LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2061-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

AUGUST 3, 1984 — THIS PERMIT EXPIRES

ROBERT J. DOETKER — ISSUED TO

10231 NO. 143

WAVERLY, NE 68462 — ADDRESS

T11N; R7E;of 6th PM; Sec 11; Bk 2; Lot 1; Add: Finigan's Replat in SW¼ — LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
SS	2-6-84	$60.00

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 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2061-C

DATE: _____

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 11 North; Range 6th West of the P.M.; Section 11; Block 2: Lot 1: Addition Finigan's Replat in S.W. Quarter
   Street Address _____

2. Property Use: Residential ☑; Commercial ☐ Other Use ☐
   No. of Bedrooms 3. Describe _____

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

4. Distance to public sewer: _____ ft.

WILL INSTALL WHAT PERCOLATION TEST DICTATES

Robert J Doetker
Signature of Applicant (Owner or Lessee)

10231 N. 143 Waverly, Nebr
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 2/3/84. Date Frwd. 2/3/84. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 2/3/84. Date Frwd. 2/3/84. ACTION: Approved ☐ Disapproved ☐ Signature: _____

3. City or County Engineer: Date Rec'd. 2/3/84. Date Frwd. 2/3/84. ACTION: Approved ☒ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7/18/84 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

WATER IN BOTTOM OF TANK HOLE AND IN END OF TRENCH THAT GOES WEST. ABANDONED END OF WEST TRENCH.

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2/20/85 By: Jerrold C. Hood

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

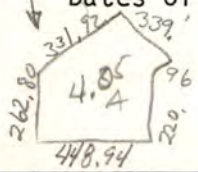
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 11 North; Range 7 East of the 6th P.M.; Section & ¼ Section 11.
Property Dimensions: _____ ft. x _____ ft. Area: 4.1 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: _____ to _____. Weather: Precip. _____ Temp. _____.



OWNER: Robert J Doetken
Address: 10231 N 143rd
SITE ADDRESS 12300 Finigan RD.

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./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	4"	July 7	8:00	July 7	12:00	July 8	4:00	27½	4:30	28¾	30	1¼	
2	4"	July 7	8:05	July 7	12:05	July 8	4:02	28	4:32	29⅛	30	1⅛	
3	4"	July 7	8:10	July 7	12:10	July 8	4:04	25¾	4:34	26⅞	30	1⅛	
4	4"	July 7	8:15	July 7	12:15	July 8	4:07	27	4:37	28¼	30	1¼	
5	4"	July 7	8:20	July 7	12:20	July 8	4:10	27¾	4:40	28⅞	30	1⅛	
6	4"	July 7	8:25	July 7	12:25	July 8	4:13	27¼	4:43	28⅜	30	1⅛	

Robert J Doetken
Signature of Person Conducting Test

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

Address 10231 N 143 Phone 786-5422

(Do not write below this line)

REVIEWING ACTION

Remarks: ~~Too slow for conventional system~~
Soil Type (SCS): ~~Sharpsburg Silty Clay Loam~~
Date: ~~June 5, 1984~~ July 11, 1984

Approved Percolation Rate (a)
A. ~~120~~ 25 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

DIFFERENT AREA WAS DONE ON SAME SHEET

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

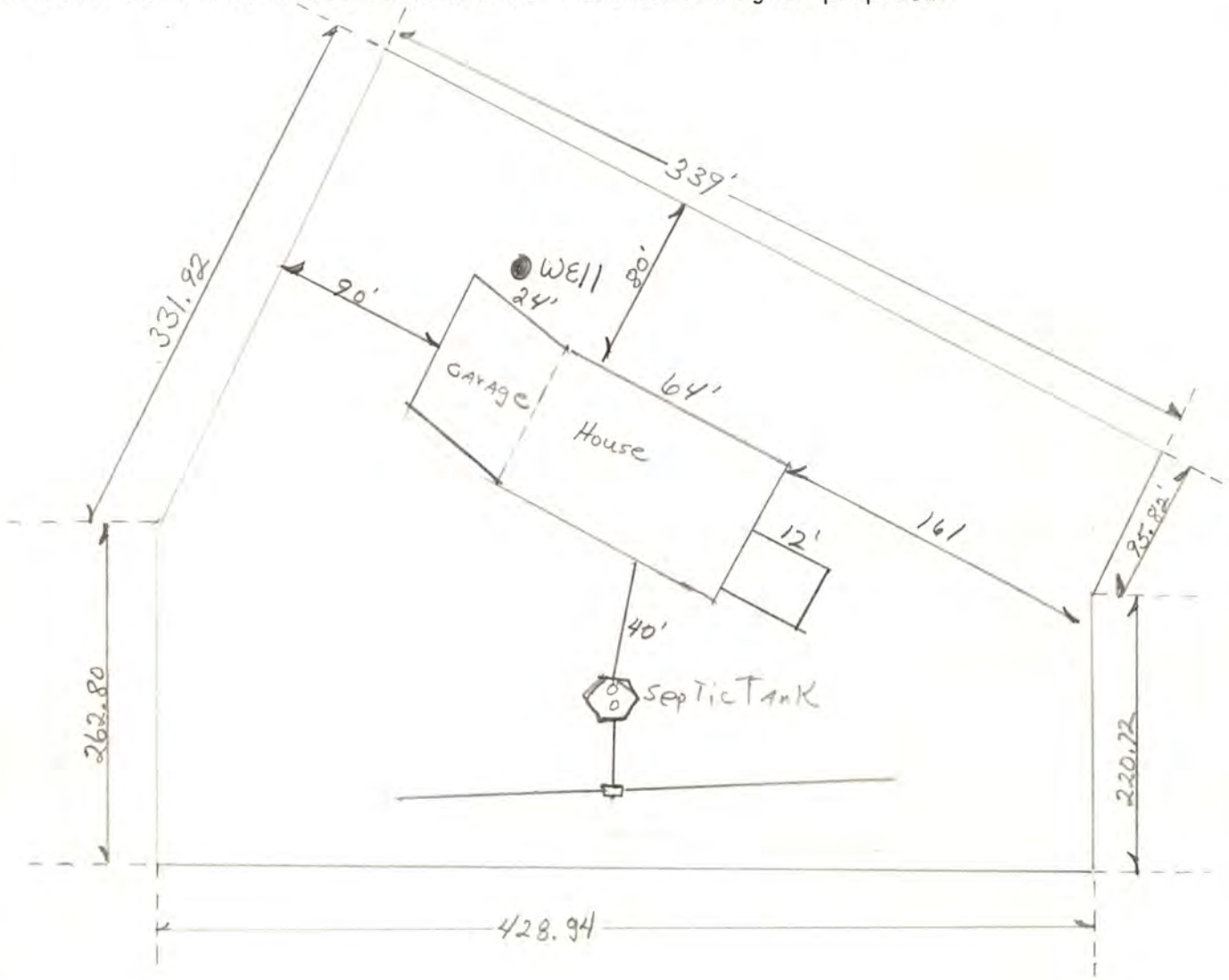
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 2061-C

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: JULY 11, 1984

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 172 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed ____ sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

006

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: March 26, 1993

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

Legal Description of Property: TWP. 11N; RANGE 7E; SECTION 11; BLOCK 2

LOT 1; ADDITION Finigan's Replat; Street Address 12300 Finigan Road, Lincoln NE

Directions to Property _____

_____

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System _____ Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	Robert + Mary Doetker	12300 Finigan Rd. Lincoln NE 68517	467-2809
~~Tenant/Buyer~~:	Work# 473-1272 Mary's work # 473-9256		
Return to:	Security Federal Savings	P.O.B. 80609, Lincoln 68501	474-4444

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

Signature of Applicant Pamela L Kemper Address Security Federal Savings

==========

HEALTH DEPARTMENT USE ONLY

Date Received 03/29/93 Received $150.00 Check ☒ # 39706 Cash ☐

PRELIMINARY STATUS--DATE 3-30-93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 3-30-93 by [illegible]
Bacteria	☒	☐	Provisional:	☐	Date 4-5-93 by [illegible]
Nitrate	☒ <0.1	☐	Disapproved:	☐	Date _____ by _____

Comments: The septic system is installed in a soil that may water-log in extremely wet weather. Recommend checking to see if septic tank needs pumping. Owner said that tank is pumped every two years. See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ron Mangum RS DATE 4-8-93

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

280

REC'D FEB 2 0 1985

Robert Doerksen

