LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1046-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF PERMIT

November 4, 1977
THIS PERMIT EXPIRES

Kurt Robidoux
ISSUED TO

3029 North 56 St., Lincoln, NE 68504
ADDRESS

T12N, R6E, Section 25
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

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. 1046-C

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

DATE: 5-3-77

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

SEE ATTACHED

1. Legal description of property: Twp. 12N ; Range 6E ; Section 25
Block _____; Lot _____; Addition _____
Street Address _____
6.34 acre

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.

Kurt Rabideaux
Signature of Applicant (Owner or Lessee)

3029 North 56th
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/3/77 . Date Frwd. 5/3/77 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 5-3-77 . Date Frwd. _____ . ACTION: Approved ☐ Disapproved ☒ Signature: Tom Baasch

3. City or County Engineer: Date Rec'd. 6/4/77 . Date Frwd. 5/4/77 . ACTION: Approved ☐ Disapproved ☒ Signature: Henry Krafft

REMARKS OR REASONS FOR DISAPPROVAL Sewer

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

171 Have easement BP 702

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. 1046-C

DATE: 5-3-77

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. SEE ATTACHED

1. Legal description of property: Twp. 12N ; Range 6E ; Section 25 ; Block ; Lot ; Addition .
Street Address .

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

Kurt Pedersen
Signature of Applicant (owner or lessee)

3029 North 56
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 10-12-77 by: jw
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 5/3/77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10-18-77 by: James Neverka

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. 1046-C

PROPERTY WHERE SOIL TESTED:
Location: Township _____ : Range _____
Section & ¼ Sect. _____
Property Dimensions: _____ ft. x _____ ft.
Area: 6 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: _____
Address: _____

Dates of Tests: 4-8-77 to 4-9-77. Weather: Precip. 12" Temp. 75

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	3'	4-8-77	9:45 AM	4-8-77	1:45 PM	4-9-77	1:45 PM	6"	4:45 PM	5½"	30 Min	¾"	
2	3	4-8-77	" AM	"	"	"	"	6"	"	4¼"	"	1¾"	
3	3'	4-8-77	"	"	"	"	"	"	"	4"	"	2"	
4	3'	4-8-77	"	"	"	"	"	"	"	4¼	"	1¾"	
5	3'	4-8-77	"	"	"	"	"	"	"	4"	"	2"	
6	3'	4-8-77	"	"	"	"	"	"	"	4¼	"	1¾"	

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

Kurt Robertson
Signature of Person Conducting Test

Address 3024 North 56
Phone 466-9232

(Do not write below this line)

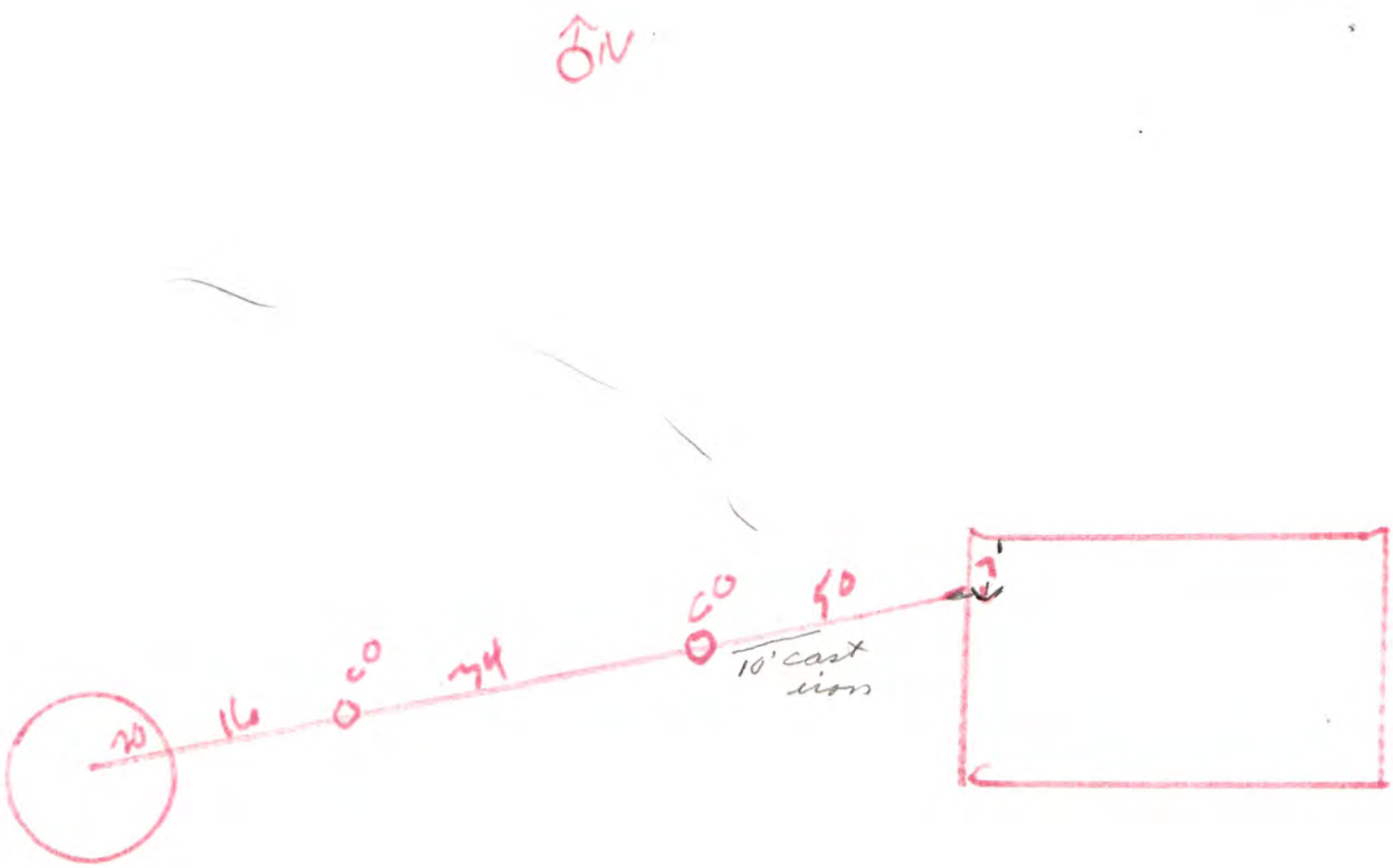
REVIEWING ACTION

REMARKS: Sharpsburg Silty Clay Loam or Morrill Clay Loam (Location not exactly known)

DATE: May 3, 1977

Approved Percolation Rate (a)
A. 18 min./inch
B. _____ min./inch
C. _____ min./inch

Jerold C. Hood
Signature of Reviewing Official


N
20
16
44
60
40
10' cast iron

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. 1046-C

SPECIFICATIONS

DATE: _____

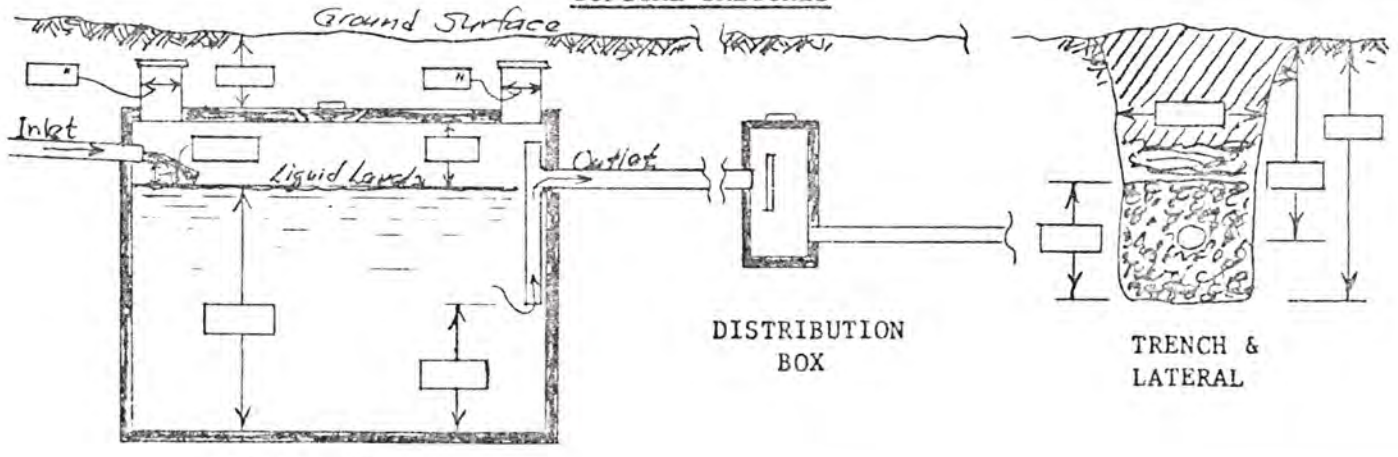
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

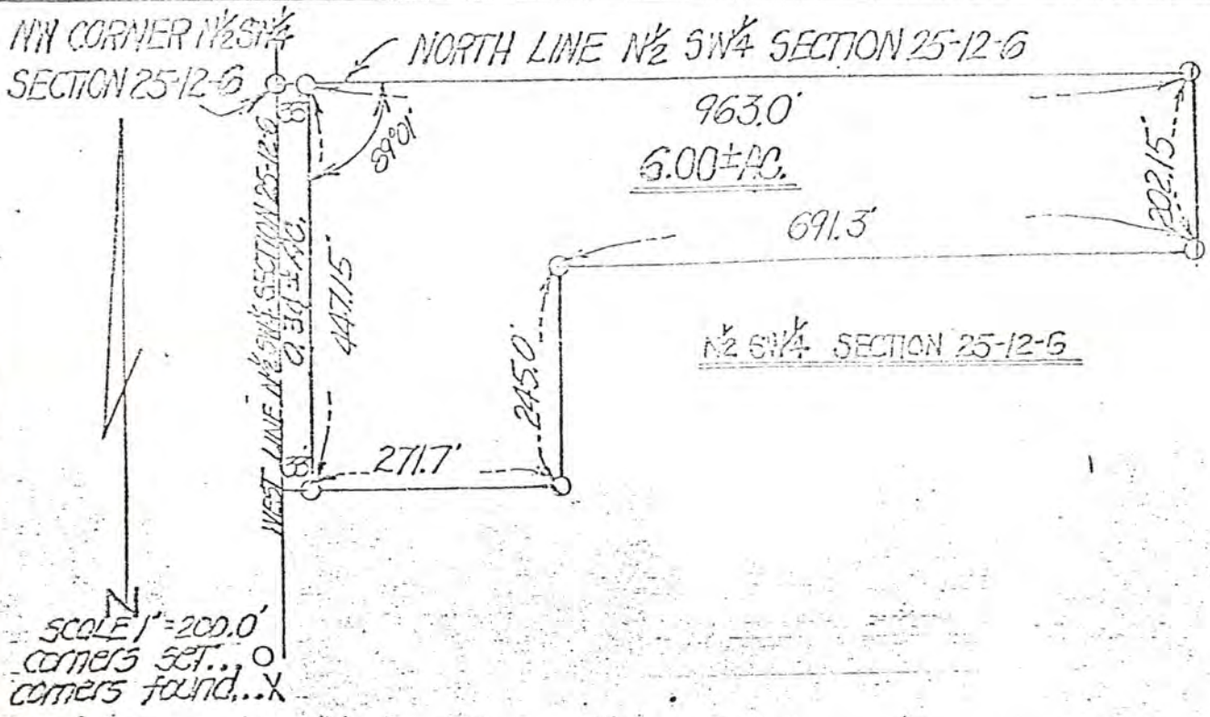
C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___in.
Number ____; Length of each line ___ft
Total length of Laterals 152 of 202 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 to 36 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



_____
Signature of Applicant



I hereby certify that I have surveyed and staked out the following described tract of land:

Beginning at the northwest corner of the N½ SW¼ of Section 25, Township 12 North, Range 6 East of the 6th Principal Meridian, Lancaster County, Nebraska; thence easterly, along the north line of the N½ SW¼ of said Section 25, a distance of 996.0 feet; thence southerly, parallel with the west line of the N½ SW¼ of said Section 25, a distance of 202.15 feet; thence westerly, parallel with the north line of the N½ SW¼, of said Section 25, a distance of 691.3 feet, to a point 304.7 feet easterly from the west line of the N½ SW¼ of said Section 25; thence southerly, parallel with and 304.7 feet easterly from the west line of the N½ SW¼ of said Section 25, a distance of 245.0 feet; thence westerly, parallel with the north line of the N½ SW¼ of said Section 25, a distance of 304.7 feet, to a point on the west line of the N½ SW¼ of said Section 25; thence northerly, along the west line of the N½ SW¼, of said Section 25, a distance of 447.15 feet, more or less, to the point of beginning.

Containing 6.34 Acres, more or less of which 0.34 acres, is used as a public road.

Corners are marked as shown on the sketch and all dimensions shown are in feet or decimals of a foot.

Signed this 4th day of January, 1977.

REGISTERED LAND SURVEYOR
HENRY G. GRAFF
L.S. - 170
NEBRASKA

Henry Graff
Deputy County Surveyor
Lancaster County, Nebraska

F.B. C3 Pg. 19

21091K

002

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-780

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / L

This form must be completed and returned to request

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: MARCH 19, 1992

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

Legal Description of Property: TWP. T-12-N; RANGE R-6-E; SECTION 25; BLOCK ____

LOT 9-10; ADDITION _____; Street Address _____

Directions to Property North 14th Street between Davey Rd. + Branched Oak Rd. E. Side of Rd. Lot 9 SW EX S162' W271.1' & Portion of Lot 10 S 25-12-6

Location of Well NORTH of House Tap Location: Inside ☐ Outside ☒

Location of Sewage System West of House Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	GARY L. BERGMAN	Rt. 1 Box 162C Raymond	785-3200
~~Tenant/Buyer~~:	SHARON L. BERGMAN		
Return to:			

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

Signature of Applicant Gary L Bergman Address Rt. 1 Bx 162C Raymond, Ne

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HEALTH DEPARTMENT USE ONLY

Date Received 3-19-92 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 3-19-92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 3-19-92 by RM
Bacteria	☒	☐	Provisional:	☐	Date _____ by ____
Nitrate	☒ 1.2 ppm Nitrate	☐	Disapproved:	☐	Date _____ by ____

Comments: _____

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ron Magnuson, RS DATE 3-23-92

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