CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 1542

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

November 31, 1979
THIS LICENSE OR PERMIT EXPIRES

Rachel Denniston — Route 7, Box 28, Lincoln, NE
LICENSEE OR PERMITTEE — ADDRESS

T10N, R6E, Section 31, Block 4, Lot 3, Addition High Ridge Acres
NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NON-TRANSFERABLE (Extend and Repair)

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
110.15	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
018754		

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

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

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

City Ordinance No. 9150 ☒
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 242.

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

DATE: _____

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. 10N ; Range 6E ; Section 31 ;
Block 4 ; Lot 3 ; Addition High Ridge Acres
Street Address _____

2. Property Use: Residential _____ ☒; Commercial _____ ☐
No. Bedrooms 2
Describe _____
Other Use ☐
Describe _____

3. Type of existing Individual Sewage Disposal System: Septic Tank ☒; Other ☐

4. Description of proposed alteration, extension or repair: replace tank & add 100 ft of laterals

5. Work to be done by: Owner ☐ ; or Contractor ☒ , Wagner Const.
Contractor's Name

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	1400

Rachel Dennistor (By mdw Wagner)
Signature of Applicant (owner or lessee)

RT 7, Box 28 Lincoln 68502
Address

(Do not write below this line)

REVIEWING ACTION

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

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

3. Date: Approved ☒; Disapproved ☐
by: Jerold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 3/6/98 by: J. E. Hood

FORM 20104-0477
PLANS & SPECIFICATIONS FOR 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: 474-1541

D

DATE: _____

FILE NO. 242

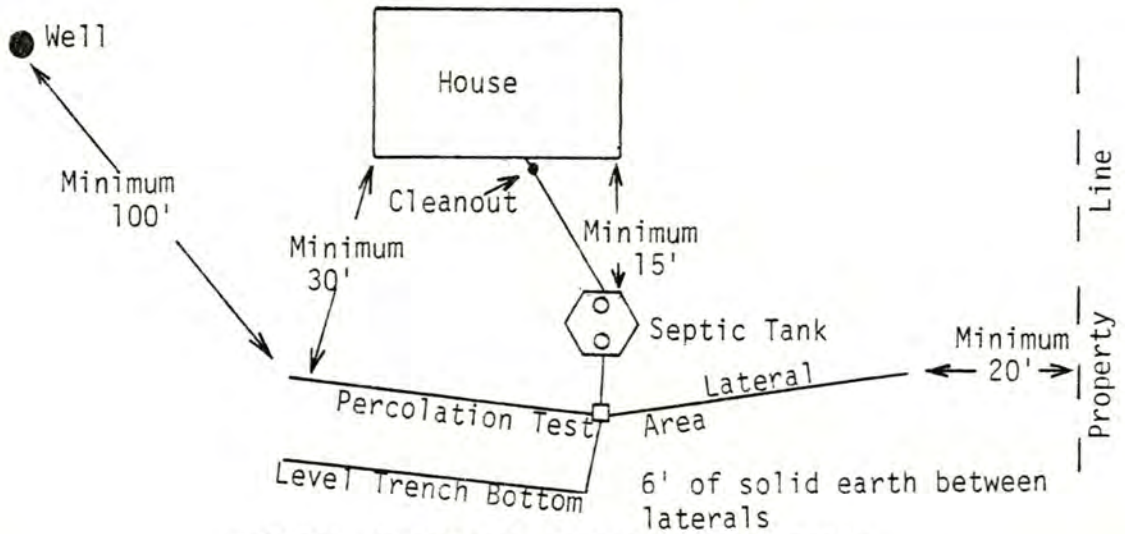
SPECIFICATIONS AS BUILT 1801 SW 47th

A. BUILDING SEWER:
1. Material plastic; Diameter 4" in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 89 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:
1. Material Concrete; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre-Cast Concrete)
4. Manholes: Over Inlet; diam. ~~24~~ in.
Over Outlet; diam. _____ in.
Riser Above ☒ Below ☐ Grade 0 in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 18 in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material concrete; Number - available outlets 5.
2. Factory Built: Yes ☒ No ☐
(Company Pre-Cast Concrete)
3. Distance from Septic Tank 7 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 2; Length of each line 30, 70, _____, _____, _____ ft.;
Total length of laterals 100 ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 3 ft.; Slope 4 in/100 ft.; Average Depth 24 in.
4. Filter Material: gravel.
Depth of Material 12" in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

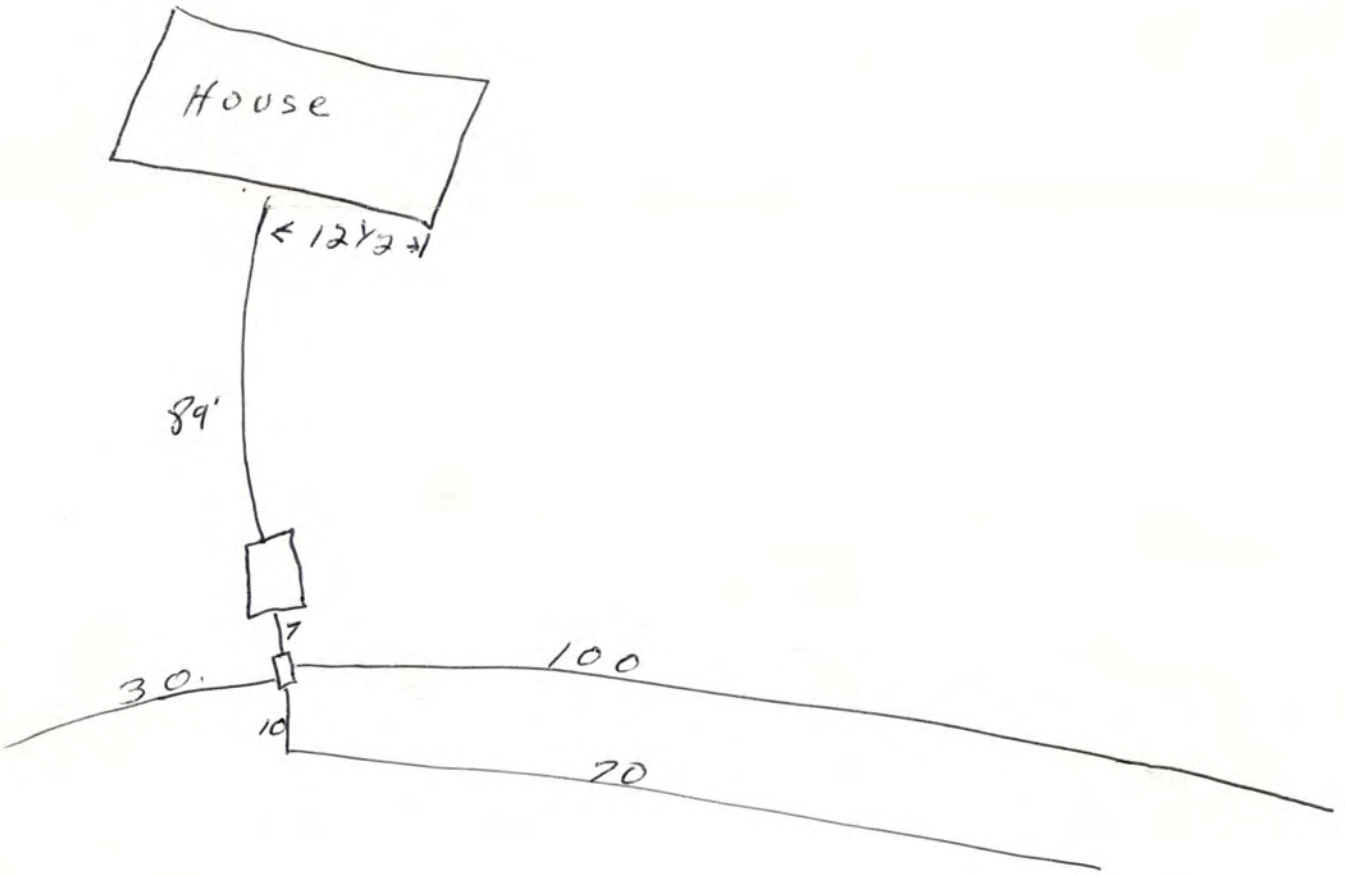


TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 1 MAY 79. INSTALLER WAGNER CONST.

1801 SW 47th



CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 242

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — July 19, 1972

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

Robert Gilliam — Route #8, Lincoln, Nebraska

LICENSEE OR PERMITTEE — ADDRESS

T10N; R6E; Sec. 31: Bl. 4; Lot 3; High Ridge Acres Add.

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
624 110.15 1535	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT

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-30(67) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 242

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

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described herein:

1. Legal description of property: Twp. 10N; Range 6E; Section 31;
Block 4; Lot 3; Addition _____;
Street Address Highridge Acres

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

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

4. Distance to public sewer: _____ ft.

Robert Dillion
Signature of Applicant (owner or lessee)
by Roger Bailey
Rt 8 Lincoln
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 1/19/72. ACTION: Approved [X] Disapproved [ ]
Date Frwd. _____. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 1-19-72. ACTION: Approved [ ] Disapproved [ ]
Date Frwd. _____. Signature: Charles Seale By RT

3. City Engineer: Date Rec'd. _____. ACTION: Approved [ ] Disapproved [ ]
Date Frwd. 1-19-72. Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

FINAL ACTION ON SITE CLEARANCE: Approved [ ] Disapproved [ ]

Date Applicant Notified: _____ Signature _____

242

FORM HD-32(67) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 242

DATE: _____

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 Lincoln City Ordinance No. 9150, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 10N; Range 6E; Section 31;
Block 4; Lot 3; Addition _____;
Street Address Higginbotham Acres

2. Property Use: Residential _____ ☐; Commercial _____ ☐
No. of Bed Rooms 2 Describe: _____

Other Use _____ ☐
Describe: _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒; Other ☐

4. Plans and Specifications of Proposed System. (See FORM HD-32a(67) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT, attached hereto.)

Robert Dillaine
Signature of Applicant (owner or lessee)
by Roger Bailey

Rt 8 Lincoln
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance _____

3. Site Visits:
Date: 3/23/72 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved ☒; Disapproved ☐: 1/19/72
by: Jerrold C. Wood

5. BUREAU OF LICENSES & PERMITS
Date Notified: _____
Date Issued: _____ Serial _____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 3/23/72 by: Jerrold C. Wood

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 242

SPECIFICATIONS

DATE: Jan 18, 1972

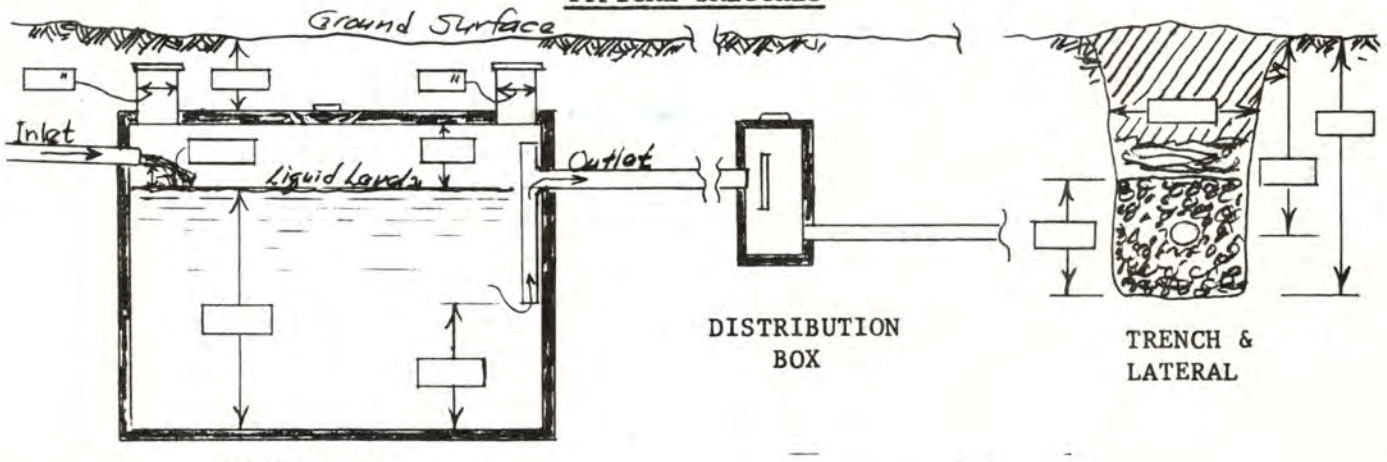
A. BUILDING SEWER:
1. Material PLASTIC; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor ___in.
3. Distance between dwelling and septic tank 89 ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material fiberglass; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 50 in.
3. Factory Built: Yes [X] (Company CORRIGATED FIBERGLASS
No [ ]
4. Manholes: Over Inlet; diam. 16 in.
Over Outlet; diam. 6 in.
Below Grade 24 in.
5. Inlet: Baffle [ ]; or Tee [X]
6. Outlet: Baffle [ ]; or Tee [ ]
Depth of outlet below inlet 2 in.
7. Depth of top of tank below finished grade 24 in.
8. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

C. DISTRICTION BOX
1. Material CON; No. available outlets 5.
2. Factory Built: Yes [X], (Company PRE-CAST STEP No [ ]
3. Dimension: Length ___in.; Width ___in. Depth ___in.
4. Distance from Septic Tank 7 ft.
5. Serial Distribution: Yes [ ], No [X]
(If yes, show detailed plans.)

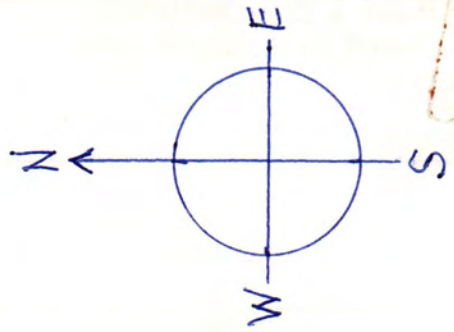
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Field Lateral
2. Lateral Lines: Depth below grade ___in.
Number 1; Length of each line 100 ft
Total length of Laterals 100 ft.;
Slope 6 in/100 ft. Diameter of pipe 16 in.; Shape O
Material: concrete [ ]; fiber asbestos [ ]; clay [ ]; other _____
Distance between lateral lines ___ft.
3. Trench Dimensions: Depth 36 in.;
Width 60 in.
4. Filter Material: gravel.
Depth of material from trench bottom 16 in.
5. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.
Property Line ___ft.
6. Percolation Rate: _____minutes/inch

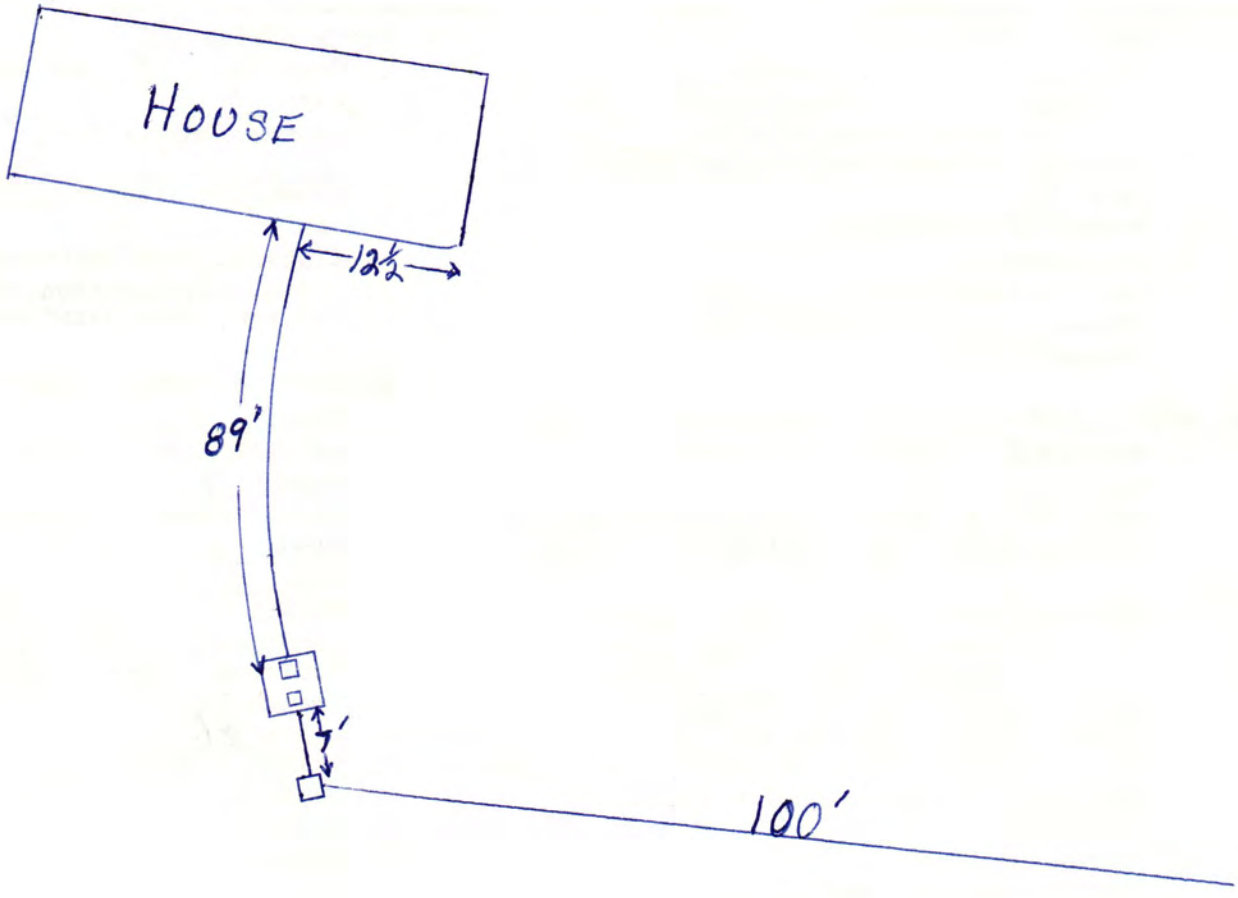
TYPICAL SKETCHES



Signature of Applicant

1801 SW 47th





005

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 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 1801 SW. 47th ST.

Twp 10N Range 6E Section 31 1/4 ___ 1/4 ___ Block 4 Lot 3 Addition HIGH RANGE

Directions to Property HIGH RIDGE ACRES BLOCK 4 LOT 3
WEST A STREET TO SW 47th GO SOUTH 5 HOUSES

Location of Well FRONT YARD Tap Location: Inside ☐ Outside ☒

Location of Sewage System BACK YARD Year Installed 7/3 1972

	NAME	ADDRESS	PHONE
Present Owner:	LINDA BOHAC	1801 SW. 47th LINCOLN NE 68522	476-8872
Tenant/Buyer:			
Return to:	LINDA BOHAC	SAME AS ABOVE	

Signature of Applicant Linda Bohac Address 1801 SW. 47th St. Lincoln NE 68522 Date 7/5/93

HEALTH DEPARTMENT USE ONLY

Date Received 07/08/93 Received $150.00 Check ☒ #2614 Cash ☐

PRELIMINARY STATUS--By Jerrold Hood **DATE:** 7/9/93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☒	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ <0.1 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: TOP OF WELL SHOULD BE RAISED AND DIRT FILLED IN AROUND IT THE WELL IS CLOSE TO BEING IN A DEPRESSION. IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 7/14/93

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.

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