LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 649-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

January 7, 1976 — THIS PERMIT EXPIRES

Gary Lee, RFD 6, Lincoln — ISSUED TO — ADDRESS

T1ON; R5E; Sec. 32 NW¼ Lagoon — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

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. 649-C

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

DATE: 6-25-75

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 5 E ; Section 32 NW¼
   Block ____; Lot 17 I.T. ; 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 ☒ Lagoon

4. Distance to public sewer: ____ ft.

Gary Lee
Signature of Applicant (Owner or Lessee)

RFD 6, Lincoln, NE 68502
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 7-7-75 . Date Frwd. 7-7-75 . ACTION: Approved ☐ Disapproved ☒ Signature: James Neverka
2. Supt. Bldg. Insp.: Date Rec'd. 7-7-75 . Date Frwd. ____ . ACTION: Approved ☐ Disapproved ☐ Signature: ____
3. City or County Engineer: Date Rec'd. 7/7/75 . Date Frwd. 7-8-75 . ACTION: Approved ☐ Disapproved ☒ Signature: Walter R. Wenstrand

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. 649-C

DATE: 6-25-75

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 5 E ; Section 32 NW¼ ; 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 ☒ Lagoon

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).

Gary Lee
Signature of Applicant (owner or lessee)

RFD 6, Lincoln, NE 68502
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; 7-7-75
   Filing Fee: $ 30.00

2. Site Visits:
   Date: Sept 26-75 by:
   Date: Oct-16-75 by:
   Date: by:

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

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: Oct-16-75 by: Jim Weverka by Ray Hoyt

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. 649-C

PROPERTY WHERE SOIL TESTED:
Location: Township 10 N ; Range 5E
Section & ¼ Sect. 32 - NW ¼
Property Dimensions: 225 ft. x 971 ft.
Area: 5.13 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☒; Clay Loam ☐; Sandy Clay ☐

Owner: GARY E. LEE AND CHERYL K. LEE
Address RFD 6, LINCOLN, NE 68502

Dates of Tests: 7-4-75 to 7-5-75. Weather: Precip. 0 Temp. 100° F.

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	33	7/4	3:00	7/5	4:30	7/5	8:30	28"	9:00	28½"	30	½"	
2	35	7/4	3:00	7/5	4:30	7/5	8:30	30½"	9:00	31⅛"	30	⅝"	
3	36	7/4	3:00	7/5	4:30	7/5	8:30	31¼"	9:00	31¾"	30	½"	
4	32	7/4	3:00	7/5	4:30	7/5	8:30	26¼"	9:00	26⅞"	30	⅝"	
5	33	7/4	3:00	7/5	4:30	7/5	8:30	27"	9:00	27⅜"	30	⅜"	
6	34	7/4	3:00	7/5	4:30	7/5	8:30	28"	9:00	28½"	30	½"	

Sum of Percolation Rates
Average of Rates: .52/30'
Mean of Rates:

Gary Lee
Signature of Person Conducting Test

Address RFD 6, LINCOLN, NE 68502
Phone: 435-1425

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

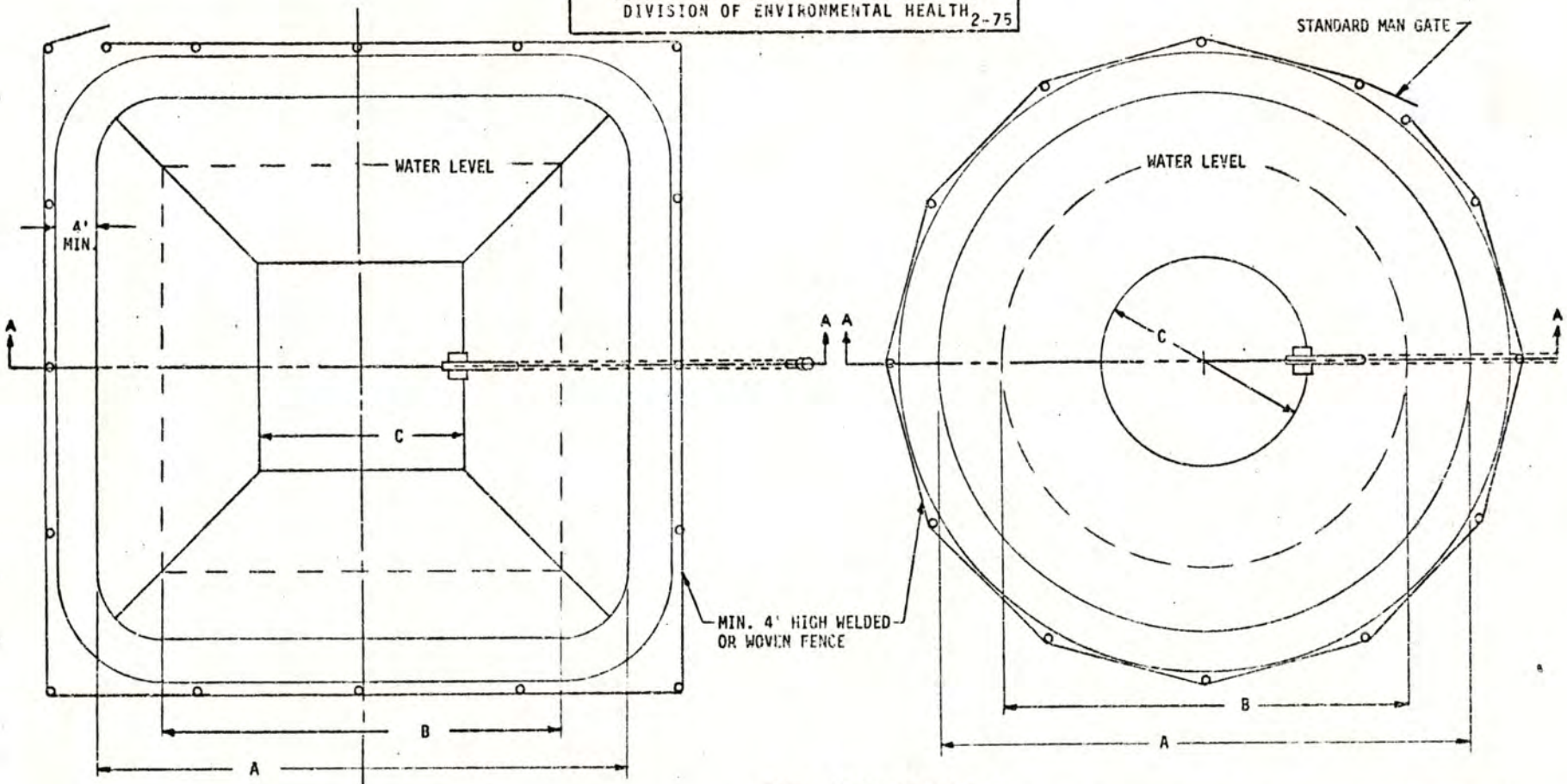
Approved Percolation Rate(s)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

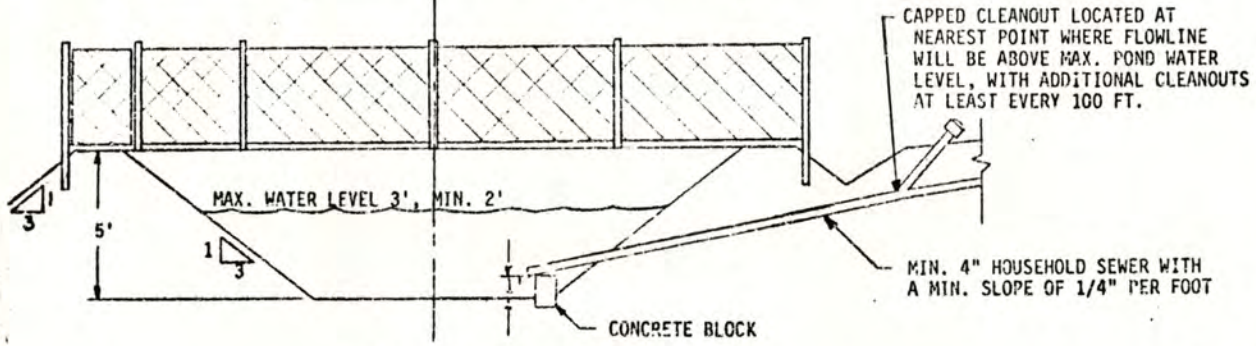
DATE: _____

James Weverka
Signature of Reviewing Official

WASTE STABILIZATION POND

LINCOLN-LANCASTER CO. HEALTH DEPT.
DIVISION OF ENVIRONMENTAL HEALTH 2-75





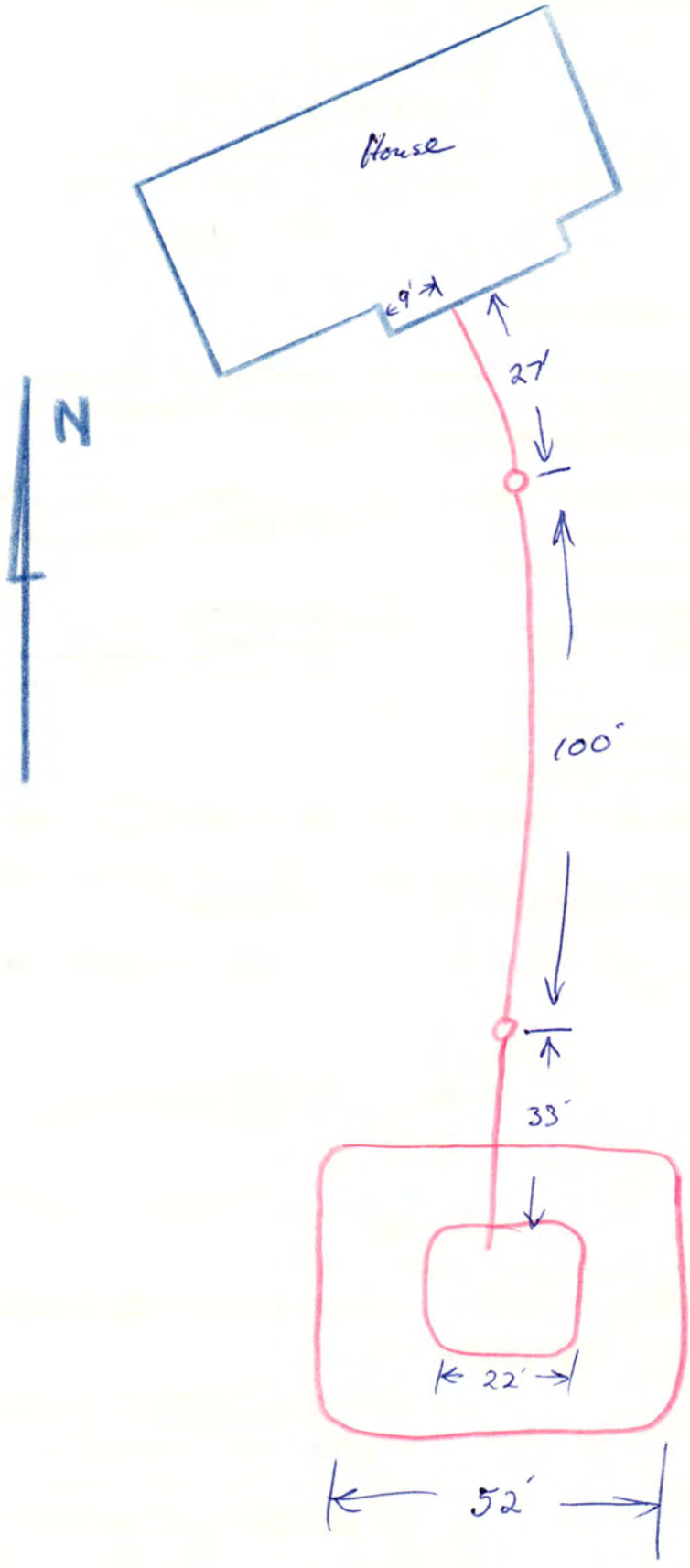
SECTION VIEW A-A
(APPLICABLE TO BOTH DESIGNS)

NUMBER OF BEDROOMS IN THE HOUSE	MINIMUM LAGOON DIMENSIONS (FEET)					
	SQUARE			ROUND		
	A	B	C	A	B	C
2-3	49	37	19	52	40	22
4	55	43	25	57	48	30

ADDITIONAL INFORMATION ON BACK

SIGNATURE OF APPLICANT Gary Lee

HD-46(75)



oct-16-75
mm.

Survey Record

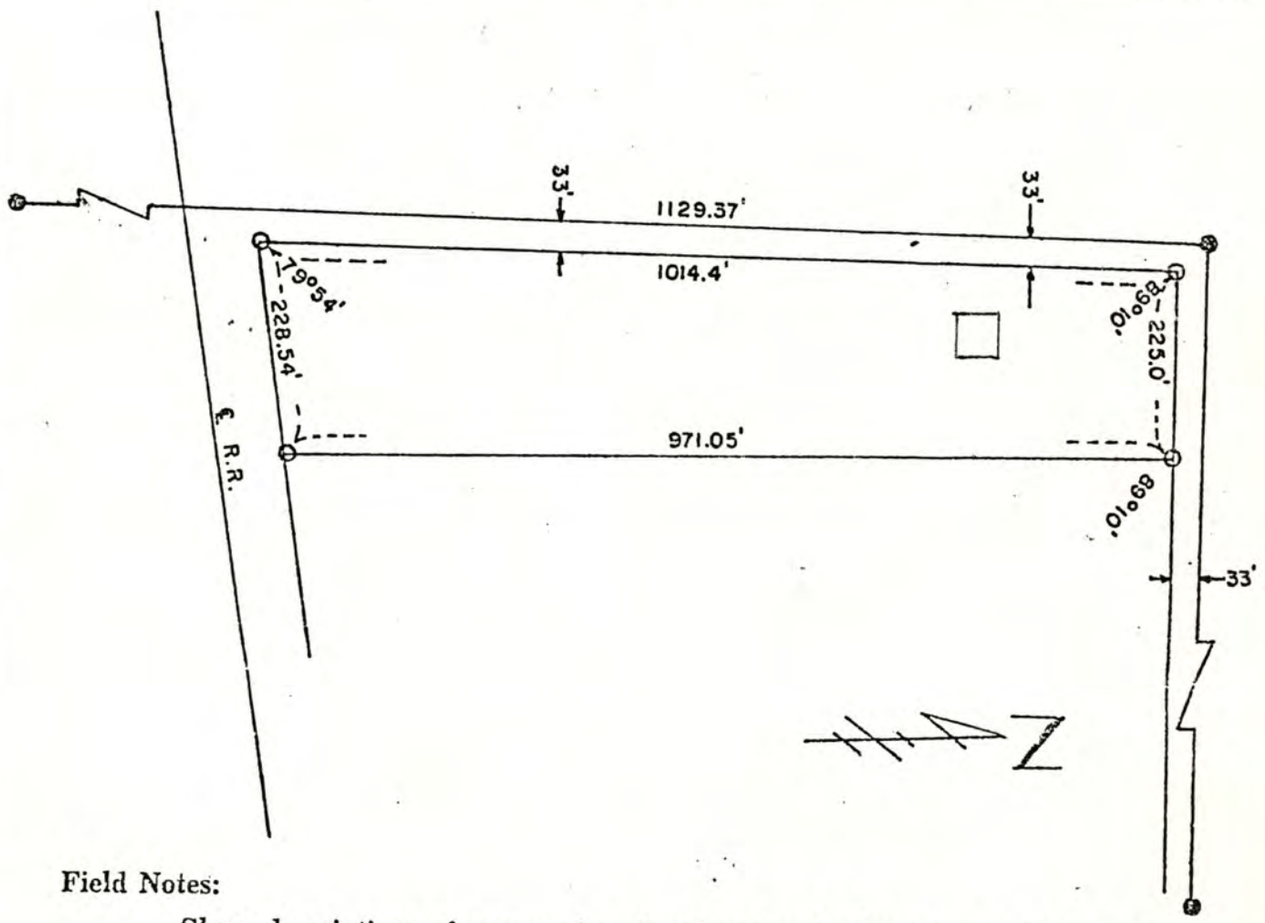
LANCASTER COUNTY, NEBRASKA

Survey of: Part of the [illegible]

Section 32 T 10 N, R 5 E of 6th P.M.

Survey No. .....(To be assigned by County Surveyor)

Date.....19..... Weather.....



Field Notes:

Show descriptions of corners found and restored; distances chained; angles measured, if any; courses and bearings of irregular tracts surveyed; and ties taken to corners. Use reverse side if necessary.

● Indicates Corners Found
○ Indicates Corners Set ½" Rebar

NW Corner Found Rebar
46.6' NE & NW to 1" Pipes
W ¼ Corner Found Red Flint
33.0' E & W to 1" Pipes
N ¼ Corner Found Pipe
33.0' N & S to 1" Pipes
46.6' SE to 3/4" Pipes

Land Surveyor's Seal

Signed this 14 day of May 1973

Name: Eugene Carlson

Surveyor's license No. L.S. 288

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: _____

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is ~~$75.00~~ $150.00

Legal Description of Property: Middle Creek TWP. 10N; RANGE 5E; SECTION 32; BLOCK ____

LOT 25; ADDITION _____; Street Address Mailing Route 6, Lincoln 68502

Directions to Property West on "O" Street to 126th, South to "A" Street (1-Mile) At this location you should be facing the property. Name Lee on split rail fence in front. Also note WBR Sign.

Location of Well Pump House SE from SE corner of House Tap Location: Inside ☐ Outside ☒

Location of Sewage System Lagoon South of House beyond Pine Trees. Year Installed 1969

	NAME	ADDRESS	PHONE
Present Owner:	Gary E. Lee	12545/12601 West "A" Street	(476-2215) Home
~~Tenant~~/Buyer:	Edward A. Furby	1510 Boswell, Apt 4 Crete, Nebraska 68333	479-2301 OFFICE 826-5810
Return to:	ATTN: CHERYL WOODS BROS. REALTY	3833 NORMAL BLVD 68506	434-3712

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

Signature of Applicant _____ Address _____

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HEALTH DEPARTMENT USE ONLY

Date Received MAY 21, 1991 Received ~~$75.00~~ $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 5/28/91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☐	Date 5/28/91	by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 6/11/91	by J.C.H.
Nitrate	☒	☐	Disapproved:	☒	Date _____	by ____

Comments: DIKES NEED MOWING. NEED WELDED OR WOVEN WIRE FENCE. NEED WARNING SIGNS ON LAGOONS (LARRY JONES) 423-9562. SLOPE IS PRETTY GRADUAL GOING INTO LAGOON BECAUSE OF LACK OF ELEVATION BETWEEN HOUSE AND LAGOON BUT APPARENTLY WORKS O.K. Corrected 6/11/91 But Light See Attached Letter ☐ Leaning gate Init.

FINAL STATUS

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

APPROVED BY Jerrold C. Wood R.S. DATE JUNE 12, 1991

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