LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 1875-C

INDIVIDUAL SEWAGE SYSTEMCCONSTRUCTION
TYPE OF PERMIT

NOVEMBER 6, 1982
THIS PERMIT EXPIRES

DAVE REMENGA 4320 NW 49TH LINCOLN NE
ISSUED TO ADDRESS

T12N, R6E, SECTION 32, BLOCK 3, LOT 4, ADDITION WILLARD ESTATES
LEGAL DESCRIPTION

REMARKS NON-TRANSFERABLE

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

EB 5/6/82

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

BBALTH
ISSUING OFFICER

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

20109-0977

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: 474-1541

FILING FEE: $ 60.00

FILE NO. 1875-C

DATE: 5/5/82

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 3 : Lot 4 : Addition Willard Estates
   Street Address _____

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.

Dave Remenga
Signature of Applicant (Owner or Lessee)

4230 NW 49th Lincoln, Nebr.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/6/82. Date Frwd. 5/6/82. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Wes Horning

3. City or County Engineer: Date Rec'd. 5/6/82. Date Frwd. 5/6/82. ACTION: Approved ☐ Disapproved ☑ Signature: Larry V. Worrell Dep.

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7/6/82 by: J.C.H. Little bit too small on lagoon
Date: 7-8-88 by: [illegible] lagoon enlarged
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7-8-88 By: Ron Magnuson

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

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: 474-1541

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED: SE¼

Location: Township 12-N ; Range 6 E ; Section & ¼ Section 32 .
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: 5/10/81 to 5/11/81 . Weather: Precip. _____ Temp. _____ .

OWNER: Dave Remenga

Address: 4230 NW 49th

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											30	1/16	
2												0	
3												1/4	
4												1/8	
5												0	
6												0	

John L Tidmore
Signature of Person Conducting Test

Address 4401 No. 27th Phone 467-1627

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

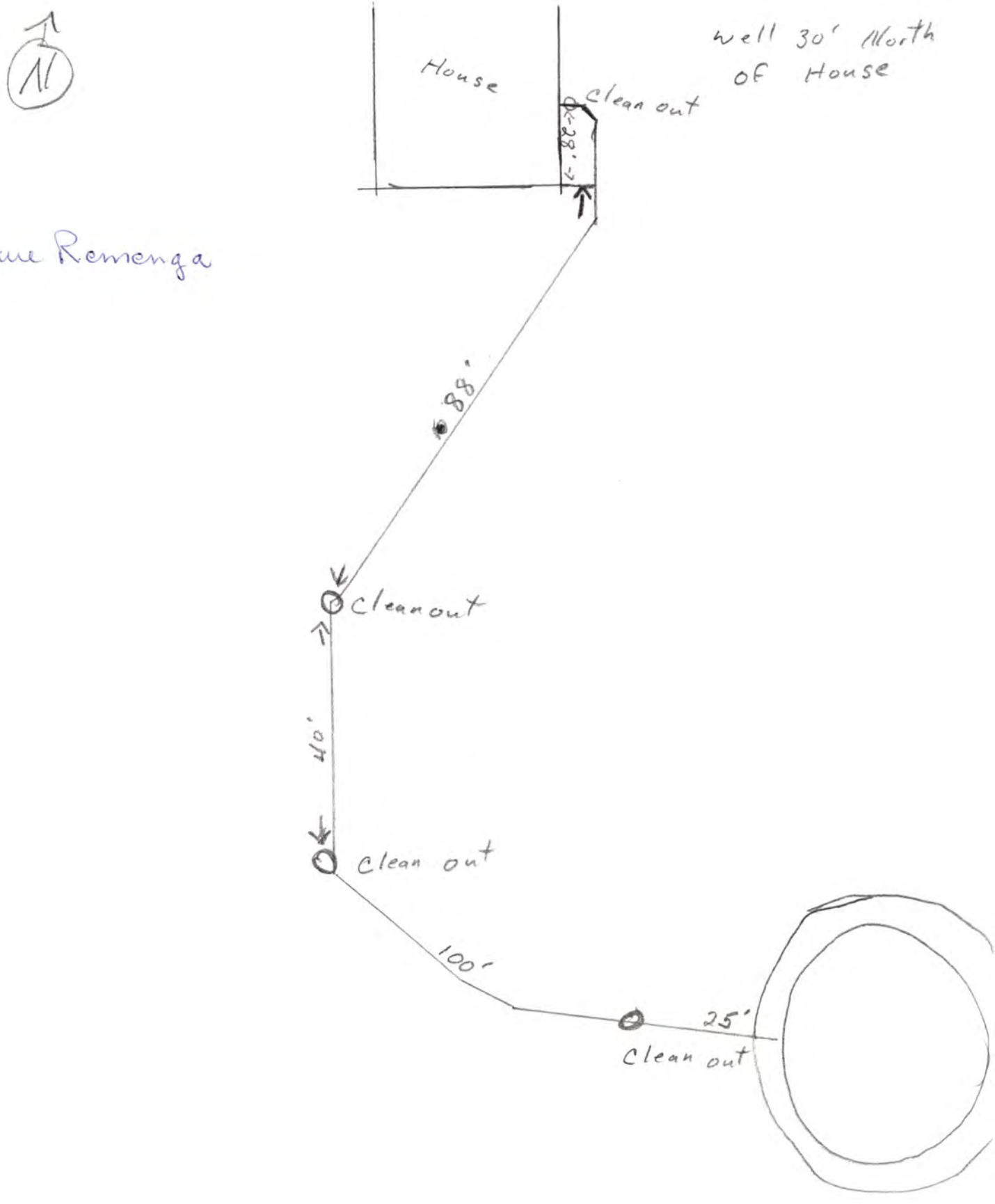
(Do not write below this line)

REVIEWING ACTION

Remarks: Too slow for septic system
Soil Type (SCS): Rawnde Clay Loam & Shelby Clay Loam
Date: May 6, 1982

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

Gerald C. Hood
Signature of Reviewing Official


N
House
Clean out
28'
well 30' North of House
Dave Remenga
88'
Clean out
40'
Clean out
100'
25'
Clean out
Property Line
100' East
300' South
of Lagoon



4401 NO. 27TH STREET • LINCOLN, NEBR. 68521 • 467-1627

PLEASE FAX A COPY OF THE PRELIMINARY STATUS TO LONDI RUTAN AT CROWNE CLOSING WHEN AVAILABLE - FAX: 464-1356

MAY 27 1997

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 3001 Trudy Ann Drive, Raymond, Ne. 68428

297' of Outlot A Twp 12N Range 6E Section 32 1/4 ___ 1/4 ___ Block 3 Lot 4 Addition Willard Estates

Directions to Property North on 14th to Raymond Rd., turn west to NW 31st, turn right

Location of Well NW corner of the house Tap Location: Inside ☐ Outside ☒

Location of Sewage System see lagoon Year Installed 1982 est. per seller

	NAME	ADDRESS	PHONE
Present Owner:	Jack & Anita Lovins	3001 Trudy Ann Dr. Raymond, Ne. 68428	783-2006
Tenant/Buyer:	Steve and Gloria Richman	1732 W. Washington Lincoln, Ne. 68522	438-1361
Return to:	Londi Rutan Crowne Closing Co.	6940 "O" St., Ste. 312 Lincoln, Ne. 68510	464-1200 430-8996

Signature of Applicant Londi Rutan for Steve + Gloria Richman Address 6940 "O" St., Ste.312 Lincoln, Ne. 68510 Date 5 / 23 / 97 FAX 436-3399

HEALTH DEPARTMENT USE ONLY

Date Received 5/28/97 Received $150.00 Check ☒ #3153 Cash ☐

PRELIMINARY STATUS--By Ron Maryuart **DATE:** 5/29/97

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

SEWAGE SYSTEM

Approved ☒

Provisional ☐

Disapproved ☐

Additional Site Visits

Date 7/14/97 by mcl 730

Date 7/15/97 by mcl 0

Date ___/___/___ by ___

Comments:

See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Maryuart R.S. Date 7/17/97

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.

Rm 214 471-8000

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: July 11, 1990

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $150.00

Legal Description of Property: TWP. 12N; RANGE 6E; SECTION 32; BLOCK 3

LOT 4; ADDITION Willard Estates; Street Address 3001 Trudy Ann Dr. Raymond, Ne

Directions to Property North on 11th St to Raymond Rd, West to Willard Estates, North to address

Location of Well North of Home Tap Location: Inside ☐ Outside ☒

Location of Sewage System Lagoon SE of home Year Installed 1980

	NAME	ADDRESS	PHONE
Present Owner:	Dave Remsenga	3001 Trudy Ann Dr	Work 1-694-5050 Home 783-3833
Tenant/Buyer:	Jack Lovins	2630 NW 49 Th	420-2566
Return to:	Harley Pfeiffer Woods-Lincolnshire	7141 A St. Lincoln	483-4241 Cell 432-4086

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

Signature of Applicant Harley P Pfeiffer Address 7141 A ST. Lincoln Woods Bros

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HEALTH DEPARTMENT USE ONLY

Date Received JULY 13, 1990 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 7/16/90

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☐	Date 7/16/90	by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 7-24-90	by JRM
Nitrate	☒ 2.1	☐	Disapproved:	☒ Correction Made	Date	by

Comments: NEED FENCE STRAIGHTENED UP ALL THE WAY AROUND, NEED CATAILS KILLED OUT IN LAGOON (Northeast area of site is near marlow) See Attached Letter ☐

If future water use is curtailed somewhat, the water level in lagoon should be satisfactory.

FINAL STATUS

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

APPROVED BY Ron Maynard DATE 7-26-90

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