LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 812-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

November 9, 1976 — THIS PERMIT EXPIRES

Mary Dittenber — ISSUED TO

6701 Fremont Street, Lincoln — ADDRESS

T11N; R7E; Sec. 11; — 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
Rec	5/12/76	30.00

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH DEPARTMENT

ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

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. 812-C

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

DATE: _____

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. 11N ; Range 7E ; Section 11
Block _____; Lot _____; Addition see attached 5.1 ac inclusive of Road
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.

Mary Dittenber
Signature of Applicant (Owner or Lessee)

6701 Fremont St.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/11/76. Date Frwd. 5/12/76.
ACTION: Approved ☒ Disapproved ☐
Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 5-12-76. Date Frwd. _____.
ACTION: Approved ☒ Disapproved ☐
Signature: Tom Barash

3. City or County Engineer: Date Rec'd. 5/12/76. Date Frwd. 5/12/76.
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. 812-C

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 appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto. see attached

1. Legal description of property: Twp. 11N ; Range 7E ; Section 11 ; Block ; Lot ; 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. 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).

Mary Dittenber
Signature of Applicant (owner or lessee)

6701 Fremont St.
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 8-20-76 by: ODS.
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐ 5/11/76
by: Jarrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-20-76 by: ODS

12440 N. 84th

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. 872-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: May 76 to May 2 76. Weather: Precip. 0 Temp. 50° 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	32"	5/1	2 PM	5/2	12 PM	5/2	12	6"	30'	5	30M	0	
2										3		1/2	
3										1		3/4	
4										1		3/4	
5										1		3/4	
6										4.5		1/4	

Robert D Irvine
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: May 11, 1976

Approved Percolation Rate(s)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

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. 812-C

SPECIFICATIONS

DATE: _____

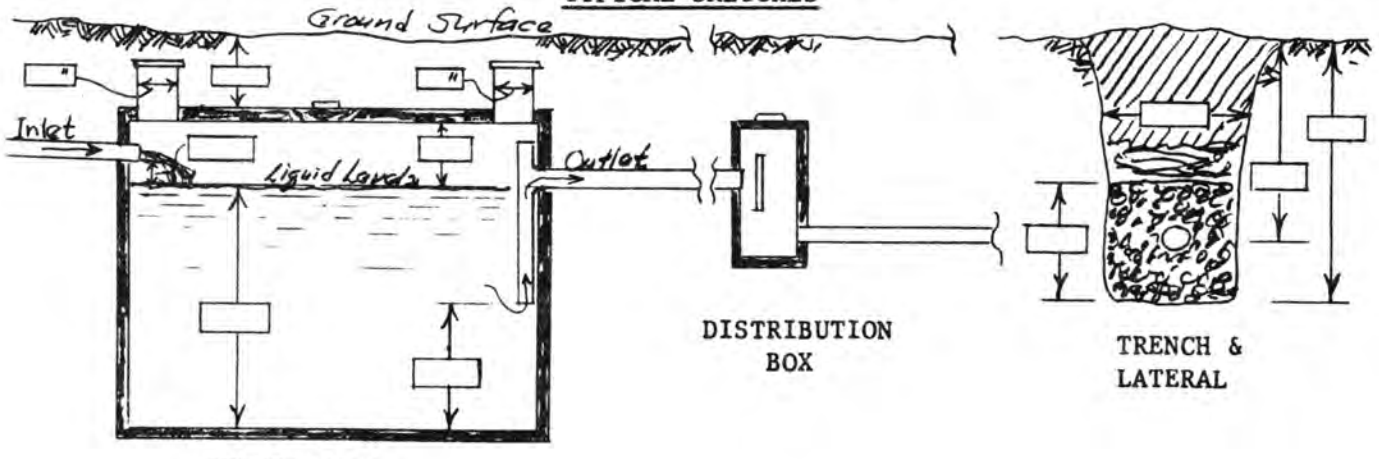
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth 51 in.
3. Factory Built: Yes ☒ (Company Cal Stone Co.)
No ☐
4. Manholes: Over Inlet; diam. 24 in.
Over Outlet; diam. 24 in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☒; or Tee ☐
Depth of outlet below inlet 1 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 Concrete; No. available outlets 5.
2. Factory Built: Yes ☒, (Company Cal Stone Co.) No ☐
3. Dimension: Length 20 in.; Width 24 in. Depth 17 in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Hall mon
2. Lateral Lines: Depth below grade __in.
Number 3; Length of each line ___ft
Total length of Laterals 247 ft.;
Slope ____in/100 ft. Diameter of pipe 20 in.; Shape Hallmon
Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: Good gravel.
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



SEPTIC TANK

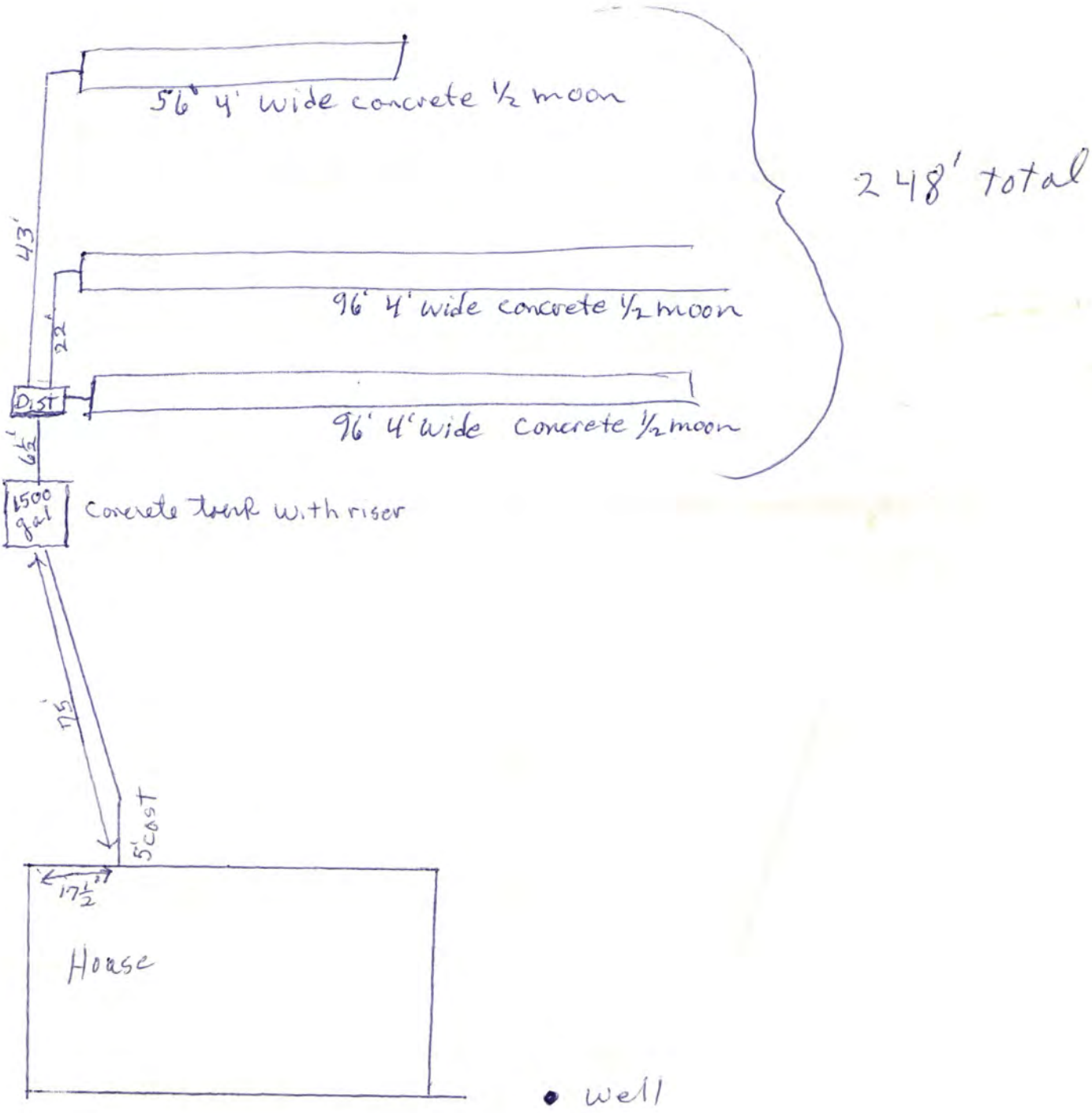
Signature of Applicant

Dittenber
466-3692

12,400 No 84th

Installed by Strahmyer

1" – 1½" Fall on Laterals

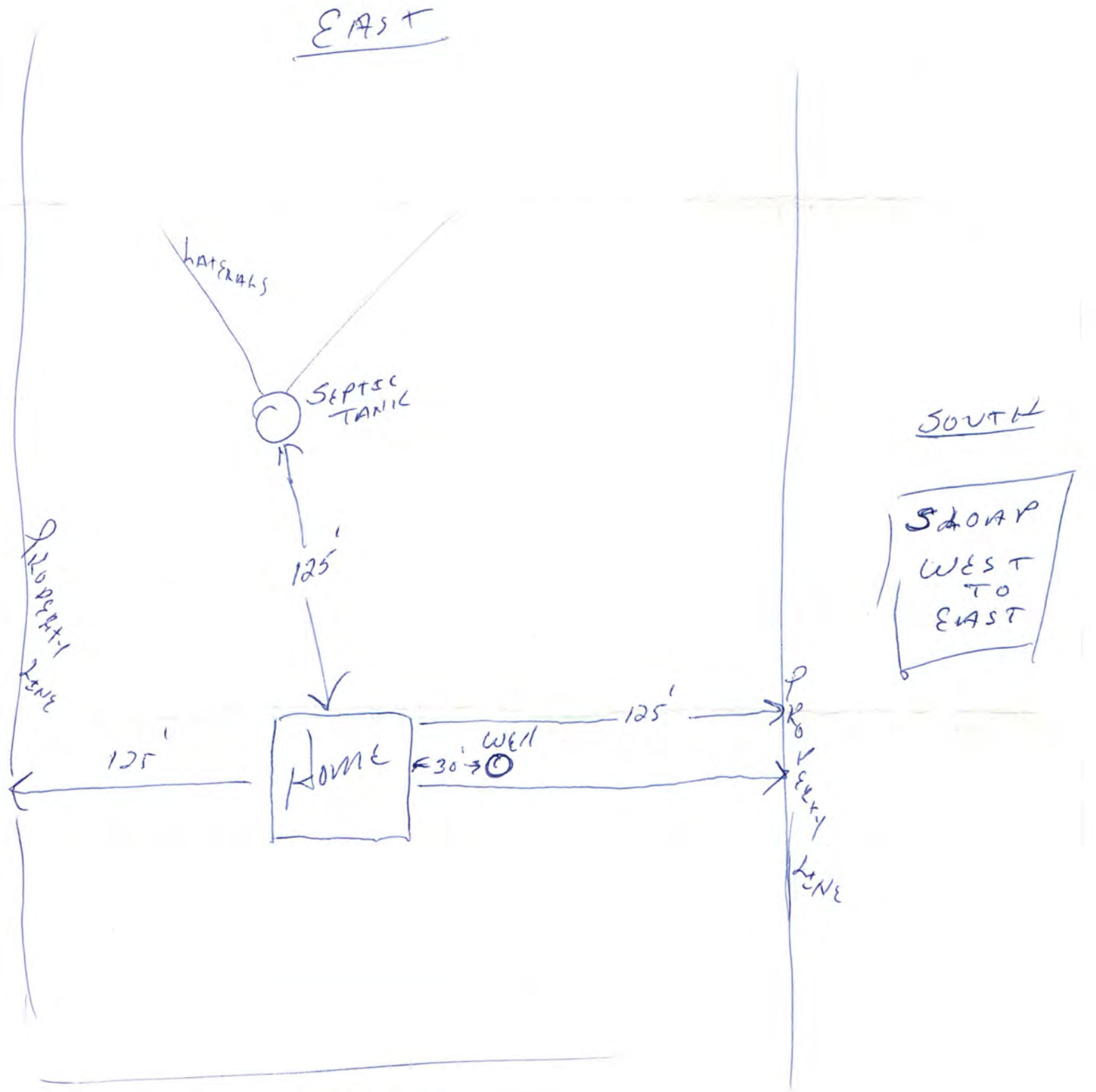


N

GOODYEAR

BY _____ DATE _____ SHEET NO _____ OF _____

SUBJECT _____ PROJECT _____



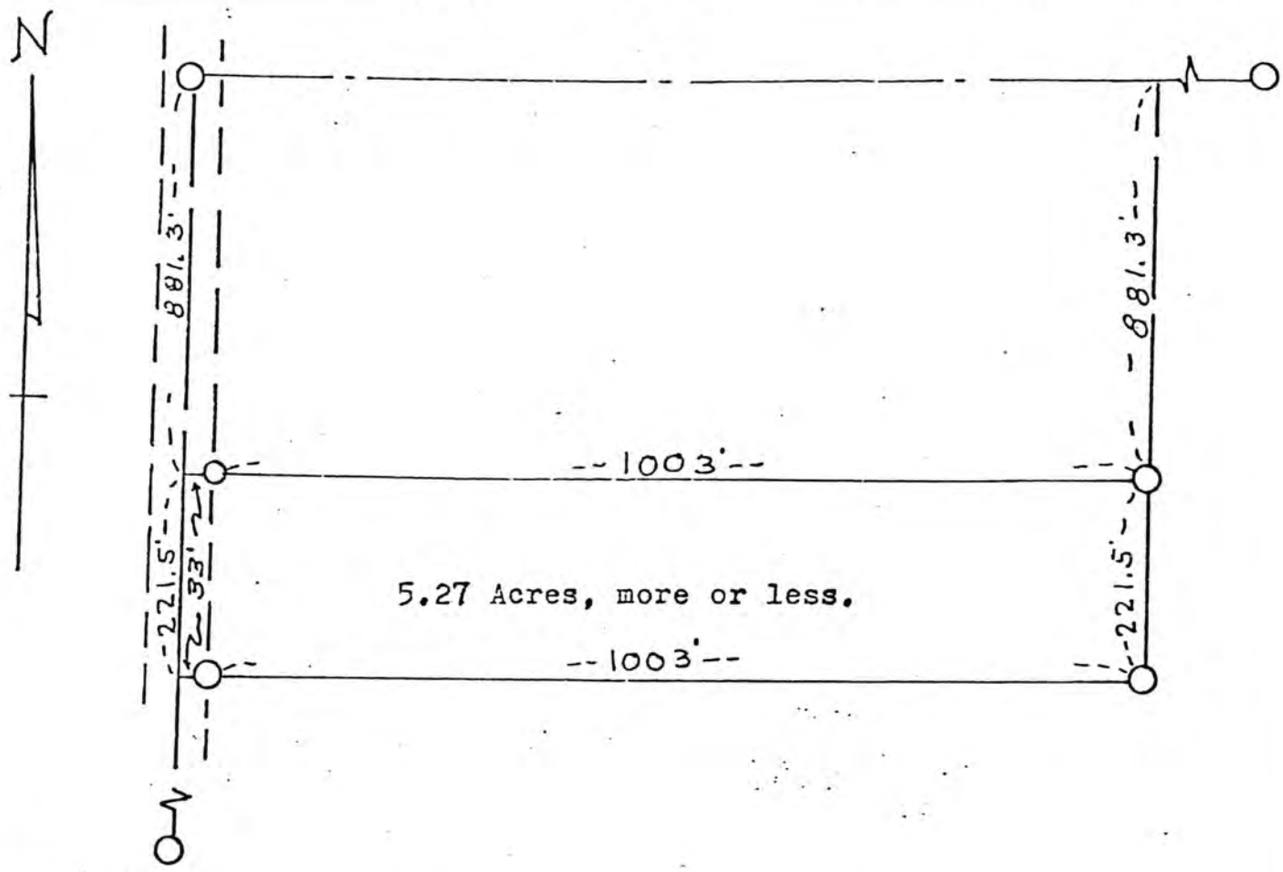
F-51 (12-79)

Survey of: A 5.27 Acre tract in the SW¼ of

Section 11 T 11 N, R 7 E of 6th P.M.

Survey No. (To be assigned by County Surveyor)

Date April 16 19 75 Weather Moderate



Field Notes:

Show descriptions of corners found and restored; distances chained; angles measured, if any; courses and bearings of irregular tracts surveyed; and ties taken to corners. Use reverse side if necessary.

LEGAL DESCRIPTION

A tract of land located in the SW¼ of Section 11, T11N, R7E of the 6th P.M., Lancaster County, Nebraska, described as follows:

The South 221.5 feet of the North 1102.8 feet of the West 1036 feet of the said SW¼ of Section 11, containing 5.27 Acres, more or less.

Revised Mar. 29, 1976

Signed this 16 day of April 19 75

Name: Leland V. Johnson

Surveyor's license No. L.S. 101

Land Surveyor's Seal

KIANN

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 12440 No 84th

Twp 11 Range 7E Section 11 1/4 SW 1/4 Block Lot 40 Addition

Directions to Property No of Waverly Rd on No 84th

Location of Well SW corner of House Tap Location: Inside ☒ Outside ☒

Location of Sewage System East & North- Year Installed

	NAME	ADDRESS	PHONE
Present Owner:	Gene Jeffries	12440 No 84	464-4205
Tenant/Buyer:	Garry Schultz	14431 Eastbourne Waverly	786-2263
Return to:	Kiann	State Title 1023 Lincoln Mall Lincoln NE 68508	434-5040

Signature of Applicant Dirk Roberts Address 3910 South ST. Lincoln NE 68506 Date 11/21/95

HEALTH DEPARTMENT USE ONLY

Date Received 11/22/95 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Ron Marquart **DATE:** 11/27/95

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

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☒ **SEWAGE DISPOSAL SYSTEM** Approved: ☑

Provisional Approval: ☐

Approved by Ron Marquart Date 12/7/95

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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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: 10/18/92

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

Legal Description of Property: TWP. 11; RANGE 7; SECTION 11; BLOCK ___

LOT 40; ADDITION _____; Street Address 12400 No. 84th

Directions to Property 1/4 MILE NORTH WAVERLY ROAD

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

Location of Sewage System EAST HOUSE Year Installed 1975

	NAME	ADDRESS	PHONE
Present Owner:	GENE H. JEFFRIES	12400 No. 84th	464-4205
Tenant/Buyer:			
Return to:			

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

Signature of Applicant Gene H. Jeffries Address 12400 No. 84th

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HEALTH DEPARTMENT USE ONLY

Date Received 6-4-92 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 10-27-92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 10-27-92 by [illegible]
Bacteria	☒	☐	Provisional:	☐	Date _____ by ___
Nitrate	☒ <0.1	☐	Disapproved:	☐	Date _____ by ___

Comments: Recommend checking to see if septic tank needs pumping. Recommend not allowing livestock over the subsurface lateral

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ron Mayhew, R.S. DATE 11-3-92

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