LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

P E R M I T

Permit
SEWAGE INSTALLATION

No. 94380118501

Issued 06/22/94
Expires 12/22/94
Revenue Code 18754

Establishment
JOHN SHEAFF
T12N R6E SEC 29
LOT 16
3301 W DAVEY ROAD

FEES: $150.00

TOTAL $150.00

Permittee
JOHN SHEAFF
3301 W DAVEY RD
LINCOLN NE 68428

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: 6-1-94

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. See Attached 12N ; Range 6E ; Section 29 ;
   Block _____ : Lot 16 I.T. ; Addition _____
   Street Address 3301 West Daley Road, Raymond, Nebr
2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☒
   No. of Bedrooms 3 . Describe Some future livestock
3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐
4. Distance to public sewer: ~~[illegible]~~ Several Miles

Signature of Applicant (Owner or Lessee)

3301 West Daley Rd
Address Raymond Nebr 68428

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/22/94. Date Frwd. 6/22/94. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 6/22/94. Date Frwd. 6/22/94. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]
3. City or County Engineer: Date Rec'd. 06/22/94. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 6-20-94 by: rm
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL* WRITTEN APPROVAL
Date: 6-20-94 By: Ron Morgan

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

* sewer line covered without inspection

FORM 23-43

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. _____

Ken Nelson Davy R. - NW27 1/4 East - 40+ Acres

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
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: Sept 93 to _____. Weather: Precip. _____ Temp. _____.

OWNER: John Sheaff

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	24	9/93									30	1½	
2	"										"	1¼	
3	"										"	2¼	
4	"										"	1½	
5	"										"	1¼	
6	"										"	1 3/4	
											"		

John L Tschumperlin
Signature of Person Conducting Test

Address 9811 NW. 40th Phone 474-9811

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

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 19 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: Ron described as enclusion
Soil Type (SCS): Burchard Clay Loam
Date: June 22, 1994

Jerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

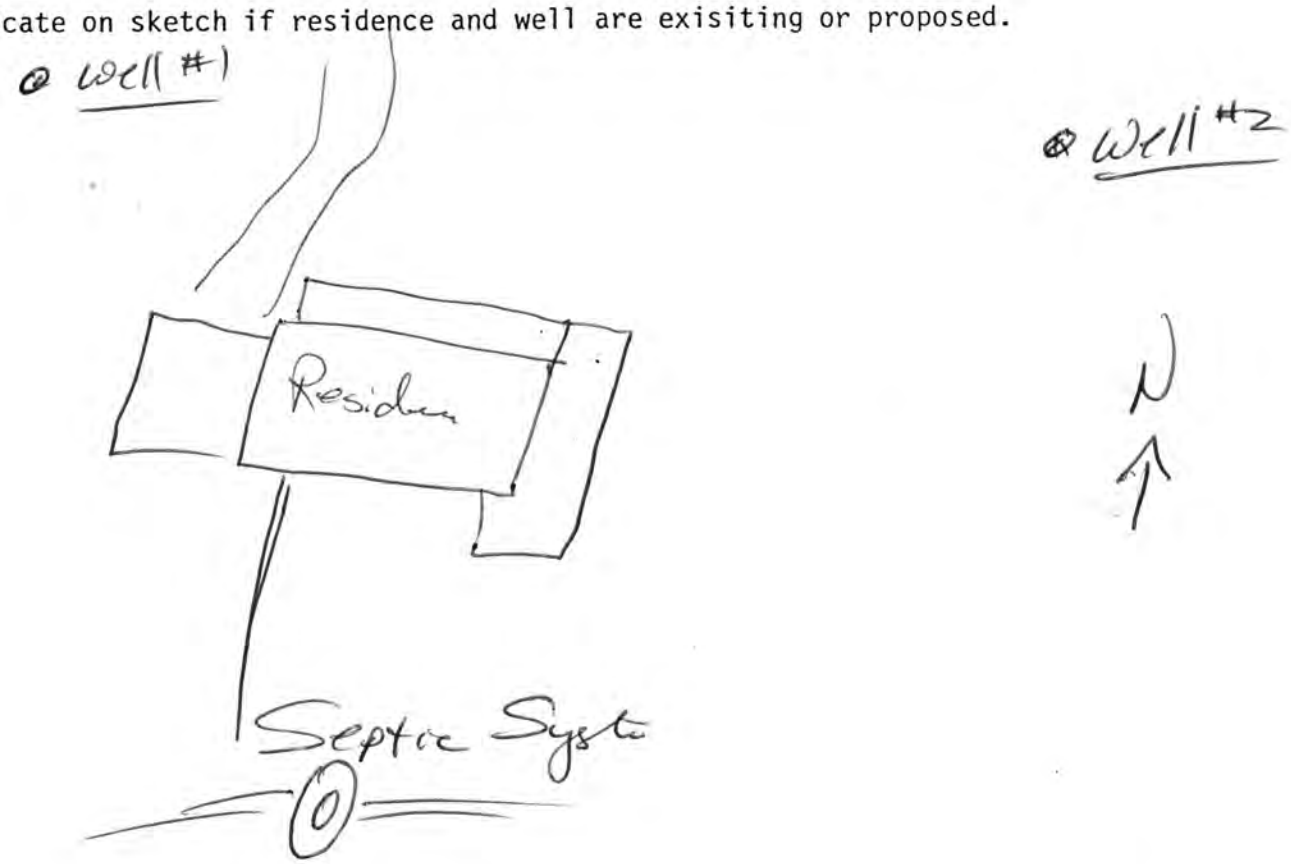
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO._____

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks:_____

Date: June 22, 1994

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals_____ft.
3. With a Trench Width of_____in.
4. Total Area of Lateral needed 618 sq.ft.

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
Phone: 471-7800

D

DATE: June 15th

FILE NO.

John Sheaff

Strohmyer 437-6023

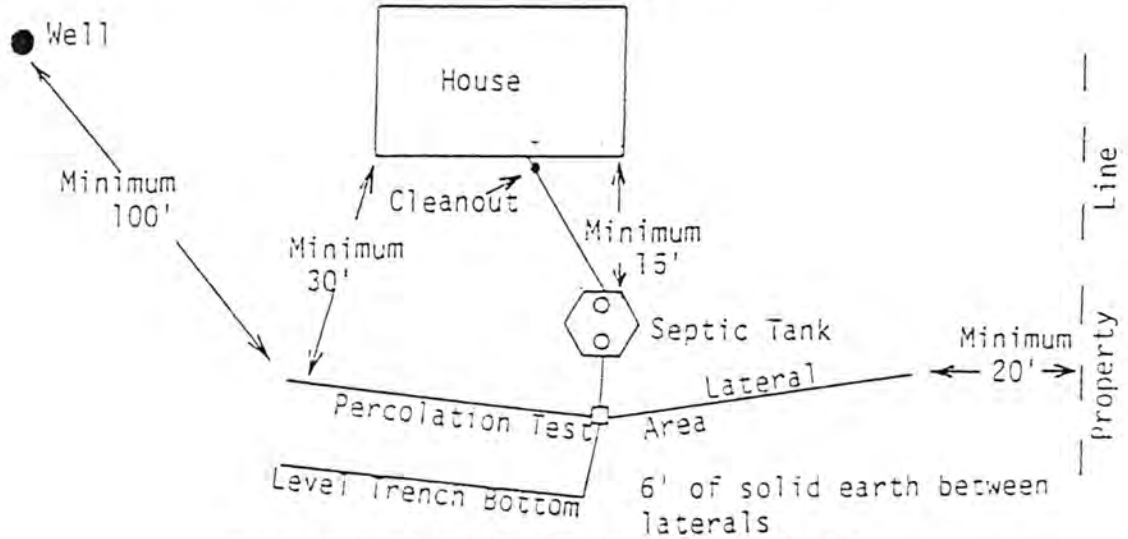
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 2241 ; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 38 in.
3. Distance between dwelling and septic tank 98'6" ft.
4. Number of clean-outs 1 .
5. Distances to:
Well or Suction Line ____ ft.;
Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

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

C. DISTRIBUTION BOX:
1. Material concrete ; Number - available outlets 6 .
2. Factory Built: Yes ☑ No ☐
(Company Pre-cast Step)
3. Distance from Septic Tank 28 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 PVC .
2. Lateral Lines:
Number 2 ; Length of each line 100 , 100 , ____ , ____ , ____ ft.;
Total length of laterals 200 ft.;
Distance between lateral lines 15 ft.
3. Trench dimensions: Width 4' ft.;
Slope 3-4 in/100 ft.; Average Depth 36 in.
4. Filter Material: Road Gravel
Depth of Material 20 in.
5. Distances to:
Well or Suction Line 100 + ft.;
Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

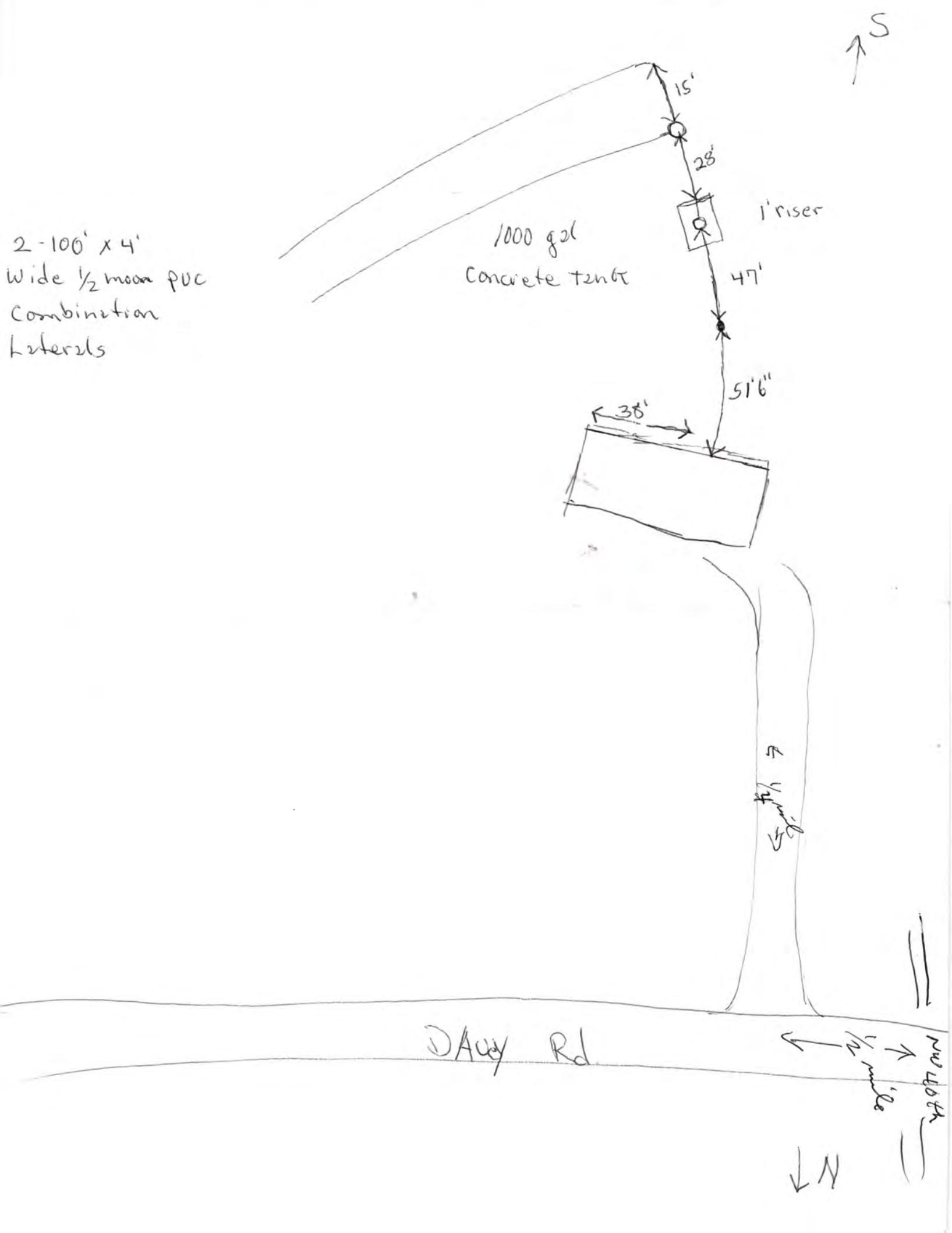

S
15'
28'
1' riser
1000 gal
Concrete tank
47'
51'6"
38'
2-100' x 4'
Wide ½ moon PVC
Combination
Laterals
¼ mile
Davy Rd
NW 40th
½ mile
N

EXHIBIT A

Legal Description

All of that certain tract or parcel of land known as Lot 16, I.T., in the Northeast Quarter (1/4), of Section 29, Township 12 North, Range 6 East of the 6th P.M., Lancaster County, Nebraska, and being more particularly described as follows: Beginning at the Northwest corner of said Northeast Quarter, a L.C.S.M. Cap for some and also being the Northwest corner of the tract herein described; THENCE: S.89°54'44"E., a distance of 60.00 feet along and with the North line of the aforesaid Northeast Quarter (1/4) to a capped 5/8" Rebar found thereon for a corner; THENCE: S.00°19'24"E., at a distance of 40.00 feet pass on line a capped 5/8" Rebar found for a corner, and continuing on along and with the line common to Lot 14 I.T., a total distance of 1319.43 feet to a capped 5/8" Rebar found for a corner, same being the Southwest corner of Lot 14 I.T.; THENCE: S.89°59'36"E., a distance of 712.72 feet, along and with the South line of said Lot 14 I.T., to the Southeast corner thereof, a capped 5/8" Rebar found for same; THENCE: S.89°51'41"E., a distance of 550.69 feet along and with the South line of Lot 13 I.T., to a capped 5/8" Rebar set thereon for a corner; THENCE: S. 00°19'24"E., a distance of 1319.04 feet to a Limestone found for the East Center 1/16 corner of said Section 29, and the Southeast corner of the tract herein described; THENCE: N.89°57'32"W., a distance of 1323.41 feet along and with the South line of the aforesaid Northeast Quarter to the Southwest corner thereof, a Limestone found for same, and also being the Southwest corner of the tract herein described; THENCE: N.00°19'24"W., a distance of 2639.03 feet to the POINT OF BEGINNING and containing in all 41.909 Acres of land.

RECEIVED JUN 15 1994

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

Incomplete information will delay processing.

☐ Enclosed is $150.00. Allow two weeks for processing.

☒ Evaluation of the Individual Water System ☒ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 3301 West Davey Road, Raymond, NE

Twp 12N Range 6E Section 29 1/4 NE 1/4 Block ___ Lot 16 Addition ___

Directions to Property ___

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System ___ Year Installed 1994

	NAME	ADDRESS	PHONE
Present Owner:	John F. Sheaff	3301 West Davey Road Raymond, NE	783-3303 466-5544 (Mrs. Sheaff
Tenant/Buyer:			
Return to:	Amy L. Hurless Union Bank and Trust Company	P. O. Box 6155 Lincoln, NE 68506	483-9738 CALL WHEN O.K.

Signature of Applicant Amy L Hurless Address P. O. Box 6155 483-9738 Date 06/14/94

Union Bank and Trust Company Lincoln, NE 68506

HEALTH DEPARTMENT USE ONLY

Date Received 6/14/94 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Ron Maravart DATE: 6/20/94

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 0.3 ppm	☐ ___ ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☐
Disapproved ☐

Additional Site Visits
Date ___/___/___ by ___
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: * Sewer line covered without inspection

See Attached Letter ☐

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

Approved by Ron Maravart, RS Date 6/23/94

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.