LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

ENVIRONMENTAL HEALTH DIVISION

NON TRANSFERABLE

PERMIT

Permit No. 96380144301

SEWAGE INSTALLATION

Issued 06/27/96
Expires 12/27/96
Revenue Code 18754

Establishment

STEVEN CHAMPOUX
T10N R6E SEC 32
HIGH RIDGE ESTATES BLK 3 LOT 6
3700 HIGH RIDGE

FEES: $150.00

TOTAL $150.00

Permittee

STEVEN CHAMPOUX
BOX84891
BOX 84891
LINCOLN NE 68501

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"

002177

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
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $_____

FILE NO._____

DATE: 6-18-96

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. 10N ; Range 6E ; Section 32 ;
Block 3 : Lot 6 : Addition High Ridge Estates
Street Address 3700 HIGH RIDGE

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
No. of Bedrooms 3 . Describe SFR

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

4. Distance to public sewer: _____ ft. WILL INSTALL WHATEVER SOIL PERCOLATION TEST INDICATES

Signature of Applicant (Owner or Lessee)

Box 84891 Lincoln
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/27/96. Date Frwd. 6/27/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 6/27/96. Date Frwd. 6/27/96. ACTION: Approved ☒ Disapproved ☐ Signature:

3. City or County Engineer: Date Rec'd. 6-27-96. Date Frwd. 6-27-96. ACTION: Approved ☒ Disapproved ☐ Signature:

REMARKS OR ~~REASONS FOR DISAPPROVAL~~ SURFACE DRAIN FIELD PASSES OVER LATERALS — SHOULD BE LANDSCAPED TO RE-DIRECT WATER DRAINAGE AROUND THE DRAIN FIELD.

Site Visits:
Date: 11-15-96 by: JKM
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-18-96 By: John E Minier REHS

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

FORM 23-43

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
3140 N Street
Lincoln NE 68510
(402)-441-8022

B

FILE NO. _____

3700 High Ridge

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ ft. Area: _____ 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. 10th mo Temp. 92 Humid Hi 9

OWNER: Prairie Homes

Address: Box

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	36"	7-26	6:00	7-27	7:00	7-27	7:00	6"	7:30	5"	30m	1"	30MIN/IN
2	"	7-26	6:00	7-27	7:00	7-27	7:00	6"	7:30	5¼	30m	¾"	40MIN/IN
3	"	7-26	6:00	7-27	7:00	7-27	7:05	6"	7:30	4¾"	30m	1¼"	24MIN/IN
4	"	7-26	6:05	7-27	7:00	7-27	7:05	6"	7:30	4½	30m	1½"	20MIN/IN
5	"	7-26	6:05	7-27	7:00	7-27	7:15	6"	7:45	5"	30m	1"	30MIN/IN
6	"	7-26	6:05	7-27	7:00	7-27	7:15	6"	7:45	5¼	30m	¾"	40MIN/IN
7	"	7-26	6:05	7-27	7:00	7-27	7:15	6"	7:50	4½	40m	1½"	20MIN/IN

Phillip D Nolte
Signature of Person Conducting Test

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

Address Rt 6 Box 52 Phone 438-3349

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: OCTOBER 12, 1996

Approved Percolation Rate (a)
A. 29 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Wood
Signature of Reviewing Official

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

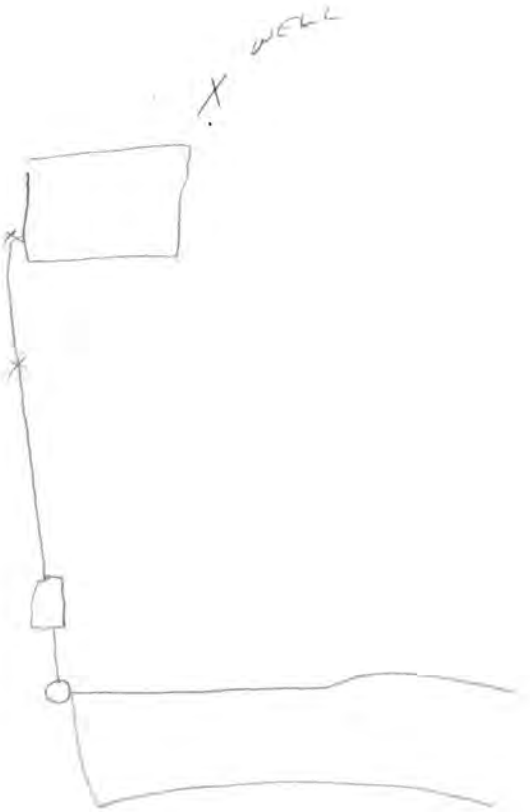
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

C

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

FILE NO. _____

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



REVIEWING ACTION

Remarks: NOT SUBMITTED WITH APPLICATION.

Date: OCTOBER 2, 1996

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 738 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

3700 Highridge

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

Lincoln-Lancaster County Health Dept.
3140 "N" Street
Lincoln, NE 68510

D

DATE: _____

FILE NO: _____

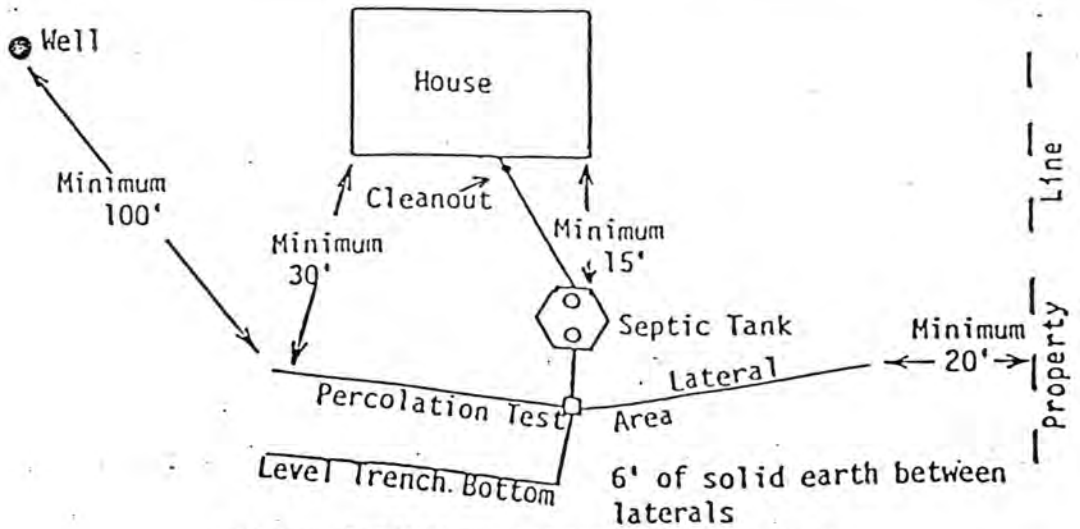
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 182 ft.
4. Number of clean-outs 2 .
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)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ___ in.
5. Inlet: Baffle ☑ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
7. Depth of top of tank below finished grade 12 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)
3. Distance from Septic Tank 5 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☑ Perforated Pipe ☐
Diameter of Half Round 12 or Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☑ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 2 ; Length of each line 91 , 94 , _____ , _____ , _____ ft.;
Total length of laterals 185 ft.;
Distance between lateral lines 15 ft.
3. Trench dimensions: Width 4 ft.;
Slope _____ in/100 ft.; Average Depth 36 in.
4. Filter Material: Gravel
Depth of Material 22 in.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

3700 Highway 9

Capital City Trenching

11-14-96

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514
PERMIT

(402) 441-8000

Permit

WATER WELL

No. 96400056301

Issued 06/28/96
Expires 12/28/96
Revenue Code 19851

Establishment

STEVEN CHAMPOUX
T10N R6E SEC 32
HIGH RIDGE ESTATES BLK 3 LOT 6
3700 HIGH RIDGE

FEES: $75.00

TOTAL $75.00

Permittee

STEVEN CHAMPOUX
BOX84891
BOX 84891
LINCOLN NE 68501

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"

002178

FORM: 20222-0483
REQUEST FOR SITE CLEARANCE AND PERMIT FOR INDIVIDUAL WATER WELL

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN, NEBRASKA 68502
PHONE: 471-7800

FILING FEE $ _____

FILE NO. 964000563

DATE: 6-18-96

The undersigned hereby requests: Site Clearance and Permit to construct a new individual water well ☒ ; Permit existing well ☐ ; well repair or alteration involving opening of well ☐ ; in conformance with appropriate ordinance, as described herein:

1. Legal description of property: Twp. 10N : Range 6E : Section 32
   Block 3 : Lot 6 : Addition High Ridge Estates
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe SFR
3. Distance to Public Water Supply: _____ Ft.
4. Intended use of well SFRes.

Steve Chaney
Signature of Applicant (owner or lessee)

Box 84891 Lin 68501
Address

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 6/27/96. Action: Approved ☒ Disapproved ☐
   Date Frwd. 6/27/96. Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 6/27/96. Action: Approved ☒ Disapproved ☐
   Date Frwd. 6/27/96. Signature: _____
3. City or County Engineers: Date Rec'd 6-27-96. Action: Approved ☒ Disapproved ☐
   Date Frwd. 6-27-96. Signature: M McElvaine

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 12/10/96 by Jerrold C. Hood
Date: _____ by _____
Date: _____ by _____

Nitrate Level <0.1 PPM CHLORIDE 32 PPM
Bacteriological Analysis Satisfactory
Yes ☒ No ☐

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12/13/96 By: J. C. Hood

Health Department copy: White
Engineers Copy: Light Green
Building Inspectors Copy: Light Blue

FORM 23-13

OCT 1 1 1996

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. 96-0000563

Lincoln-Lancaster County
HEALTH DEPARTMENT
3140 "N" STREET LINCOLN, NE 68510-1514

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 32 T. 10 R. 6 Block 3 Lot 6 Addition 3700 W. HIGHTRIDGE RD

Owner Prairie Home Builders Address P. O. BOX 84891, Lincoln, 68501

LOG OF WELL	
Depth ft. --to--	Description
0- 15	BRN CLAY
15- 60	YEL CLAYS
60- 80	BLUE CLAY
80-105	SILTY BLUE CLAY
105-135	SILTY YEL & BLUE SHALE
135-175	FINE TAN SANDSTONE
175-195	MED FINE TAN SS
195-200	SANDY BLUE SHALE

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER

Depth (from ground level) Ft. 195
Date Completed 8-26-96

Casing: Length, Ft. 180 ; Dia. In. 4"
Wall Thickness, Inc. .214 ; type PVC

Screen: Length, Ft. 15' Dia. In. 4"
Type PVC SLOTTED , slot Size .025

Drop Pipe: Length, Ft. 120 Dia. In. 1¼"

Water Level, Surface to top of water, Ft.
Static 92', Pumping 100 est.

Yield: 50 gpm, Measured ☒ Est. ☐
Chlorination Completed Yes ☒ No ☐

The above information including "Log of Well" is a true record of the job performed by me.

Driller _____ (Signed)

Address P. O. BOX 308
HICKMAN, NEBRASKA 68372

Date 10 October 1996

REMARKS NITRATE NITROGEN < 0.1 p.p.m.
BACTERIOLOGICAL O.K.
CHLORIDE 32 p.p.m.

DO NOT WRITE BELOW THIS DOUBLE LINE

Health Department forwarded copy of record to Nebraska Conservation and Survey Department for Scientific Record ☒

1985 33-4



AREA
OF
SEPTIC SYSTEM

~~9/14/98~~ 11-19-98

LLCHD -- Well Data Entry

Permit Number: 9640 0056 ID Number: Date Abandoned:

Lat Deg: Min: Sec: Lng Deg: Min: Sec: Elev:

Township: 10N Range: 6E Section: 32 Quarter: Quarter/Quarter:

Blk: 3 Lot: 4 Addition: High Ridge Estates

House No: 3700 Dir: W. St. Name: High Ridge St. Type Rd Suf:

Well Use: Res Applicant: Steve Champoux

Owner: Prairie Home Builders Drlr: Bill Moser

Drl Method: Roto Date Cmpltd: 08/26/98 Well Depth: 195' Cs Lngth: 180' Cs Dia: 4"

Cs. Type: PVC Screen Length: 15' Static Lvl: 72' Pumping Lvl: 100 Yield: 50 gpm