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. 513-C

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

DATE: 8/16/74

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. 12 N ; Range 5E of 6PM; Section South East 13 Lot 8 Iten 4
Block _____; Lot _____; Addition _____
Street Address _____

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.

Harold Rognier
Signature of Applicant (Owner or Lessee)

Dary Box 13
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 7-5-74 . Date Frwd. 9-5-74 . ACTION: Approved ☐ ☒ Disapproved ☐ Signature: James Weveka

2. Supt. Bldg. Insp.: Date Rec'd. 8-5-74 . Date Frwd. 8-5-74 . ACTION: Approved ☐ ☐ Disapproved ☐ Signature: W W

3. City or County Engineer : Date Rec'd. 9-5-74 . Date Frwd. 9-5-74 . ACTION: Approved ☐ ☑ Disapproved ☐ Signature: Walter Hoppe

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. 513-C

DATE: 8/16/74

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. 12 N ; Range 5E of 6PM Section S.E Sect. 13 ; Block ; Lot ; Addition .
   Street Address .

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).

Harold Reynier
Signature of Applicant (owner or lessee)

Davey Rt 13
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; 9-5-74
   Filing Fee: $30.00

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

3. Date: Approved ☒; Disapproved ☐
   by: James Wenelka

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: by:

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 475-6221)

FILE NO. 513-C

PROPERTY WHERE SOIL TESTED:
Location: Township 12 N; Range 5 E of 6pm
Section & ¼ Sect. S.E Sect. 13
Property Dimensions: ___ ft. x ___ ft.
Area: 7 acres. (Attach sketch of property showing hole location).

Owner: Harold Regnier
Address Davy Box 13

Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☑
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☑

Dates of Tests: 8/16/74 to 8/17/74. Weather: Precip. 0 Temp. 75F

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				
Hole 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	36"	8/16/74	8 P.M.	8/17/74	7 A.M.						11 hr.	6 in.	½ hr. Tedrop 6"
~~2~~	~~36"~~	~~8/16/74~~	~~8 P.M.~~	~~8/17/74~~	~~7 A.M.~~								
2	36"	8/16/74	8 P.M.	8/17/74	7 A.M.						11 hr.	6 in	3 inches in 10 min.
3	36"	8/16/74	8 P.M.	8/17/74	7 A.M.						11 hr.	6 in	6 inches in ½ hr.
4	36"	8/16/74	8 P.M.	8/17/74	7 A.M.						11 hr.	6 in	3 inches in 10 min.

Harold Regnier
Signature of Person Conducting Test

Address Davy Box
Phone: 783-2523

Sum of Percolation Rates ___
Average of Rates: 6 inches in 25 min.
Mean of Rates: ___

(Do not write below this line)

REVIEWING ACTION

REMARKS: ___

Approved Percolation Rate(s)
A. ___ min./inch
B. ___ min./inch
C. ___ min./inch

DATE: ___

Signature of Reviewing Official

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. 513-C

SPECIFICATIONS

DATE: 8-16-74

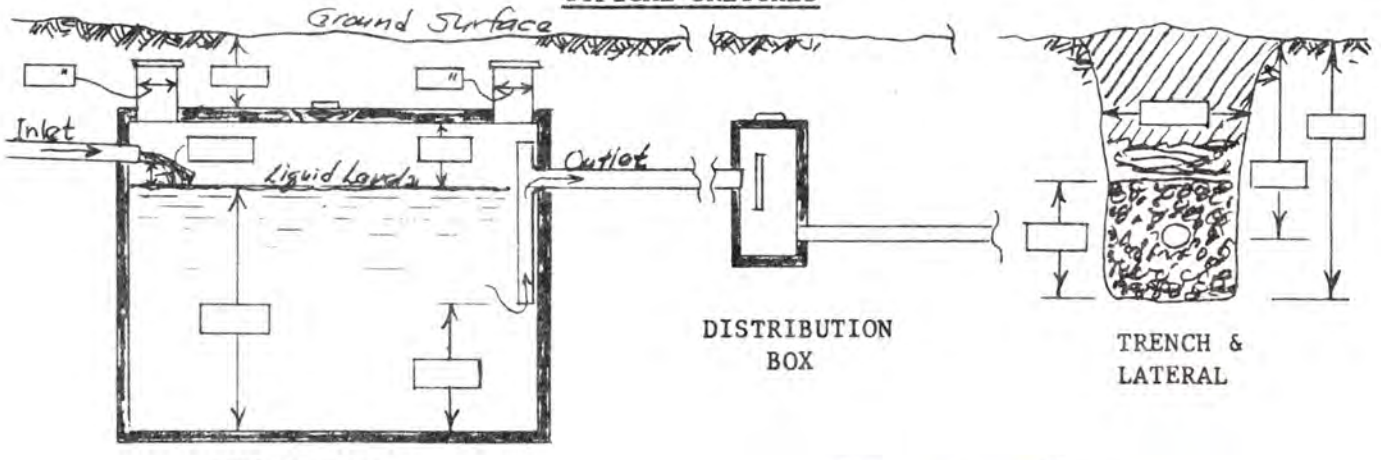
A. BUILDING SEWER:
1. Material Concrete (1000 gallon Tank); Diameter ____ in.
2. Distance above basement floor [illegible] in.; or below basement floor [illegible] 48"
3. Distance between dwelling and septic tank 30 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 250 ft.;
Stream 250 ft.; Pressure Line ____ ft.;
Property Line 500 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 61 in.
3. Factory Built: Yes ☑ (Company Pre Cast Step Co.)
No ☐
4. Manholes: Over Inlet; diam. 30 in.
Over Outlet; diam. 30 in.
Below Grade 5 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: HALF ROUND
2. Lateral Lines: Depth below grade ___ in.
Number 2; Length of each line ___ ft
Total length of Laterals 172 ft.;
Slope 4 in/100 ft. Diameter of pipe ____ in.; Shape O
Material: concrete ☐; fiber asbestos ☐; clay ☐; other ____
Distance between lateral lines ____ ft.
3. Trench Dimensions: Depth ___ in.;
Width 48 in.
4. Filter Material: GRAVEL.
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

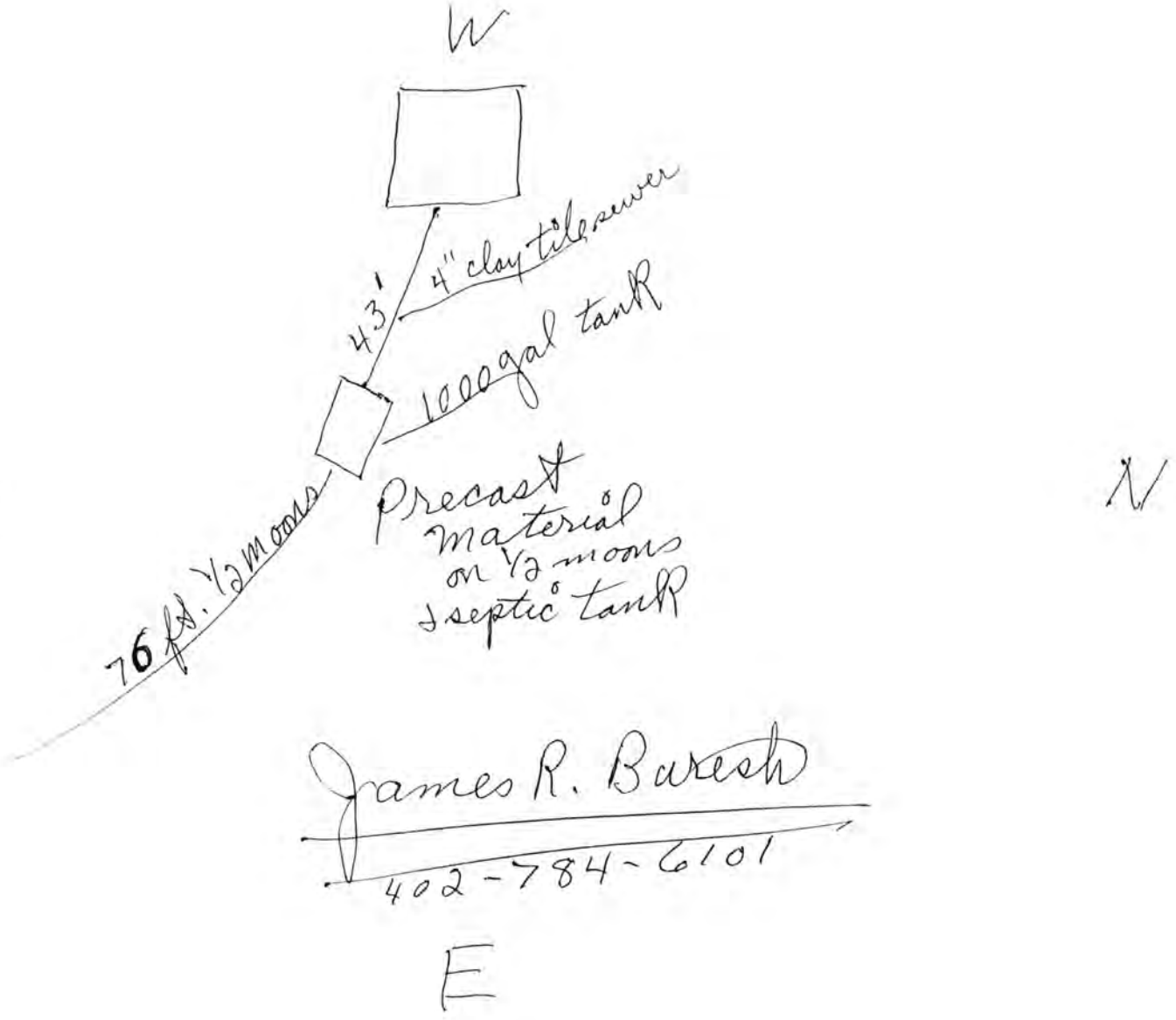
TYPICAL SKETCHES



SEPTIC TANK

Harold Regnier
Signature of Applicant

Septic System Drawing for Harold Regnier



James R. Baresh

402-784-6101

3760 W.

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

April 1 closing

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

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

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

Legal Description of Property: Street Address 6200 W Rock Creek Rd. Raymond
Twp 12 Range 5 Section 13 1/4 SW 1/4 Block ___ Lot 5 Addition ___
Directions to Property Hwy 77 one mile south of Raymond, Nebraska

Location of Well behind house Tap Location: Inside ☒ Outside ☐
Location of Sewage System 10 ft from the NW corner of the garden (Board covering now) Year Installed 1975

	NAME	ADDRESS	PHONE
Present Owner:	Harold Regnier	Rt. 1 Box 13B Raymond NE 68428	402/783-2051
Tenant/Buyer:	Clair E. Hoos	HC 62 Box 9 Hoyer Creek NE 69032	308/236-3469
Return to:	Sheryl Oldham FAX 434-3736	Capitol Title P.O. Box 81747 Lincoln NE 68501	402/434-3737

Signature of Applicant Sheryl Oldham Address Same as above Date 3/21/96
Capitol Title

HEALTH DEPARTMENT USE ONLY

Date Received 03/22/96 Received $150.00 Check ☒ Cash ☐ #0275

PRELIMINARY STATUS--By Ron Marquart **DATE:** 3/26/96

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒ corrected	☒ well pit	Approved ☐	Date 4/2/96 by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☒	Date ___/___/___ by ___
Nitrate	☒ 38 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

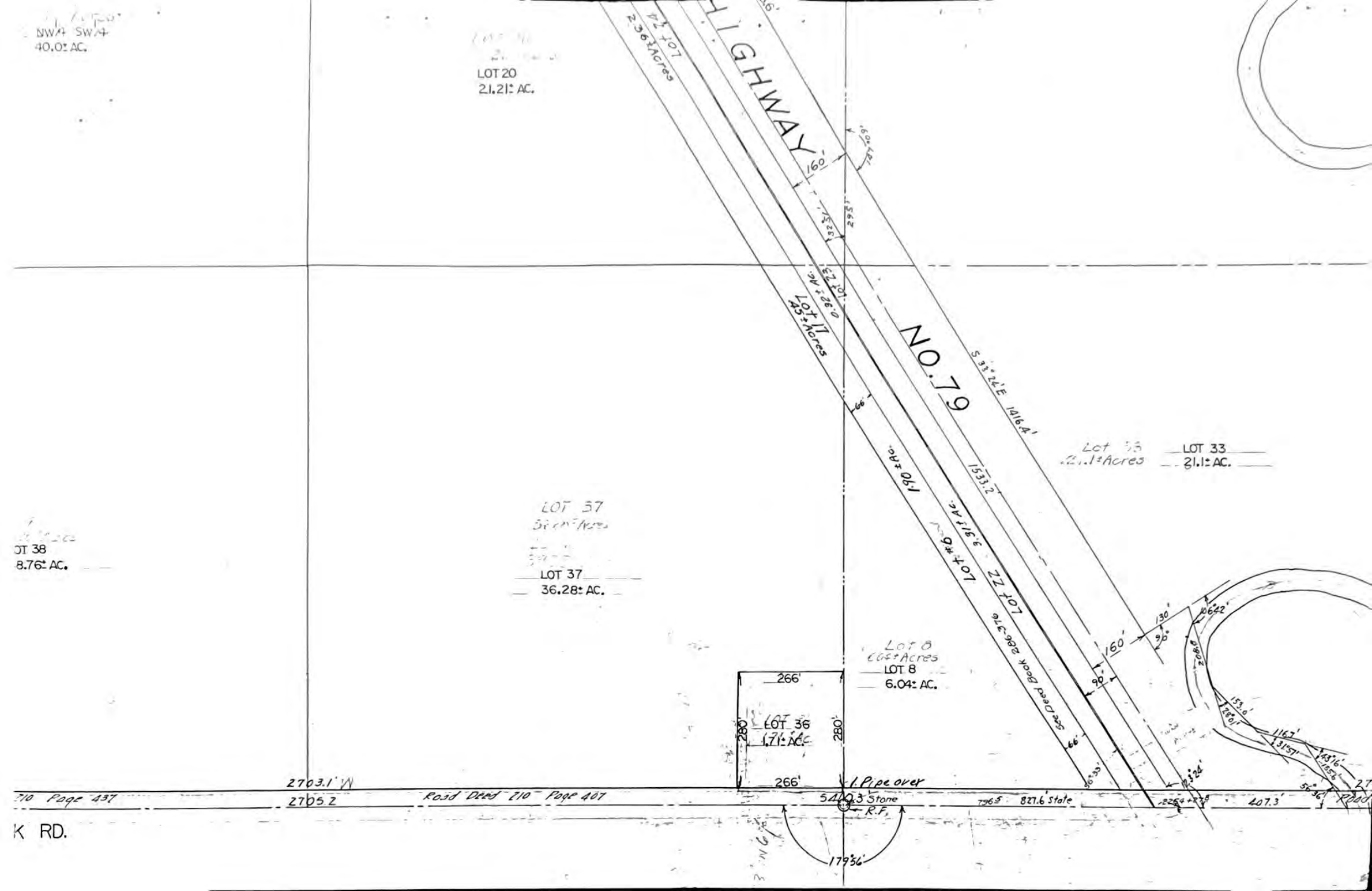
Comments: Installation of this septic system predates County regulations. There is no record of a permit or inspection of this septic system. Thus, a provisional approval. There was no visible malfunction at the time of inspection. Recommend checking to see if septic tank needs pumping. See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Marquart, RS Date 4/5/96

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.


NW¼ SW¼
40.0± AC.
LOT 20
21.21± AC.
HIGHWAY NO. 79
160'
2.36± Acres
LOT 17
43± Acres
190'±
S 33°24'E 1416.4'
1533.2
LOT 33
21.1± AC.
LOT 37
36.28± AC.
LOT 38
8.76± AC.
LOT 8
6.04± AC.
LOT 36
1.71± AC.
266'
280'
90°
130'
160'
2703.1' M
2705.2
Road Deed 210 Page 407
1 Pipe over
Stone
R.F.
179°36'
827.6' State
407.3'
K RD.