Jerry Hood

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: 475-6221)

FILE NO._____

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

DATE: 5/21/80

The undersigned hereby applies for a permit to ALTER [ ], EXTEND [X], 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 (; Lot 1 ; Addition West High Ridge Acres
Street Address_____

2. Property Use: Residential_____ [X]; Commercial_____ [ ]
No. Bedrooms_____ Describe_____
Other Use [ ]
Describe_____

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

4. Description of proposed alteration, extension or repair: 42' [5] Line & 100' Material, Two riser on Tank, Pump Tank

5. Work to be done by: Owner [ ] ; or Contractor [X], Capital City Trenching
Contractor's Name

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	1089.50

Signature of Applicant (owner or lessee)

5000 West Sumner, Lincoln, Nebr.
Address

(Do not write below this line)

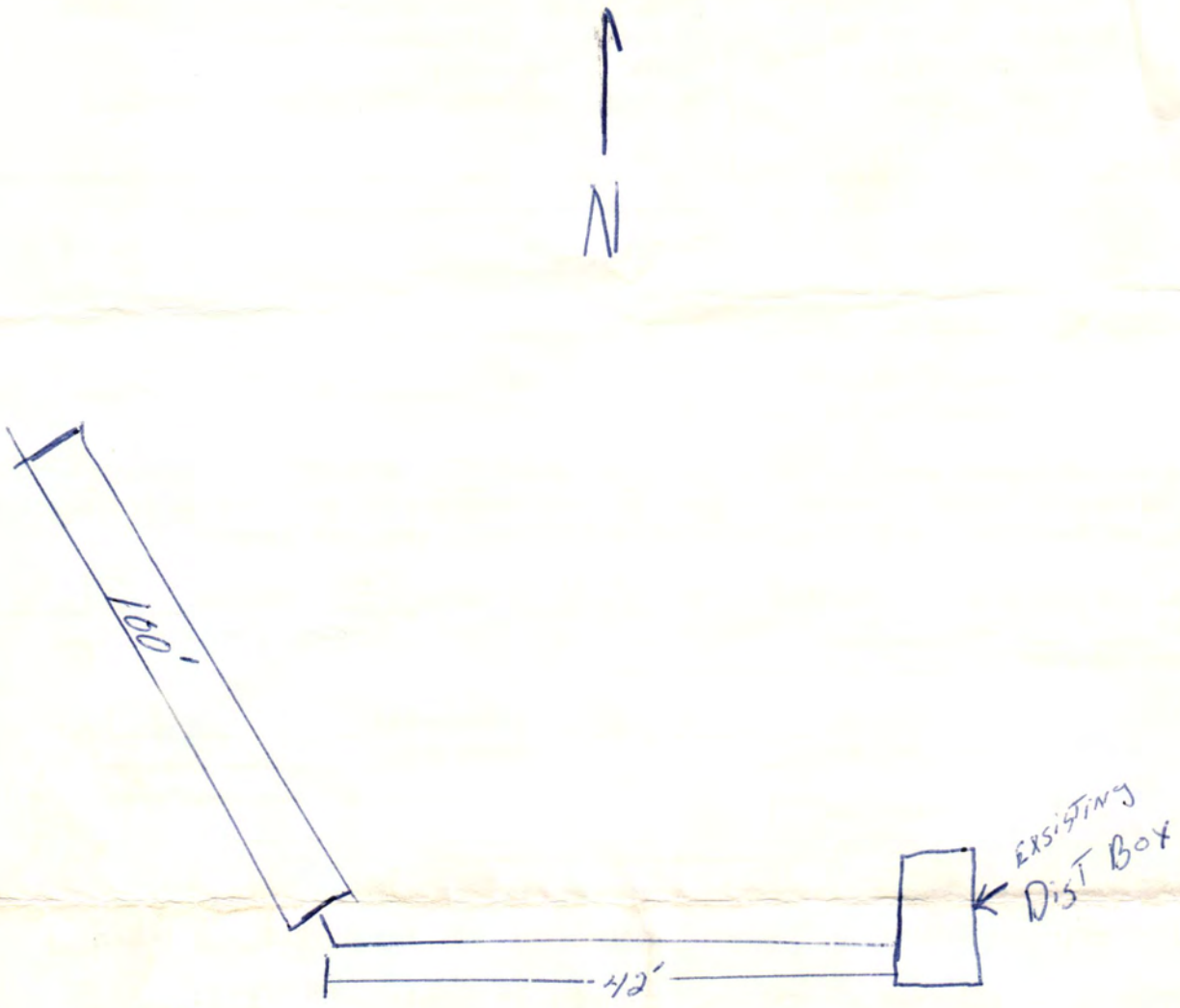
REVIEWING ACTION

1. Date Rec'd:_____
Filing Fee: $ No fee

2. Site Visits:
Date:_____ by: L.C.H.
Date:_____ by:_____
Date:_____ by:_____

3. Date: Approved [X]; Disapproved [ ]
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6/5/80 by: J.C. Hood


N
100'
EXSISTING
DIST BOX
42'

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 673

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

February 20, 1976
THIS LICENSE OR PERMIT EXPIRES

Mrs. Audrey Gilliam
LICENSEE OR PERMITTEE

Route #1, Lincoln'
ADDRESS

T10N; R6E; Sec. 31; Bl. 1; Lot 1; High Ridge West Acres, 1st Addition
NAME OF ESTABLISHMENT, IF ANY

LEGAL DESCRIPTION
ADDRESS

REMARKS: NON-TRANSFERABLE

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. 624-1535	DATE	AMOUNT		

APPLICATION

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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. 673

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

DATE: Aug. 19, 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: Twp. 10N ; Range 6E ; Section 31
Block 1 ; Lot 1 ; Addition High Ridge West Acres 1st 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 ☐

4. Distance to public sewer: _____ ft.

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

Rt. #7 Lincoln
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/19/75 . Date Frwd. 8/20/75 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood

2. Supt. Bldg. Insp.: Date Rec'd. 8-20-75 . Date Frwd. 8-20-75 . ACTION: Approved ☐ Disapproved ☒ Signature: Williamsen

3. City ~~or County~~ Engineer : Date Rec'd. 8-20-75 . Date Frwd. 8-20-75 . ACTION: Approved ☐ Disapproved ☒ Signature: Al Long

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 [X]
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. 2673

DATE: Aug. 19, 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: Twp. 10N ; Range 6E ; Section 31 ; Block 1 ; Lot 1 ; Addition High Ridge West Acres 1st Addition
Street Address _____.

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).

Mrs. Audrey Gilliam
Signature of Applicant (owner or lessee)

Rt. #7 Lincoln
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: Oct-27-75 by: mm
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ] 9/19/75
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: Oct-27-75 by: Ron Maynard

Lot 1, Block 1
High Ridge West acres
1st add.

$16 - 16\frac{3}{4} = .75$
$18\frac{3}{4} - 20 = 1.25$
$23 - 24\frac{1}{2} = 1.5$
$23 - 24\frac{1}{2} = 1.5$
$22 - 23 = 1$
$23\frac{1}{2} - 24\frac{1}{2} = 1$

25 MIN / IN

230'
Lateral
3' wide

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. 673

SPECIFICATIONS

DATE: _____

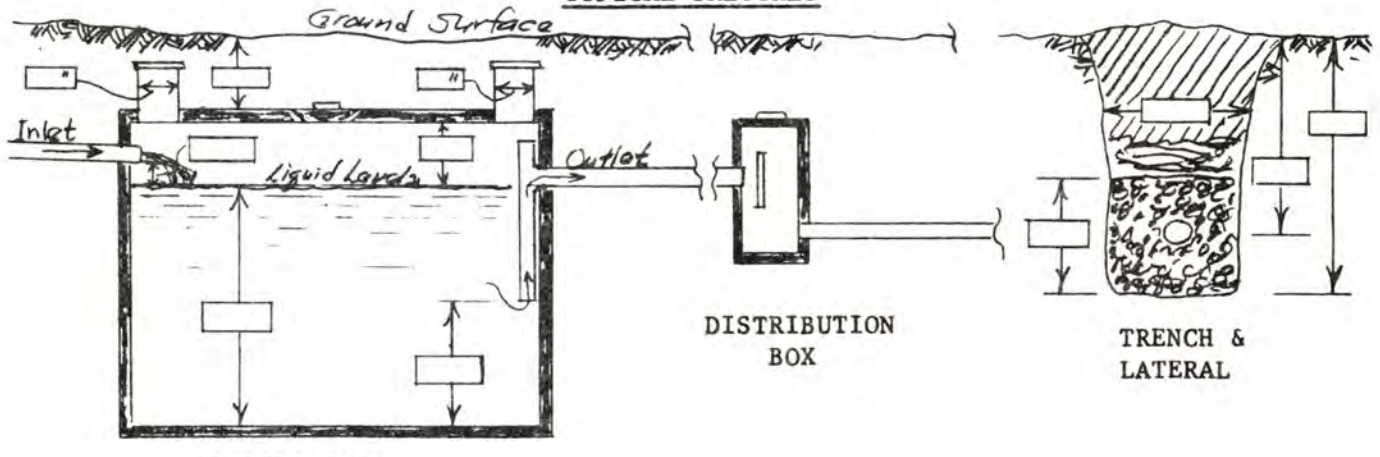
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
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 ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

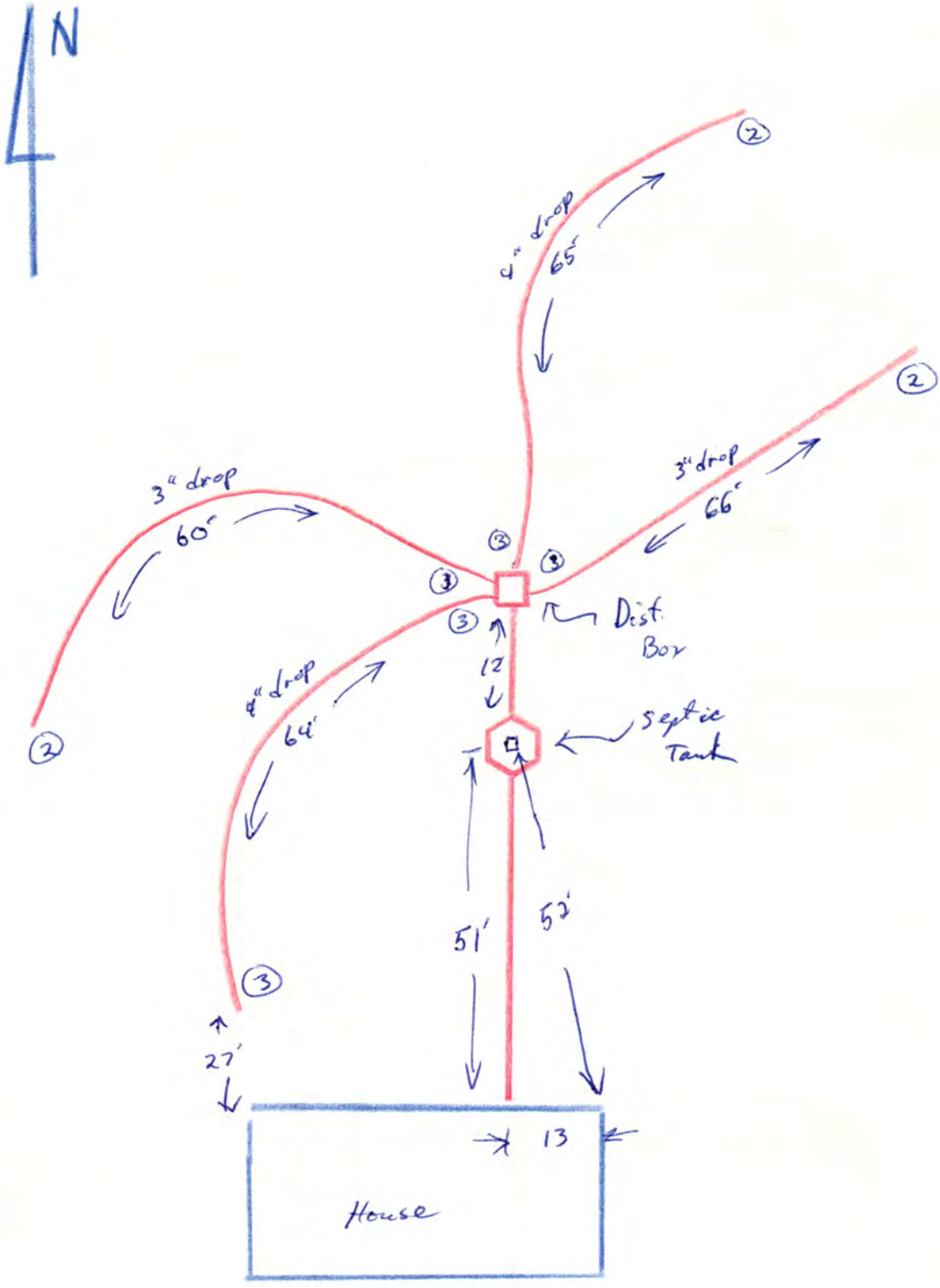
C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade __in.
Number ____; Length of each line ___ft
Total length of Laterals 230 ft.;
Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 36 in.
4. Filter Material: _____.
Depth of material from trench bottom _____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


N
4" drop
65'
2
3" drop
66'
2
3" drop
60'
2
4" drop
64'
3
3
3
3
Dist. Box
12'
Septic Tank
51'
52'
27'
13'
House

Oct-27-75
sm

P-7064-25
11/8/99

99111 8001 MF

Lincoln-Lancaster County Health Department

P12220-K5

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

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment 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.

LCR 425

Legal Description of Property: Street Address 4801 WEST MULBERRY ST

Twp 10N Range 6E Section 31 1/4 NE 1/4 Block 1 Lot 1 Addition HIGHRIDGE WEST ACRES 1st

Directions to Property WEST ON A TO 4800 Block

Location of Well BEHIND HOUSE Tap Location: Inside ☐ Outside ☒

Location of Sewage System IN FRONT OF HOUSE AT STAKE Year Installed 1975

	NAME	ADDRESS	PHONE
Present Owner:	ROBERT FRANKEN LUDWIG	4801 WEST MULBERRY LINCOLN, NE 68522	438-9542
Tenant/Buyer:	J. DON HAGEMOSER	1316 SO 8TH LINCOLN, NE, 68502	435-2224
Return to:	BOB TALLICHET	2821 SO. 79 LINCOLN, NE 68506	430-8255

Signature of Applicant J. Don Hagemoser Address 1316 SO 8TH LINCOLN, NE 68502 Date 11/5/99

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 11/5/99 ✓
Initials CW
Amount $150.00 ✓
Check No. 1737 ✓

DATA ENTRY
Date ____/____/____
Case No. ____
Initials ____

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 11/8/99

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ____ /ml
Nitrate	☒ 1.4 ppm	☐ ____ ppm

SEWAGE SYSTEM
Approved ☒
Provisional ☐
Disapproved ☐

Additional Site Visits
Date____/____/____by____
Date____/____/____by____
Date____/____/____by____

Comments: 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 11/17/99

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.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 10-95

002

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / LO

This form must be completed and returned to request

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☑ Evaluation of the Individual Water System Date: Nov. 9, 1992

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

Legal Description of Property: TWP. 10N; RANGE 6E; SECTION 31; BLOCK 1

LOT 1; ADDITION 1st (High Ridge West); Street Address 4801 W. Mulberry

Directions to Property

Off W. A Street

Location of Well Back - can see from deck Tap Location: Inside ☐ Outside ☑

Location of Sewage System Front Year Installed On File

	NAME	ADDRESS	PHONE
Present Owner:	John Edelmaier & Maria Stewart		438-1934
Tenant/Buyer:	(Please call if possible)		
Return to:	Nebr. Title - 1610 So. 70th - 68506 Attn. Lane		

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 NOVEMBER 12, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE NOVEMBER 13, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 11/13/92 by L.C.H
Bacteria	☒	☐	Provisional:	☐	Date _____ by ____
Nitrate	☒	☐	Disapproved:	☐	Date _____ by ____

Comments: LADY STATES SEPTIC TANK HAS NEVER BEEN PUMPED IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. WOULDN'T HURT TO PLACE A COUPLE MORE BOLTS IN WELL CAP. See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Gerald C. Hood R.E.H.S. DATE NOVEMBER 23, 1992

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