LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE SYSTEM REPAIR

No. 93390032701

Issued 05/17/93
Expires 11/17/93
Revenue Code 18754

Establishment
LARRY SCHWARCK
T11N R8E SEC 36
LOT 13&15
6100 N 98 STREET

FEES: $50.00

TOTAL $50.00

Permittee
LARRY SCHWARCK
8200 OLD CHENEY RD
LINCOLN NE 68510

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 471-7800)

FILE NO._____

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

DATE: 5-14-93

The undersigned hereby applies for a permit to ALTER [ ], EXTEND [✓], or REPAIR [ ] an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 11N ; Range 8E ; Section 36 ;
Block ____ ; Lot 13 + 15 ; Addition _____
Street Address 6100 No 98th

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. Bedrooms 3
Describe _____
Other Use [ ]
Describe _____

3. Type of existing Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Description of proposed alteration, extension or repair: add 100' perf pipe lateral & repair broken tank cover

5. Work to be done by: Owner [ ]; or Contractor [ ], L. Schwarck
Contractor's Name

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$

Larry Schwarck Trucking
Signature of Applicant (owner or lessee)

8200 Old Cheney
Address

(Do not write below this line)

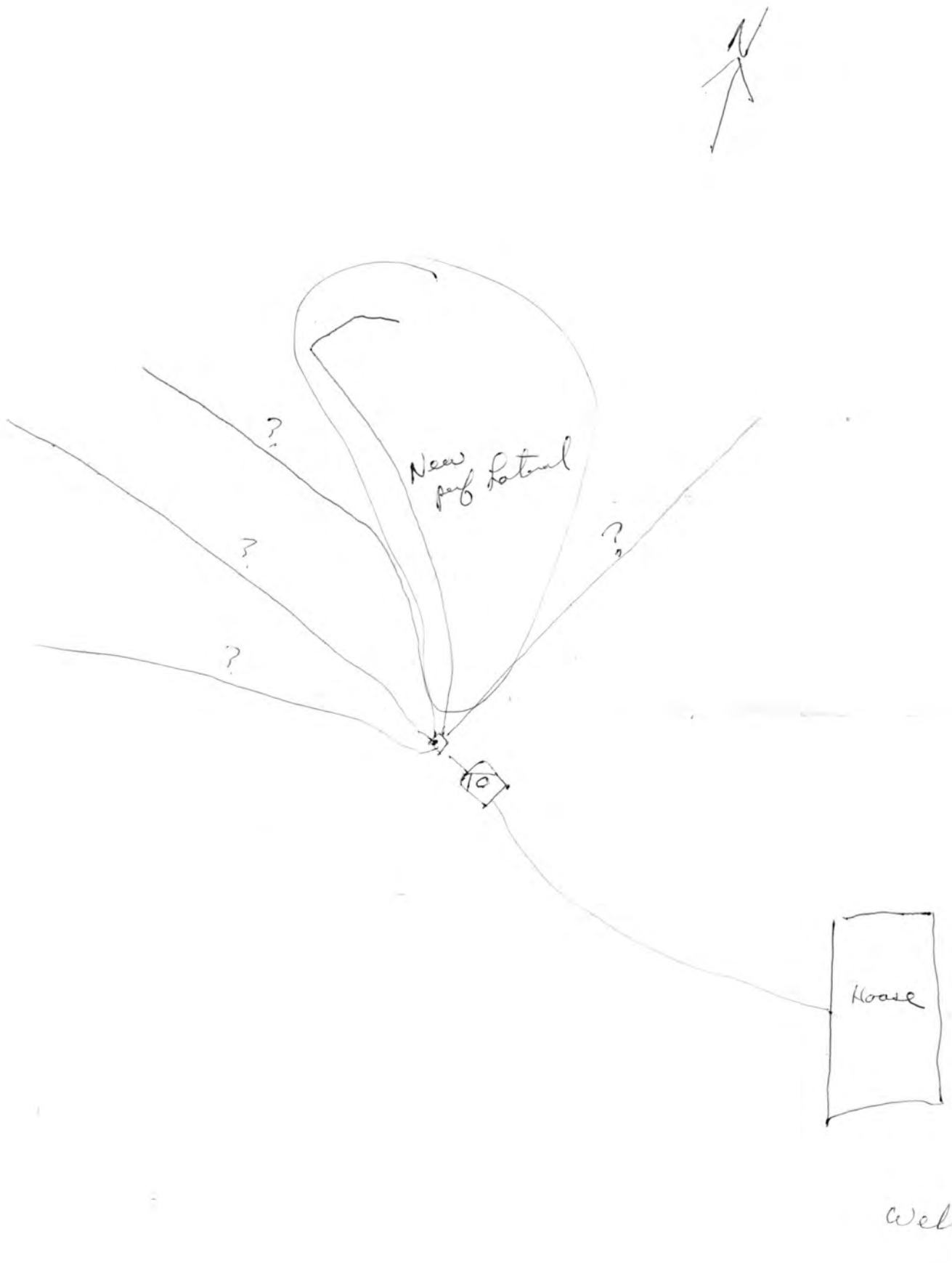
REVIEWING ACTION

1. Date Rec'd: 5-14-93
Filing Fee: $ 50.00

2. Site Visits:
Date: 5-14-93 by: rm
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ]
by: Ron Mayer

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 5-14-93 by: Ron Mayer


?
?
?
Area of Interest
TO
House
Well

FILE NO. 586

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FOOD ESTABLISHMENT OPERATOR
TYPE OF LICENSE OR PERMIT

September 7, 1975
THIS LICENSE OR PERMIT EXPIRES

Burton L. Schernikau
LICENSEE OR PERMITTEE

No. 4, Garden Valley, Lincoln
ADDRESS

T11N; R7E; Sec. 36;
NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	10.0116	24.0114	6-2

SERIAL NO.	DATE	AMOUNT
34713	MAR 7 75	30.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

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. 586

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

DATE: March 3 1975

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: South 583' of W 1485' Except S 433' of SW¼ Sect 36 T 11 R 7
Twp. 11N ; Range 7E ; Section 36
Block _____; Lot _____; Addition Lancaster County Nebr
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.

Burden L Sherman Jan
Signature of Applicant (Owner or Lessee)

No 4 Sauder Valley Lincoln Nebr
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 3/3/75 . Date Frwd. 3/7/75 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood

2. Supt. Bldg. Insp.: Date Rec'd. 3/7/75 . Date Frwd. _____ . ACTION: Approved ☐ Disapproved ☒ Signature: Mary Hasig

3. City ~~or County~~ Engineer : Date Rec'd. March 7 1975 Date Frwd. March 7 1975 ACTION: Approved ☐ Disapproved ☒ Signature: Al Isaac

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. 586

DATE: March 3, 1975

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: South 583 of W 1485 Except So 933' of SW/4 Sec 36 T11N R7E Lancaster County
Twp._____; Range_____; Section_____; Block_____; Lot_____; Addition_____.
Street Address 6100 No 96th St.

2. Property Use: Residential X ☐; 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).

Burton Scherer Jr. by JMK
Signature of Applicant (owner or lessee)

No 4 Grama Valley Lincoln Nebr
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: May-8-75 by: ___
Date:_____ by:_____
Date:_____ by:_____

3. Date: Approved ☒; Disapproved ☐ 5/3/75
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: May-8-75 by: Ronald N. Bryant

84 Fletcher 2.29 Schenikan Job

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. 586

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: 3-29-75 to 3-30-75. Weather: Precip. 0 Temp. 30° 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	36"	3/29	1PM	3/30	2AM	3/30	2PM	12"	3 3/4 AM	11"	30	0	
2										10		3/4	
3										8		1	
4										8 3/4		3/4	
5										8 1/2		3/4	
6										8		1	

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)

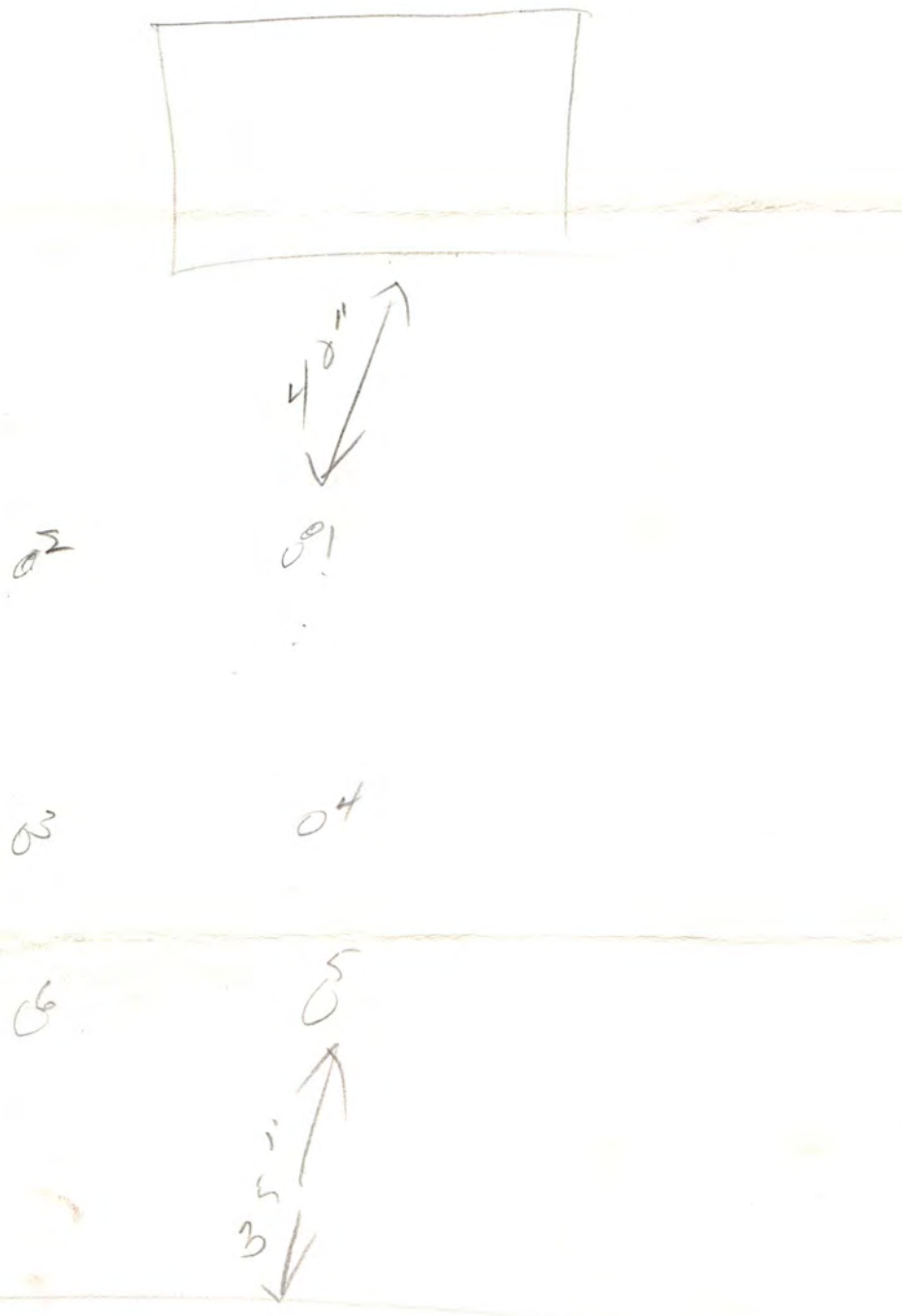
REVIEWING ACTION

REMARKS: _____

DATE: 4/4/75

Approved Percolation Rate(s)
A. 48 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hoel
Signature of Reviewing Official


4' 0"
O2
O1
O3
O4
O6
O5
4'
3
Road

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. 586

SPECIFICATIONS

DATE: May-8-75

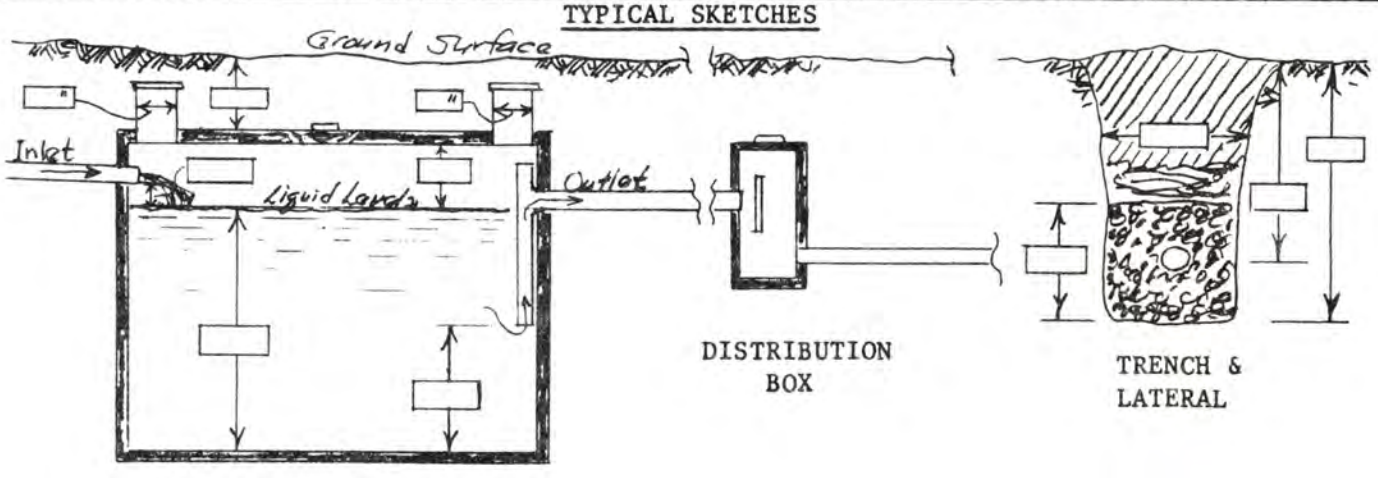
A. BUILDING SEWER:
1. Material Cast iron; Diameter 4 in.
2. Distance above basement floor ✓ in.; or below basement floor ___ in.
3. ✓ Distance between dwelling and septic tank ___ ft.
4. Number of clean-outs 1.
5. ✓ Distances To:
Well or Suction Line 100+ ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☒ (Company pre-cast)
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 100+ ft.;
Stream ✓ ft.; Pressure Line ___ ft.;
Property Line 20+ ft.

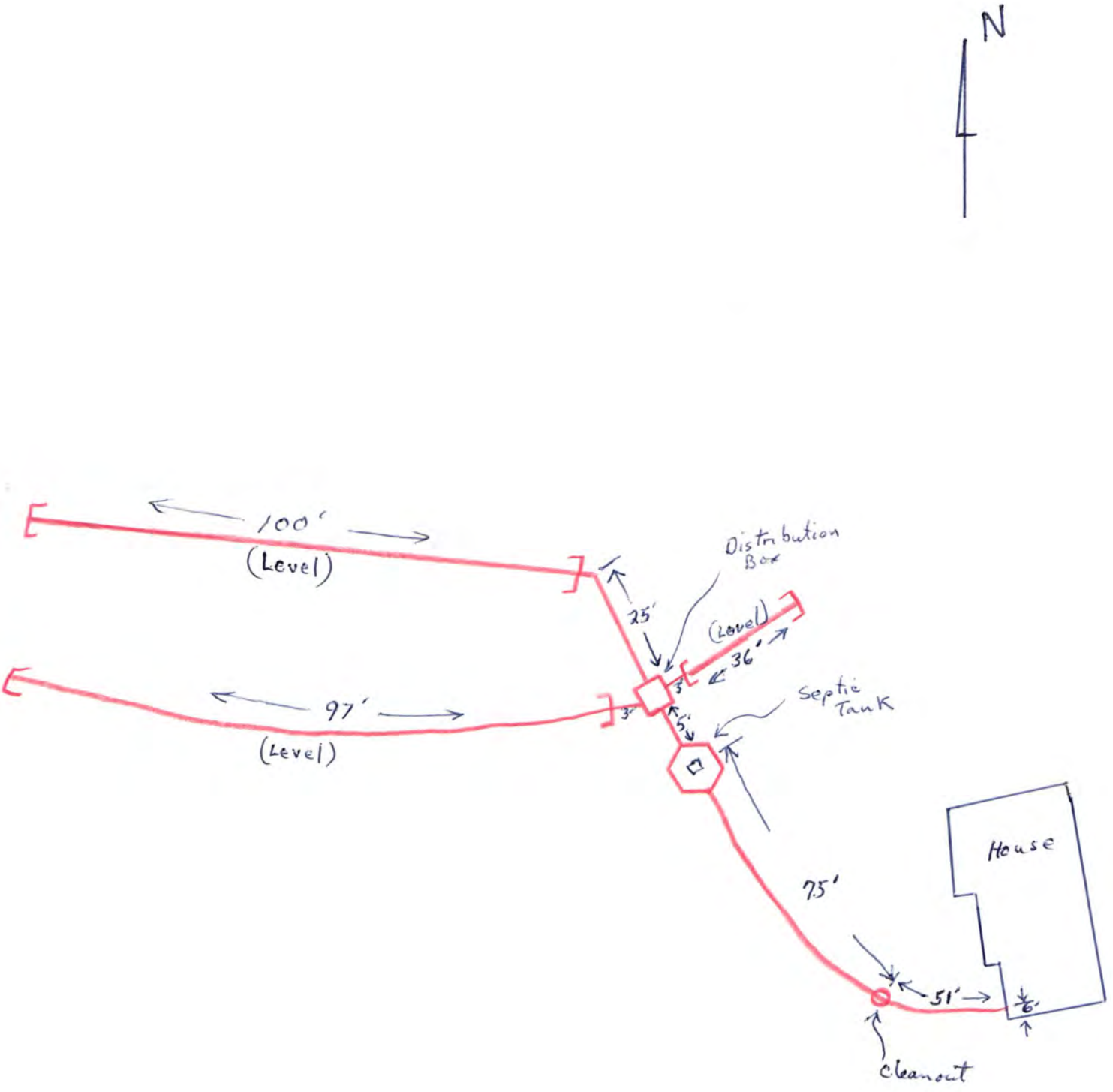
C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets ✓.
2. Factory Built: Yes ☒, (Company pre-cast) No ☐
3. ✓ Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 5 ft.
5. Serial Distribution: Yes ☐, No ☒ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: seepage bed
2. Lateral Lines: Depth below grade ~~24~~ 36 in.
Number 3; Length of each line 100 ft 77 36
Total length of Laterals 229 ft.;
Slope Level in/100 ft. Diameter of pipe 4 moon in.; Shape ½ moon
Material: concrete ☒; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines 25 ft.
3. Trench Dimensions: Depth ___ in.; 2'-4½
Width 48 in.
4. Filter Material: gravel.
Depth of material from trench bottom 20 in.
5. Distances To:
Well or Suction Line 100+ ft.;
Stream ✓ ft.; Pressure Line ✓ ft.
Property Line 20+ ft.
6. Percolation Rate: 48 minutes/inch

TYPICAL SKETCHES



Signature of Applicant


N
100'
(Level)
97'
(Level)
Distribution Box
25'
(Level)
36'
3'
3'
5'
Septic Tank
House
75'
51'
6'
Cleanout

JM
May-8-75

INTER-DEPARTMENT COMMUNICATION

TO Charlie Seale

DEPARTMENT Building Inspections

ATTENTION

CARBONS TO

DATE March 7, 1975

FROM Jerrold C. Hood

DEPARTMENT Health

SUBJECT Individual Sewage System Construction - File No. 586
Burton L. Schernikau
No. 4 Garden Valley, Lincoln

The Application and plans have been reviewed and approved for the construction of an individual sewage disposal system on property legally described as:

T11N; R7E; Section 36

Jerrold C. Hood, R.S., Supervisor
County Sanitation Section
Division of Environmental Health

JCH: ch

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

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_____

Twp 11N Range 7E Section 36 1/4 SW 1/4 Block____ Lot____ Addition_____

Directions to Property 6100 N 98 St. W/s about 3/4 mile South highway 6 on east side of road

Location of Well East side of house Tap Location: Inside ☐ Outside ☐

Location of Sewage System north west of house Year Installed_____

	NAME	ADDRESS	PHONE
Present Owner:	Kurt's Pobivka	6100 N. 98 Street	
Tenant/Buyer:	Kenneth Stading	214 S. 45 Lincoln, Nebr 68510	489-9884
Return to:	Kenneth Stading FAX 467-7956	214 S. 45 Lincoln, Nebr 68510	489-9884

Signature of Applicant Kenneth Stading Address 214 S. 45 Lincoln, Nebr. 68510 Date 2/26/96

HEALTH DEPARTMENT USE ONLY

Date Received 02/27/96 Received $150.00 Check ☑ #2921 Cash ☐

PRELIMINARY STATUS--By Ron Marquart **DATE:** 2/28/96

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☒ too close to corral Corrected 3-18-96	Approved ☒	Date 3/11/96 by rm
Bacteria	☒ 0 /ml	☐ /ml	Provisional ☐	Date 3/18/96 by rm
Nitrate	☒ <0.1 ppm	☑ 11 ppm	Disapproved ☐	Date / / by

Comments: Recommend checking to see if septic tank needs pumping and recommend not allowing livestock over the subsurface laterals of septic system.

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: 02/28/96 ☒ * **SEWAGE DISPOSAL SYSTEM** Approved: ☑

Provisional Approval: ☐

Approved by Ron Marquart, RS Date 3/12/96

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.

* Approval applies to treated water only for nitrate, not raw water. the raw water must not be used for infant feeding.

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: April 30, 1993

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

Legal Description of Property: TWP. 11N; RANGE 8E; SECTION 36; BLOCK ____

LOT 13, 15; ADDITION _____; Street Address 6100 No 98th

Directions to Property 1 Block No. of 98th (North) & Fletcher on East Side of Road

Location of Well 95' SE of Home Tap Location: Inside ☐ Outside ☑

Location of Sewage System 200' NW of Home Year Installed 1977

	NAME	ADDRESS	PHONE
Present Owner:	Bert Sobernik	6100 No. 98th	467-1382
~~Tenant~~/Buyer:	Kurt Polivka	6300 Arbor Rd.	464-5611
Return to:	Loyd Terpsma	3910 South Street	436-3129

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

Signature of Applicant Loyd Terpsma Address 3910 South Street

Loyd Terpsma Lincoln - 68506

HEALTH DEPARTMENT USE ONLY

Date Received 05/03/93 Received $150.00 Check ☑ Cash ☐ #2062

PRELIMINARY STATUS--DATE 5-4-93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☑	☐	Approved:	☐	Date 5-4-93 by RM
Bacteria	☒ 0	☐	Provisional:	☐	Date _____ by ____
Nitrate	☒ 8.8 ppm	☐	Disapproved:	☒	Date _____ by ____

Comments: It would be wise to periodically sample this drinking water because the nitrate level is approaching the 10 ppm limit. This Department has no record of the original septic system installation. There a provisional approval A repair permit and an additional 100' of subsurface lateral has been installed to correct the failing lateral. Recommend checking to see if septic tank needs pumping.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ron Marquart DATE 5-17-93

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

292

KB STABLES

ADMINISTRATIVE FINAL PLAT
TOPOGRAPHIC SITE PLAN

