# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 1800-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

December 29, 1981 — THIS PERMIT EXPIRES

DAVID L SCHROEDER — ISSUED TO

5101 W. CRAW LINCOLN NE — ADDRESS

T10N, R5E, Section 5, Block 2, Lot 3, Addition Pawnee Estates
LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE NEW

| 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 | 6 JY-81 | |

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
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

A

FILING FEE: $ 60.00

FILE NO. 1800-C

DATE: _____

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. 10N ; Range 5E ; Section 5 ;
   Block 2 : Lot 3 : Addition PAWNEE ESTATES
   Street Address _____

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

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

4. Distance to public sewer: _____ ft.

David L. Schroeder
Signature of Applicant (Owner or Lessee)

5101 W Graw Lincoln
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/29/81. Date Frwd. 6/29/81. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 6/29/81. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Gary M. Thurwood

3. City or County Engineer: Date Rec'd. 6/29/81. Date Frwd. 6/29/81. ACTION: Approved ☐ Disapproved ☒ Signature: Harry V. Wenell Dept

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 4/13/83 by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: CW/OI

NEED DRAWING

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. 1806-C

PROPERTY WHERE SOIL TESTED: Lot 3, Block 2 - Pawnee Estates

Location: Township 10 N ; Range 5 E of the 6 PM ; Section & ¼ Section NW¼ Section 5
Property Dimensions: 525 ft. x 280 ft. Area: 3.37 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: _____ to _____. Weather: Precip. _____ Temp. _____.

OWNER: _____

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 | | 5/27 | 12:00 | 5/27 | 4:30 | | | | 30 min | 1 5/8 | → | | |
| 2 | | 5/27 | 12:05 | 5/27 | 4:30 | | | | | 2 1/4 | | | |
| 3 | | 5/27 | 12:10 | 5/27 | 4:30 | | | | | 1 3/4" | | | |
| 4 | | 5/27 | 12:15 | 5/27 | 4:30 | | | | | 1 7/8 | | | |
| 5 | | 5/27 | 12:20 | 5/27 | 4:30 | | | | | 1 1/2 | | | |
| 6 | | 5/27 | 12:25 | 5/27 | 4:30 | | | | | 3/8 | | | |
| 7 | | 5/30 | 8:00 | 5/30 | 12:15 | | | | | 1 5/8 | | | |
| 8 | | 5/30 | 8:05 | 5/30 | 12:15 | | | | | 1 3/8 | | | |
| 9 | | 5/30 | 8:10 | 5/30 | 12:15 | | | | | 1 1/4 | → | | |
| | | | | | | | | | | | | | |

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

_____
Signature of Person Conducting Test

Address _____ Phone _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Morrill Clay Loam
Date: June 29, 1981

Approved Percolation Rate (a)
A. 20 min./inch
B. _____ min./inch
C. _____ min./inch

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 ☐

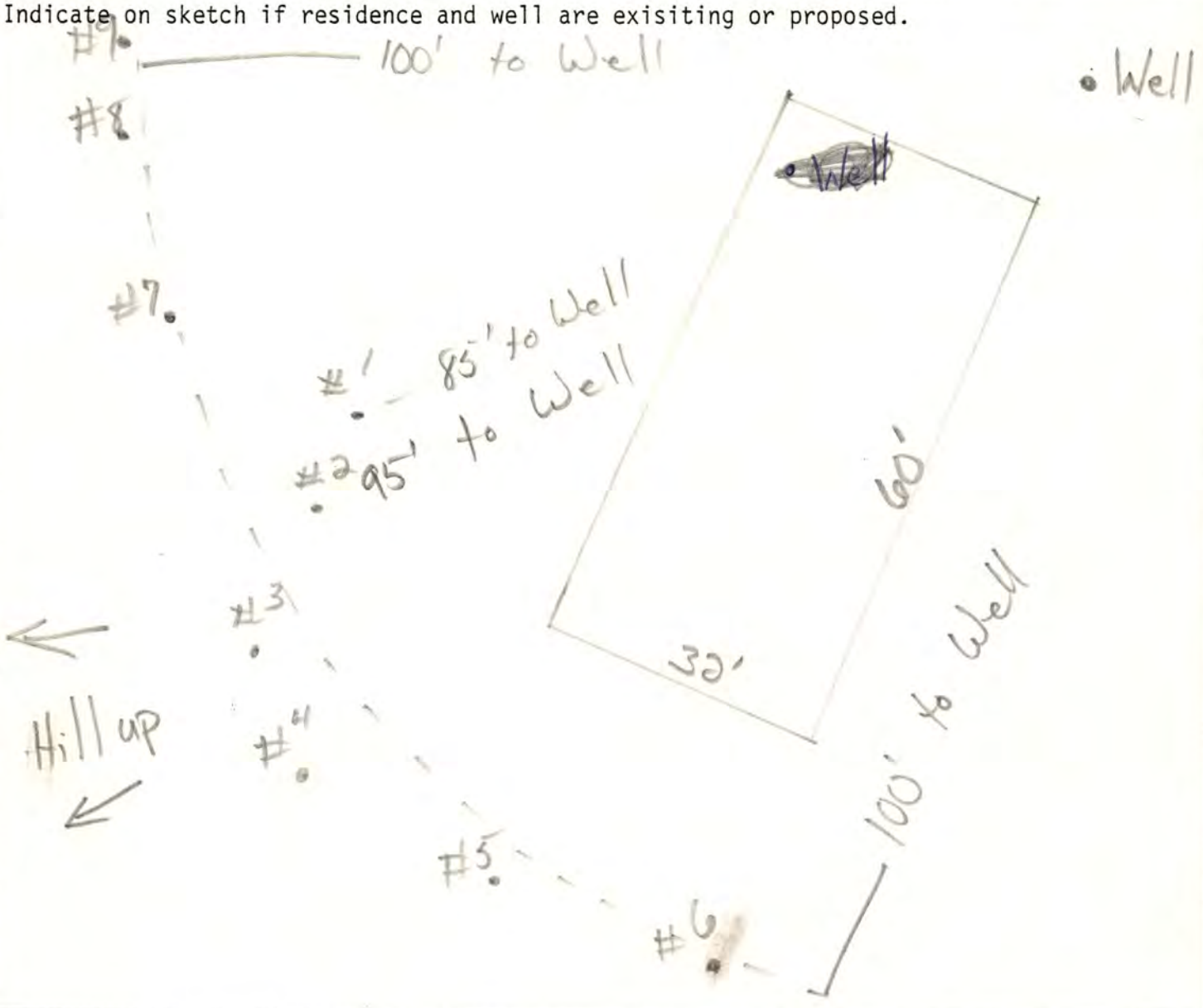
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

**C**

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

FILE NO. 15600-C

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



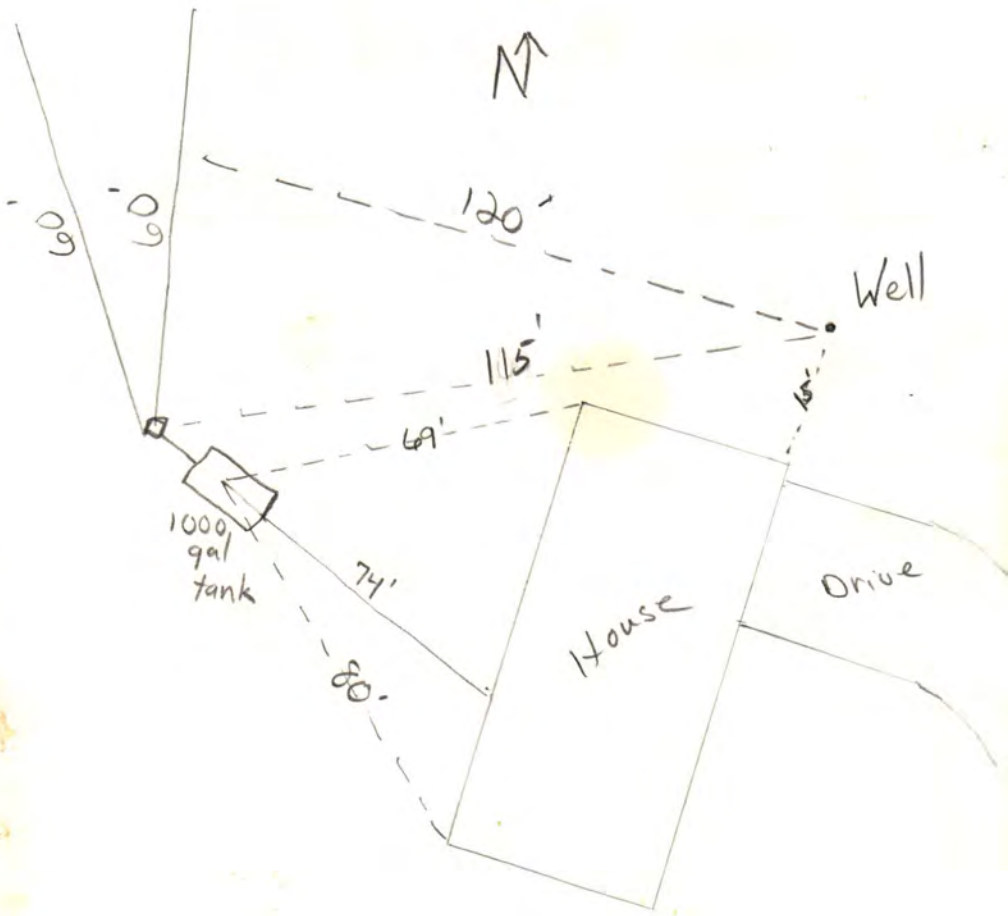

REVIEWING ACTION

Remarks: _____

Date: June 29, 1981

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 105 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 420 sq.ft.

Jerrold C. Hoos
Signature of Reviewing Official




S

# 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

RECEIVED JUN 26 2003

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 12200 Trails End Lincoln NE

Parcel ID 04 - 05 - 102 000 300 (i.e. 99-99-999-999-999)

Twp 10N Range 5E Section 5 1/4 NW 1/4 Block 3 Lot 3 Addition PAWNEE ESTATES

Directions to Property _____

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

Location of Sewage System W ½ St of Dech in Back 1111 Trsss Year Installed _____

Site Hazards (dogs, etc.) _____

| | NAME | ADDRESS | PHONE |
|---|---|---|---|
| Present Owner: | Lorille Pyle | 12200 Trails End Lincoln NE | 796-2384 |
| Tenant/Buyer: | Steven Christina McDunn | 1222 patterson Dr Lincoln Ne 68522 | |
| Return to: | Tana Watkinshaw | 2550 Superior St #150 Lincoln NE 68572 | 890-2072 ~~326-6101~~ 434-3510 (Fax) |

Signature of Applicant Tana Watkinshaw Address 2550 Superior St Lincoln NE 68512 Date 06/25/03

### HEALTH DEPARTMENT USE ONLY

**RECEIVED** Date 6/26/03 Amount $200.00 Check No. 2129 Initials TLW

**DATA ENTRY** Date ____/____/____ Case No. _____ Initials _____

**PRELIMINARY STATUS--By** Doug Smith **DATE:** 6/27/03

| WATER SYSTEM: | Approved | Disapproved |
|---|---|---|
| Construction | ☒ | ☐ |
| Bacteria | ☒ ____/ml | ☐ ____/ml |
| Nitrate | ☒ 0.6 ppm | ☐ ____ppm |

| SEWAGE SYSTEM | |
|---|---|
| Approved | ☐ |
| Provisional | ☒ |
| Disapproved | ☐ |

**Additional Site Visits**

Date ____/____/____ by ____

Date ____/____/____ by ____

Date ____/____/____ by ____

**Comments:** Records indicate system was installed in 1994. Records indicate that majority of system was covered prior to inspection. No wet spots or other other visible signs of malfunction noted. Weedy area noted near lateral field appears to be from abandoned garden. Septic tank should be pumped if it has not been checked recently. Water conservation should be employed so that capacity does not exceed current usage. See Attached Letter ☐

**FINAL STATUS**

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

Approved by Doug Smith Date 7/1/03

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

# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue  Phone (402) 474-1541  Lincoln, Nebraska 68502

## REAL ESTATE TRANSFER

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: _____

☐ Evaluation of the Sewage Disposal System  ☐ Enclosed ~~is $45.00~~ 150.00

Legal description of property: TWP. 10N ; RANGE 5E ; SECTION 5

BLOCK 2 ; LOT 3 ; ADDITION Pawnee Estates

Street Address 12200 Wabash Road

Directions to Property West "O" to NW 123; North to Fletcher; Fletcher East to NW 123rd; NW 123rd South to Wabash (Corner house on N side of road

Location of Well (See attached survey) Tap Location: Inside ☐ Outside ☒

Location of Sewage System _____ Year Installed _____

| | NAME | ADDRESS | PHONE |
|---|---|---|---|
| Present Owner: | Steve Morack | 12200 Wabash | |
| Tenant/Buyer: | Dale Pyle | 4915 N 14 68521 | 477-3842 |
| Return To: | Linda Wobbels | Woods Bros 2141 A St Lincoln NE 68510 | 432-0203 |

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

Signature of Applicant Dorene A Kyle Address 4915 N. 14 68521

---

*HEALTH DEPARTMENT USE ONLY*

Date Received 03/31/93  Received ~~$45.00~~ 150.00 Check ☒ Cash ☐ #7327

---

PRELIMINARY STATUS--DATE 4-1-93

| WATER SYSTEM: | Approved | Disapproved | SEWAGE SYSTEM: | | SITE VISIT: |
|---|---|---|---|---|---|
| Construction | ☒ 0 | ☐ | Approved: | ☐ | Date 4-1-93 by rm |
| Bacteria | ☒ | ☐ | Provisional: | ☒ | Date _____ by _____ |
| Nitrate | ☒ 0.6 | ☐ | Disapproved: | ☐ | Date _____ by _____ |

Comments: Septic system was covered before staff could inspect it, thus, a provisional approval. Recommend checking to see if septic tank needs pumping

See Attached Letter ☐

---

FINAL STATUS

WATER SYSTEM:
Approved: ☒

SEWAGE DISPOSAL SYSTEM:
Approved: ☐ Provisionsal Approval: ☒

APPROVED BY Ron Morgan R.S. DATE 4-6-93

FN 20215-1079R

259

# 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: 3-15-90 $150.00

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

Legal Description of Property: TWP. 10N; RANGE 5E; SECTION 5; BLOCK 2

LOT 3; ADDITION PRAIRIE ESTATES; Street Address 12200 TRAILSEND RED #4

Directions to Property WEST O TO 126TH, NORTH ON 126TH TO FLETCHER AVE (ABOUT 5 MILES) THEN RIGHT TURN OR EAST TO 123RD THEN SOUTH 3/4 MILE

Location of Well JUST NORTH OF GARAGE Tap Location: Inside ☐ Outside ☐

Location of Sewage System JUST NORTH OF SATELLITE DISH Year Installed 1983

| | NAME | ADDRESS | PHONE |
|---|---|---|---|
| Present Owner: | DAVID & Theresa Schroeder | ROUTE #1 BOX 21B GARLAND NE 68360 | 588-2298 |
| Tenant/Buyer: | STEVEN & michelle morack | 1301 CHAUTAUQUA AVE. LINCOLN, NE | 435-7236 |
| Return to: | SHIRLEY MOROCK | 225 N. COTNER BLVD 68505 | 467-4663 |

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

**Signature of Applicant** _____ Address _____

==========

*HEALTH DEPARTMENT USE ONLY* $150.00

Date Received _____ Received $75.00 Check ☐ Cash ☐

---

PRELIMINARY STATUS--DATE 3/23/90

| WATER SYSTEM: | Approved | Disapproved | SEWAGE SYSTEM: | | SITE VISIT: |
|---|---|---|---|---|---|
| Construction | ☒ | ☐ | Approved: | ☒ | Date 3/22/90 by J.C.H. |
| Bacteria | ☒ | ☐ | Provisional: | ☐ | Date _____ by _____ |
| Nitrate | ☒ | ☐ | Disapproved: | ☐ | Date _____ by _____ |

Comments: ELECTRICAL PLATE ON WELL-HEAD SHOULD BE REPLACED. IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY THEN IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter ☐

---

FINAL STATUS

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

APPROVED BY W.H.O. C. Hoon III R.S. DATE MARCH 29, 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

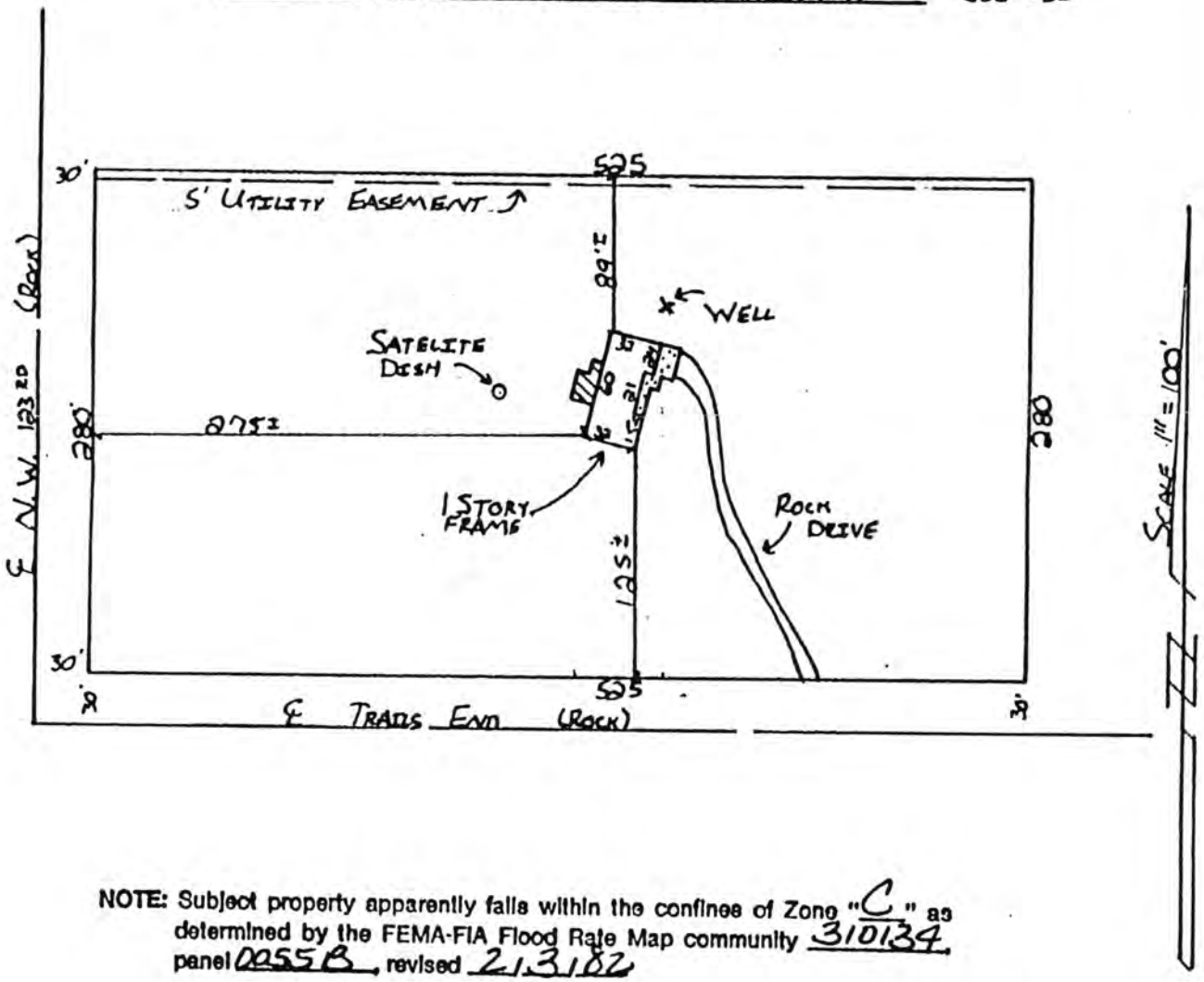
FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

## PROPERTY IMPROVEMENT LOCATION PLAT

BTC 909728

12200 TRAILS END (MALCOLM)

COL FED




NOTE: Subject property apparently falls within the confines of Zone "C" as determined by the FEMA-FIA Flood Rate Map community 310134, panel 0055B, revised 2.3.82

LEGAL DESCRIPTION: Lot 3, Block 2, Pawnee Estates, Lancaster County, Nebraska.

DATE OF CERTIFICATE

3-28-90

REVISED

NEBRASKA REGISTERED LS-381 LAND SURVEYOR JESSE W. WININGER

### SURVEYOR'S CERTIFICATE

To the Lienholders and/or the owners of the premises inspected, and to

Mr. Steve Morock and Beutler Title Company

The undersigned does hereby certify that the inspection made this day on the ground of the property legally described hereon and is correct, and that there are no visible discrepancies, conflicts shortages in area, boundary line conflicts, encroachments, overlapping of improvements, easements or rights-of-way in evidence or known to me, except as shown hereon, and that said property has access to and from a dedicated roadway. The foregoing is shown with an accuracy necessary to satisfy the needs of a lendor or insuror. This plat is not a boundary survey and is not to be used for any purpose whatsoever other than those specifically stated above.

Jesse W. Wininger


**Professional Surveyors, Inc.**

315 SO. 9TH - SUITE 10
LINCOLN, NE 68508
(402) 477-5255

JESSE W. WININGER, L.S.
PRESIDENT


PROJECT NO.

90439

123-130

729B008