LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514
PERMIT

(402) 441-8000

Permit

SEWAGE INSTALLATION

No. 96380152701

Issued 12/16/96
Expires 06/16/97
Revenue Code 18754

Establishment

RUDY AVILA
T12N R6E SEC 30
LOT 28

FEES: $150.00

TOTAL $150.00

Permittee

RUDY AVILA
17540 NW 48 ST
RAYMOND NE 68428 96380152701

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"

2873

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

A

Permit Number: 9638015270 1

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☒ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address Rudy Avila 17540 NW 48th (no rural route) City Raymond NE, Zip 68428

Legal Description 30 12N 6E 287.6
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name Rudy Avila Signature Rudy Avila

Address 17540 NW. 48th City/State/Zip Raymond Nebr.

☐ Check if owner designed system Home Phone 438-9755 Work Phone _____

C. Contractor

Name John Strohmyer Company Name _____

Address 9811 NW. 40th City/State/Zip 68524

☑ Check if contractor designed system Work Phone _____

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☑ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub YES (NO)

☐ Commercial Establishment/Other Facility Specify _____

Design flow in gallons per day _____ Type of Wastewater: ☑ Domestic ☐ Non-Domestic.

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 2832

1. **Health Department** Date rec'd 12/16/96 Date frwd 12/16/96 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12/16/96 Date frwd 12/16/96 **ACTION** ☒ Approved ☐ Disapproved Signature TK
3. **City or County Engineer** Date rec'd 12/16/96 Date frwd 12/16/96 **ACTION** ☒ Approved ☐ Disapproved Signature Doug Fellman

12-12-97 treat stream over pipe
2-23-98 Rm sewerline connected

Installation Final Written Approval

By Ron Maynard

Date 2-23-98

Business Office Use Only 3112

Date Rec'd 12/16/96
Amt Paid 150 CC
Rec'd By LC Cash/Check No. 7566

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address _____ City _____ NE, Zip _____
(no rural route)

Owner Rudy Alvis Addresss 17540 N.W 48th Raymond Nebr 68428

Soil Type (SCS): Shelby Clay Loam (SAND SYMBOL) Percolation Rate: 19 min./inch

Date of Tests 11/10/96 to 11/11/96 Weather: Precipitation wet Temperature 40°

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/in)
1	28"	11/10	10:00	11/11	10:00	11/11	2:00	6	11/11	2:30	30	1½	20
2	30"	11/10	10:02	11/11	10:00	11/11	2:02	6	11/11	2:32	30	1¾	17
3	27"	11/10	10:04	11/11	10:00	11/11	2:04	6	11/11	2:34	30	1½	20
4	30"	11/10	10:06	11/11	10:00	11/11	2:08	6	11/11	2:36	30	2	15
5	28"	11/10	10:08	11/11	10:00	11/11	2:10	6	11/11	2:38	30	1¼	24
6	29"	11/10	10:10	11/11	10:00	11/11	2:12	6	11/11	2:40	30	1¾	17
													113

Person Conducting Percolation Tests

Name: John Strohmyer
Phone: 430-6023
Address 9811 N.W 40th

Sum of Percolation Rates: 113
Average of Rates: 19
Rate Used for Calculation: 19 min/inch

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Wood R.E.H.S. Date 12/16/96

FORM 23-101 10-96

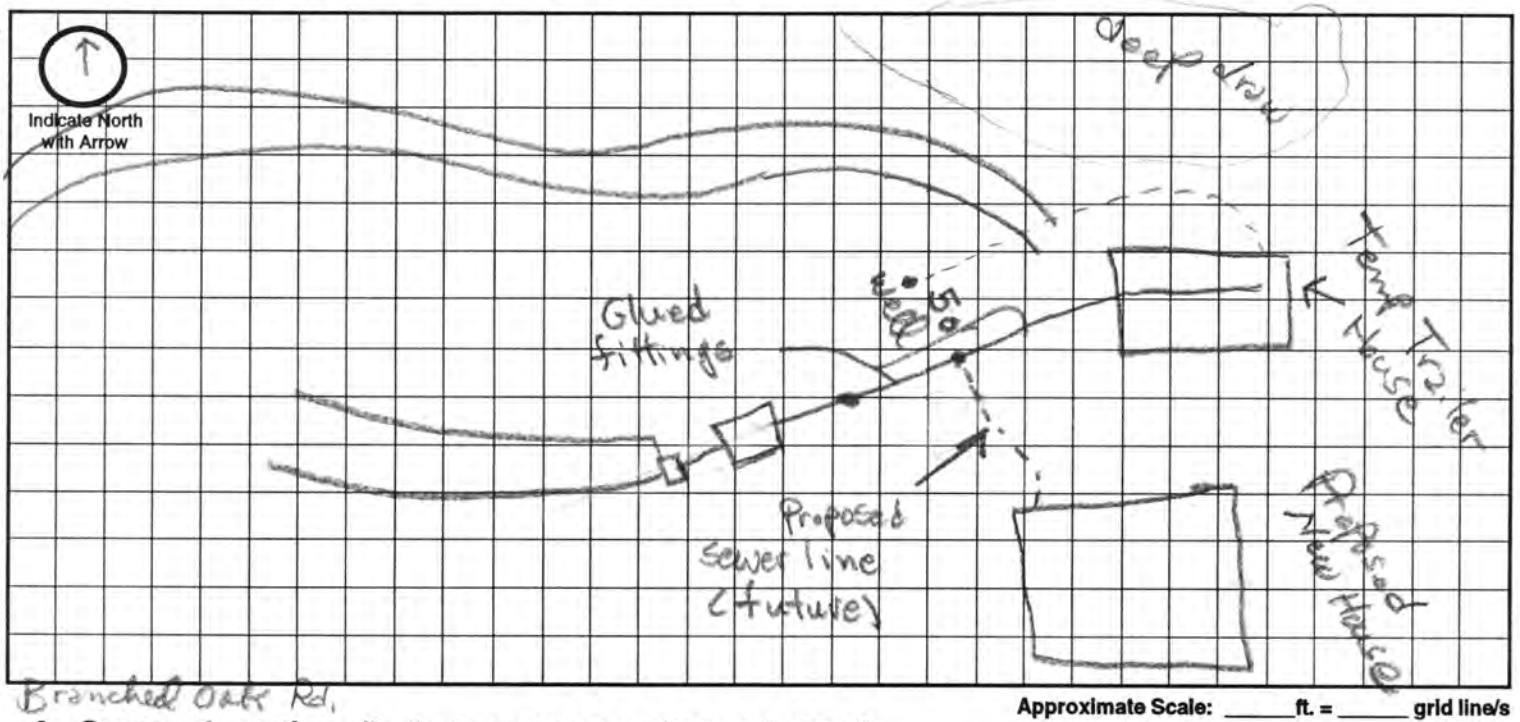
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

Sewage Disposal System
Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.



Approximate Scale: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 17540 N.W 48th City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 19 (min. per inch) Soil Type: _____ Land Slope: _____ %

Type of Absorption System: ☐ Trench ☑ Bed ☐ Other _____

Total Square Feet of Field Required: 618 sq. ft.

Type of Lateral: ☑ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: _____

Capacity of Septic Tank 1000 gals Number of Absorption Beds: 2 Number of Distribution Laterals per Bed NA

Total Length of Laterals 155' ft. Number of Trenches NA Trench Width 4'

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☑	500 ☑	50 ☑	NA ☑	25 ☑	20 ☑	15 ☑	25 ☑	☑
Field (ft)	100 ☑	500 ☑	50 ☑	4 ☑	30 ☑	20 ☑	30 ☑	40 ☑	☑
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Rudy Acila Date Dec 10, 1996

Installer Dalma Strohmyer Date Dec 10, 1996

FORM 23-102 10-96

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

D

Permit Number:

Rudy Avila

Sewage Disposal System

As Built Plans & Specifications

Date 7/16/97

System Location (Indicate correct number and street)

Address 17540 N. 48th on Mail Box City NE, Zip
(no rural route)

A. Building Sewer

1. Material: class 160 PVC
   Diameter: 4" in.
2. Distance above basement floor: in.
   or distance below basement floor: 18 in.
3. Distance between dwelling and septic tank: 94 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 3' ft.
   stream ft.
   pressure line ft.
   property line ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter in.
   Over outlet, diameter in.
   Riser: ☐ above ☐ below grade in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 3 in.
8. Distances to: Well or suction line 75' ft.
   Stream ft.
   Pressure line ft.
   Property line ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 6
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 25' ft.

D. Absorption Field

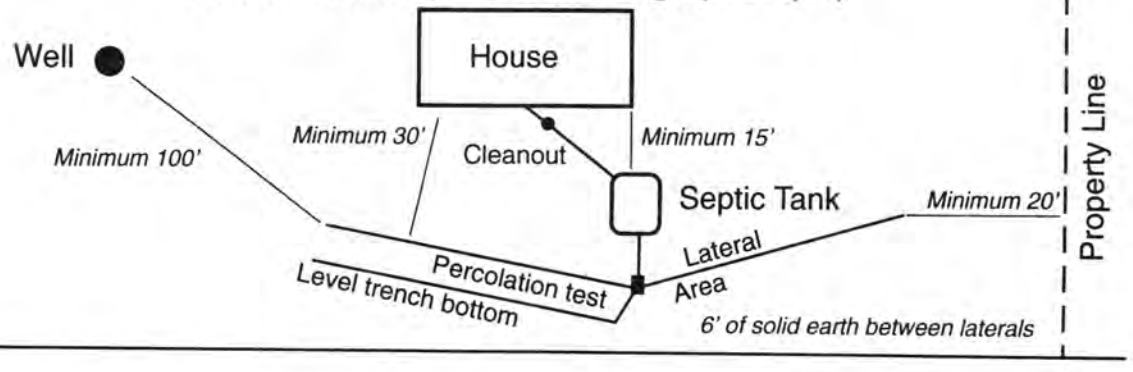
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: Infiltrator
   or perforated pipe:
   Material: ☑ fiberglass ☐ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number 2
   Length of each line: 100 ft. 100 ft.
   ft. ft., ft.
3. Trench dimensions: Width 4 ft.
   Slope in/100 ft.
   Average depth 30 in
4. Filter material: Road Gravel
   Depth of material in.
5. Distances to: Well or suction line 100 ft.
   Stream ft.
   Pressure line ft.
   Property line ft.

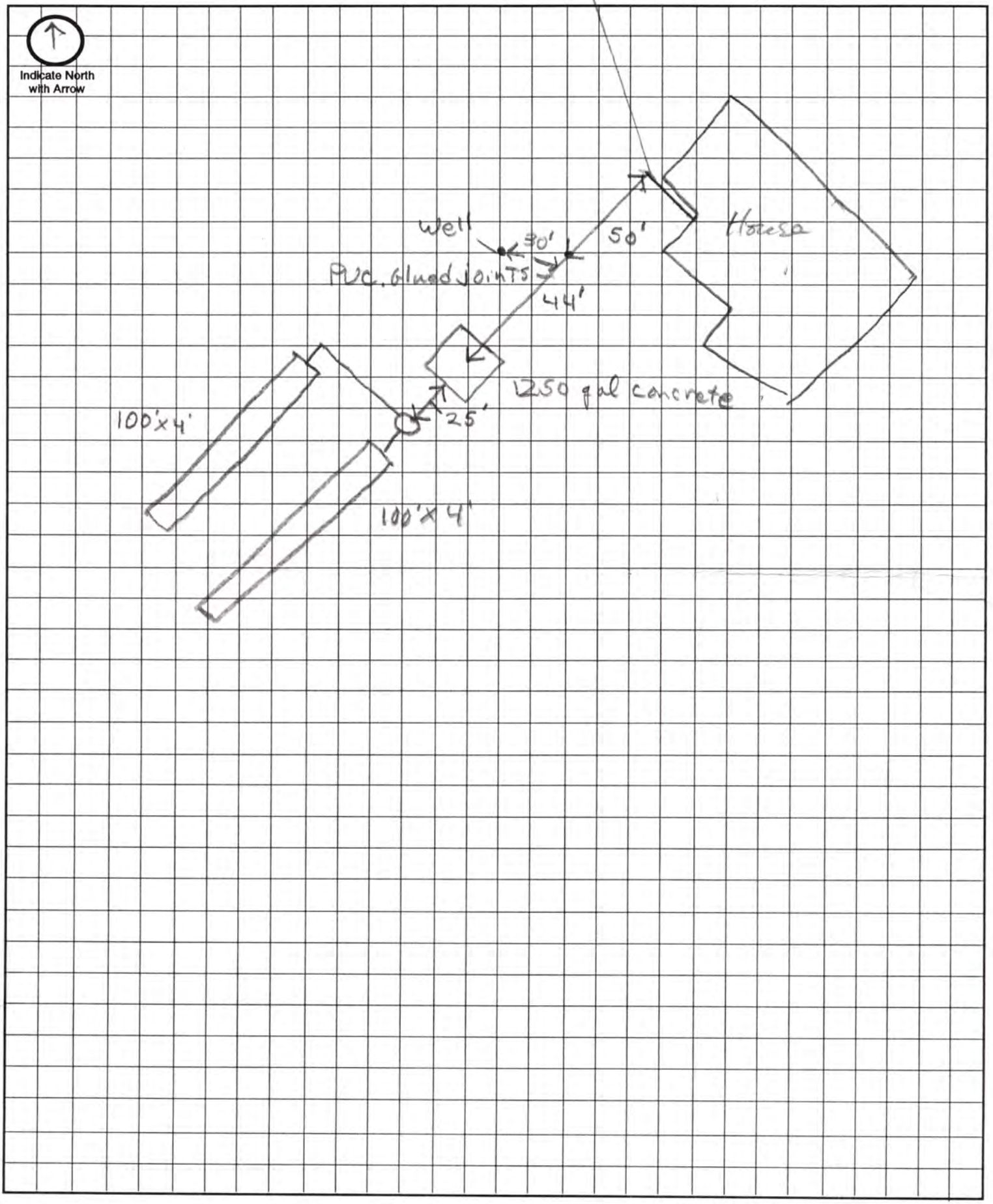
Complete "As Built" drawing on back of this form.

Indicate North with Arrow

Individual Sewage System Design (Example)



As Built Drawing



Approximate Scale: _____ft. = _____ grid line/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

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 17040 NW 48th ST Raymond NE 68428

Parcel ID ____-____-____-____-____ (i.e. 99-99-999-999-999)

Twp 12 Range 6 Section 30 1/4 ___ 1/4 ___ Block ___ Lot 28 Addition ___

Directions to Property North 1.5 miles of Raymond NE on 48th ST

Location of Well Back of House in Flower Garden ? Tap Location: Inside ☑ Outside ☐

Location of Sewage System ___ Year Installed 1997

Site Hazards (dogs, etc.) ___

	NAME	ADDRESS	PHONE
Present Owner:	Rudy Avilia	17040 NW 48th ST Raymond NE 68428	
Tenant/Buyer:	Jerry Terri Bryce	1387 County Rd 5 Colon, NE 68018	402-647-2055 cell 432-4321
Return to:	Jerry Bryce	1387 County Rd 5 Colon NE 68018	402-647-2055 (Fax)

Signature of Applicant Jerry Bryce Address 1387 County Rd 5 Colon, NE 68018 Date 1/23/2003

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 1/24/03 Amount #200.00 Check No. 3740 Initials ___

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

PRELIMINARY STATUS--By Ron Macaruso **DATE:** 1/28/03

WATER SYSTEM:	Approved	Disapproved
Construction	☑	☐
Bacteria	☑ 0 /ml	☐ ___ /ml
Nitrate	☑ 2.0 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☑
Provisional	☐
Disapproved	☐

Additional Site Visits

Date 1/31/03 by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: old homestead, dug well under windmill. (Application made with LPSNRD to abandon old well in Nov-03. Recommend checking to see if septic tank needs pumping.

See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Macaruso, RS Date 2/7/03

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.

1-31-03 P22409-18

White - Applicant after approval Yellow - Environmental Health

Revised/Reprint: 9-00