Clerk

3. City or County Engineer: Date Rec'd. 12-31-86. Date Frwd. 12-31-86. ACTION: Approved ☒ Disapproved ☐ Signature: Harold R Sletten

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 3-23-87 by: [illegible] fence?
Date: 3-25-87 by: [illegible]
Date: by:

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 3-25-87 By: Ron Maynard

REC'D DEC 23 1986

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
Phone: 471-7800

D

DATE: #12-6-86

FILE NO. 2437-C

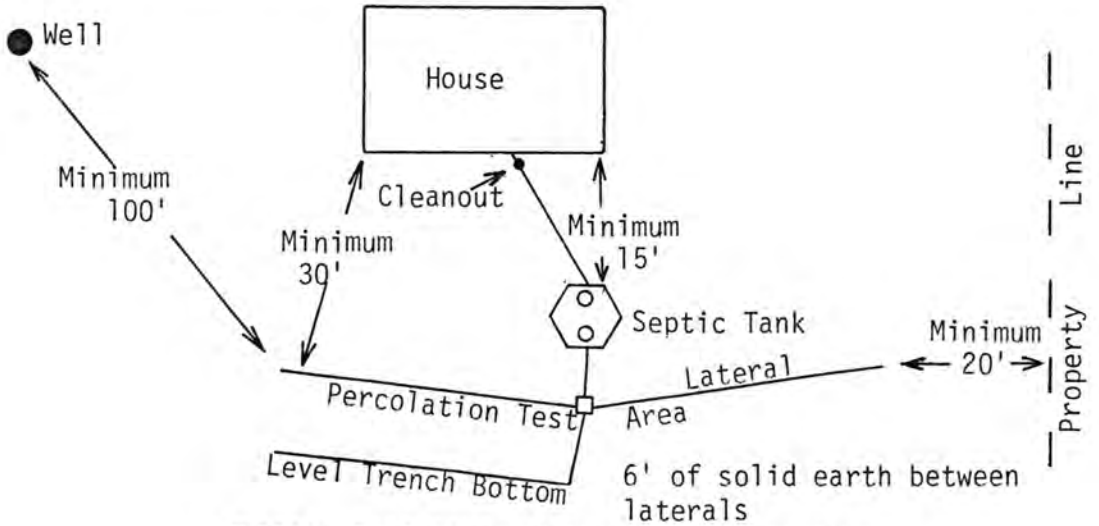
SPECIFICATIONS AS BUILT

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 tank 220 ft.
4. Number of clean-outs 4 .
5. Distances to:
Well or Suction Line 300 ft.; Stream — ft.; Pressure Line — ft.; Property Line 75 ft.

B. SEPTIC TANK:
1. Material _____; No. of compartments _____.
2. Capacity _____ gals.;
3. Factory Built: Yes ☐ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
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 _____; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☐
(Company _____)
3. Distance from Septic Tank _____ ft.

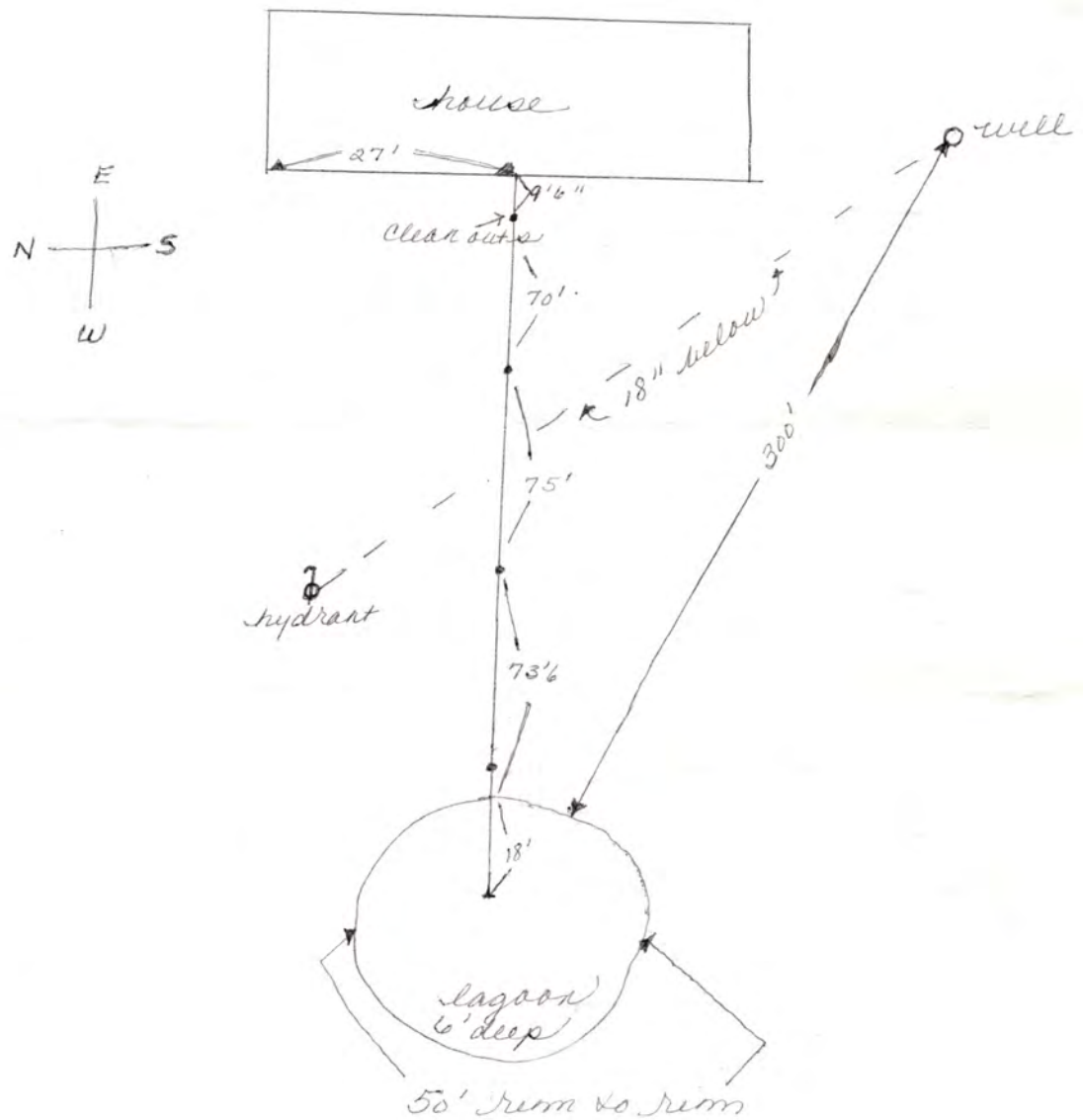
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☐
Diameter of Half Round _____ or
Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line _____, _____, _____,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



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 8-25-86 INSTALLER Workhorse Backhoe Co.



006

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 471-8022

Copies

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 15550 Willard Circle

Twp 12 N Range 6 E Section 32 1/4 SE 1/4 ___ Block ___ Lot 11 & 12 Addition P.2

Directions to Property North on 14th St. West on Raymond Rd. to NW 35th, Trudy Hunt to 35th, N. to Hickory Lane West to Willard Circle first left, end of road

Location of Well East of house Tap Location: Inside ☒ Outside ☐

Location of Sewage System South east of house Year Installed 1986

	NAME	ADDRESS	PHONE
Present Owner:	Loyal Nyhoff	15550 Willard Circle	
~~Tenant~~/Buyer:	James B Hyland	12221 N. 14th St. Waverly, NE 68462	786-3085
Return to:	Buyer		Re/Max Carl Oestmann 467-3000 Byron Funk

Signature of Applicant James B Hyland Address ___ Date 12/22/92

HEALTH DEPARTMENT USE ONLY

Date Received 12/22/92 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By R. Marquardt **DATE:** 12/23/92

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 0.1 ppm	☐ ___ ppm

SEWAGE SYSTEM

Approved ☒

Provisional ☐

Disapproved ☒ Corrected

Additional Site Visits

Date 1/25/93 by mm

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: Must remove cattails in the spring.

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☒ **SEWAGE DISPOSAL SYSTEM** Approved: ☒

Provisional Approval: ☐

Approved by Ron Marquardt, R.S. Date 1/26/93

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.