LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1202-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

April 24, 1978 — THIS PERMIT EXPIRES

H.C. Heiser — ISSUED TO

6131 Gladstone, Lincoln, NE — ADDRESS

T10N, R5E, Section 5, Block3, Lot 6, Addition Pawnee Estates — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

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 HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 1202-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 10/24/77

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 10 N ; Range 5E ; Section 5
   Block 3 ; Lot 6 ; Addition Pawnee Estates Add.
   Street Address NW 122 in NW 5-10-5

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

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

4. Distance to public sewer: _____ ft.

K C Jensen
Signature of Applicant (Owner or Lessee)

6131 Gladstone
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/24/77. Date Frwd. 10/24/77.
   ACTION: Approved ☒ Disapproved ☐
   Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 10/25/77. Date Frwd. _____.
   ACTION: Approved ☐ Disapproved ☐
   Signature: _____

3. City or County Engineer: Date Rec'd. 10/25/77. Date Frwd. 10/25/77.
   ACTION: Approved ☐ Disapproved ☒
   Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT 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: 475-6221)

FILE NO. 1202-C

DATE: 10/24/77

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 10 N ; Range 5E ; Section 5 ; Block 3 ; Lot C ; Addition Prowse Estates add.
Street Address NW 122 .

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

Other Use
Describe:

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

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

R Alfasen
Signature of Applicant (owner or lessee)

6131 Skeleton
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd:
Filing Fee: $ 30.00

2. Site Visits:
Date: by:
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 10/24/77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 3/8/78 by: Jerrold C. Hood

II

Box

FORM HD-43 (73) 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)

FILE NO. 1202-C

PROPERTY WHERE SOIL TESTED:
Location: Township 10 N : Range 5E
Section & ¼ Sect. NW
Property Dimensions: 323 ft. x 436. ft.
Area: _____ acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: H. C. Heiser
Address: 6131 Gladstone

Dates of Tests: 10-22-77 to 10-23-77 Weather: Precip. 0.4 Temp. 40's
Lot 6 Block 3 Pawnee Estates

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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	32"	10/22	1 30 PM	10/23	9 PM	10/23	9 PM	10"	11 30 PM	9 1/4	30M	2 1/4	
2										7 3/4		2	
3										8		2	
4										9		1 1/2	
5										8		2	
6										7 1/2		2	
					repeat all holes at 1030								

Robert D Johnson
Signature of Person Conducting Test
Address 2618 no 3rd
Phone 432 3595

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: Morrill Clay Loam (S.C.S.)

DATE: October 24, 1977

Approved Percolation Rate (a)
A. 15 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

N
House
25'
30'
100'
1
2
3
4
5

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. 1202-C

SPECIFICATIONS

DATE: 10/24/17

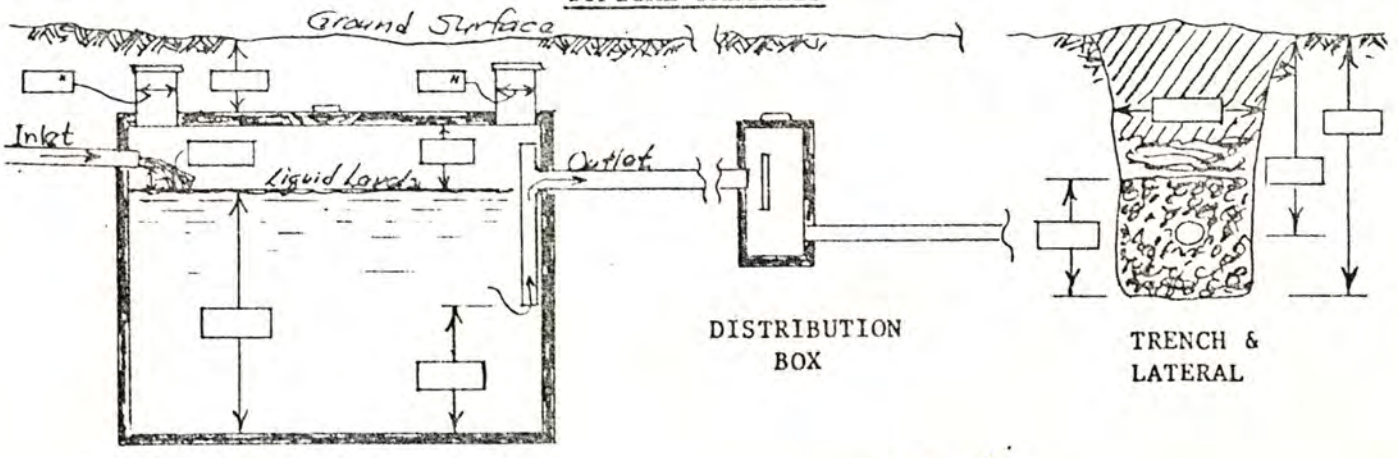
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
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 _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____)
No ☐
3. Dimension: Length ____in.; Width ___in.
Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade __in.
Number ____; Length of each line ___ft
Total length of Laterals 143 ft.;
Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions. Depth ___in.;
Width 48 in.
4. Filter Material: _____.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



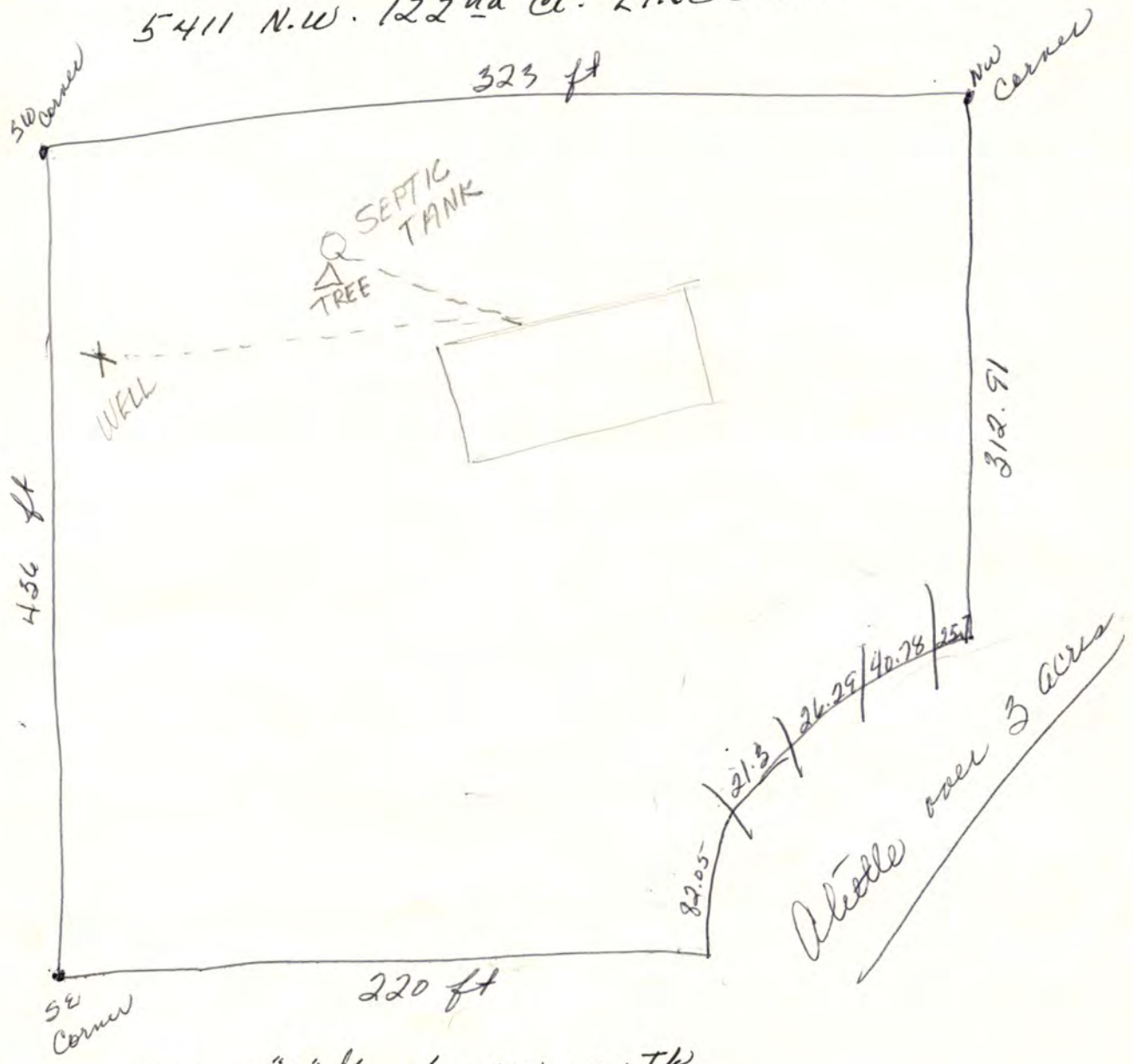
SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

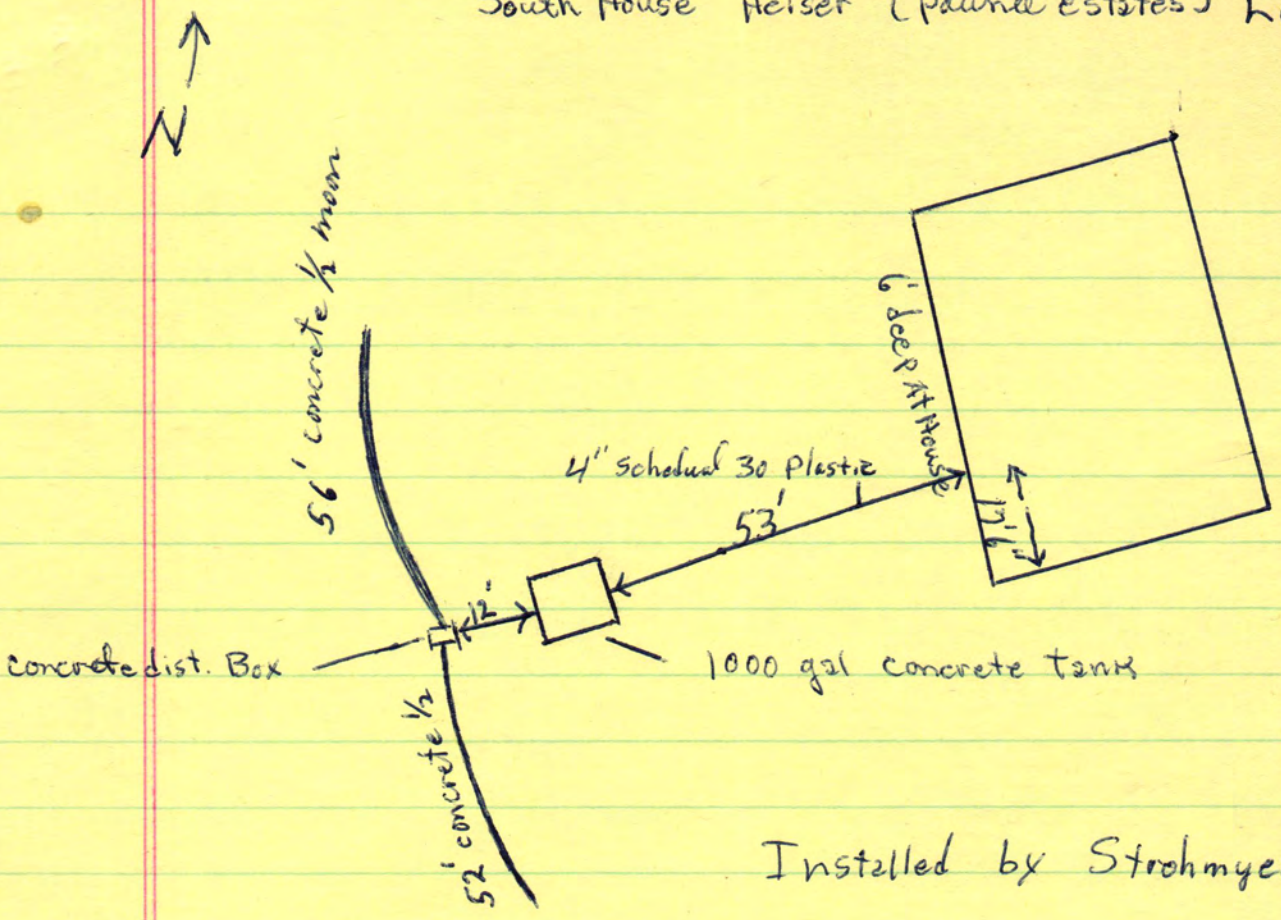
H C Jensen
Signature of Applicant

PAWNEE ESTATES
LOT 6 BLK 3
5411 N.W. 122nd Ct. LINCOLN, NE. 68524



West on "O" St. to NW 126th
north 4 miles to W. Fletcher
east 3 blocks to NW 123rd
50-½ mile to address

South House Heiser (Paunee Estates) Lot # 6



Installed by Strohmyer

9904160 02

ORIGINAL

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

Sample Data Entry 4-19-99 DZ

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 $150.00. Allow two weeks for processing. Incomplete information will delay processing.

LCR 2378

Legal Description of Property: Street Address 5411 NW 122ND CKT LINCOLN NE 68524

Twp 10N Range 7E Section 5 1/4 ___ 1/4 ___ Block 3 Lot 6 Addition PAWNEE ESTATES

Directions to Property FROM LNK W ON HWY 34 OR 6 TO NW 126TH, NW 126TH TO FLETCHER AV, FLETCHER TO NW 123RD, SO. ON 123RD FOLLOW TO DEAD END,

Location of Well SOUTH CENTRAL BOUNDARY ALONG FENCE Tap Location: Inside ☒ Outside ☒

Location of Sewage System WEST OF HOUSE IN PASTURE Year Installed UPDATE 92

	NAME	ADDRESS	PHONE
Present Owner:	WILLIAM & PATRICIA HAGER	5411 NW 122ND LINCOLN, NE 68524	462-796-2291 WK 471-7452 OR 7244
Tenant/Buyer:	Michael MaHison	6719 Morrill Ave. Lincoln NE 68507	786-6708 - WRK 464-0149 - HM
Return to:	State Title Services Attn: Am	P.O. Box 85355 Lincoln, NE 68501	434-5020

Signature of Applicant Michael MaHison by Am Durham Address 6719 Morrill Ave Lincoln NE 68507 Date 4 / 8 / 99

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 4 / 12 / 99

Initials ms

Amount 150.00 ✓

Check No. 01802 ✓

DATA ENTRY

Date ___/___/___

Case No. ___

Initials ___

PRELIMINARY STATUS--By Paul Drotzmann **DATE:** 4 / 13 / 99

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 2.5 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: LLCHD has no opinion on water quantity. LLCHD recommends septic tanks be pumped every 2-3 yrs.

See Attached Letter ☐

FINAL STATUS

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

Approved by Paul Drotzmann Date 4 / 15 / 99

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: 10-95

X closing 12-10-93 X

003

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: 2 & November 1993

☑ Evaluation of the Sewage Disposal System ☐ Enclosed is $75.00 $150.00

Legal Description of Property: TWP. 10N; RANGE 5E; SECTION 5; BLOCK 3

LOT 6; ADDITION _____; Street Address _____

Directions to Property _____

_____

Location of Well _____ Tap Location: Inside ☐ Outside ☐ ?

Location of Sewage System _____ Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:			
Tenant/Buyer:			
Return to:	ATI Title	Lincoln	

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

Signature of Applicant _____ Address _____

==========

HEALTH DEPARTMENT USE ONLY

Date Received _____ Received $75.00 Check ☐ Cash ☐

PRELIMINARY STATUS--DATE _____

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 11-29-93 by [illegible]
Bacteria	☒ 0	☐	Provisional:	☐	Date _____ by _____
Nitrate	☒ 1.2 ppm	☐	Disapproved:	☐	Date _____ by _____

Comments: Recommend checking to see if septic tank needs pumping, and not allowing livestock over the subsurface lateral field

_____ See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ron Mangum RS DATE 12-6-93

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

183

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

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

Enclosed is $45.00 Fee ☒

DATE: October 30, 1978

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☒ Evaluation of the Individual Water Supply

☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 10N ; Range 5E ; Section 5 ;
Block 3 ; Lot 6 ; Addition Proposed Pawnee Estates .
Street Address 5411 NW 122nd., Lancaster County, NE.
Directions on how to get to property 1½ miles West of NW 112th. & W. Fletcher
.
Location of well Close to clothes line .
Where is tap: Inside ☐ Outside ☒ .

	NAME	ADDRESS	PHONE
Present Owner:	Aubrey Box	5411 NW 122nd.	796-2294
Tenant:			
Lending Agency:	Western Securities	620 North 48th.	467-4605

(Do not write below double lines)

Health Department: Date Received 11/16/78
Received $45.00 Check ☒ Cash ☐
Site Visits: Date 11-21-78 by JM
Date _____ by _____
Date _____ by _____

Peggy S. Krehbiel
Signature of Applicant

3935 Normal Blvd
Address

PRELIMINARY STATUS -- DATE 11-21-78

Water System:
Approved ☒ Disapproved ☐

Sewage Disposal System:
Approved ☒ Provisional Approval ☐
Disapproved ☐

Corrections Required or Reasons for Disapproval _____
.

☐ See Attached Letter.

FINAL APPROVAL -- DATE 11-22-78

Water System ☒ . Sewage Disposal System ☒ . BY Ronald Mayer

Form Number 20215-0878