LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1187-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

April 6, 1978 — THIS PERMIT EXPIRES

Mrs. Bob Gilliam, RFD, Pleasant Dale, NE — ISSUED TO / ADDRESS

TION, R5E, Section NW¼ of 33 — 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. 1184-C

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

DATE: Oct. 5, 1977

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. 10N ; Range 5E ; Section NW¼ 33
   Block _____ ; Lot _____ ; Addition _____
   Street Address 1900 S.W. 112th Street

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.

Mrs. Bob Gilliam
Signature of Applicant (Owner or Lessee)

RFD Pleasant Dale, Nebr.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/7/77 . Date Frwd. 10/7/77 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 10/7/77 . Date Frwd. _____ . ACTION: Approved ☐ Disapproved ☒ Signature: Gary A. Stewart

3. City or County Engineer : Date Rec'd. _____ . Date Frwd. 10-7-77 . 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. 1184-C

DATE: Oct. 5, 1977

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 NW¼ 33 ; Block ____ ; Lot ____ ; Addition ____.
   Street Address 1900 S.W. 112th Street

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).

Mrs. Bob Gillam
Signature of Applicant (owner or lessee)

R-1 Pleasant Dale, Nebr.
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
   Date: 8-22-78 by: jw
   Date: ____ by: ____
   Date: ____ by: ____

3. Date: Approved ☒ ; Disapproved ☐ 10/7/77
   by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 8-25-78 by: jw

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. 1184-C

PROPERTY WHERE SOIL TESTED:
Location: Township _____: Range _____
Section & ¼ Sect. _____
Property Dimensions: _____ft. x _____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: _____
Address: _____

Dates of Tests: _____ to _____. Weather: Precip._____Temp.____

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)

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

_____
Signature of Person Conducting Test

Address _____

Phone _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: Soil test will determine type of system

DATE: _____

Approved Percolation Rate (a)
A. _____min./inch
B. _____min./inch
C. _____min./inch

_____
Signature of Reviewing Official

001

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: 10-27-91

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

Legal Description of Property: TWP. ~~10N~~ 9; RANGE ~~6~~ 5E; SECTION ~~9~~ 33; BLOCK ____

LOT 3; ADDITION _____; Street Address 1900 SW 112th

Directions to Property 2 mi West of Emerald 1.5 mi South of "O" St on 112th St

Location of Well 10 Ft ~~West~~ South West of House Tap Location: Inside ☑ Outside ☑

Location of Sewage System East N/E of House 150' Year Installed 1978

	NAME	ADDRESS	PHONE
Present Owner:	Mr & Mrs T R Stewart	1900 S.W 112th	474-6763
Tenant/Buyer:	Same	Same	474-6763
Return to:	Thomas R Stewart	1900 SW 112th St	474-6763

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

Signature of Applicant Thomas R Stewart **Address** 1900 SW 112th

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HEALTH DEPARTMENT USE ONLY

Date Received NOVEMBER 1, 1991 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 11/5/91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☐	Date 11/5/91	by JCH
Bacteria	☒	☐	Provisional:	☐	Date _____	by ____
Nitrate <0.1ppm	☒	☐	Disapproved:	☒	Date _____	by ____

Comments: MISSING LAGOON FENCE NEEDS TO BE REPLACED. WARNING SIGNS NEED TO BE ON FENCE. Original fence put back, it really does not comply heightwise (not 4 foot) but was accepted by the Health Department in 1978 so it will be accepted now. J.C.H. See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Jerold C. Hood R.S. DATE NOVEMBER 19, 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