LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2095-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF PERMIT

December 5, 1984
THIS PERMIT EXPIRES

Roger & Elaine Pieper, 4131 N. 42nd. Circle, Lincoln, NE. 68504
ISSUED TO — ADDRESS

T.11N, R.6E, Sec. 11, Lot I.T.
LEGAL DESCRIPTION

REMARKS: 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: ED
DATE: 6/5/84
AMOUNT:
VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

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

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: 474-1541

A

FILING FEE: $ #60.00

FILE NO. 2095-C

DATE: June 4

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. 11N; Range 6E; Section ~~14 & 14~~ 11
   Block _____: Lot 2 I.T.: Addition _____
   Street Address _____

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

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

4. Distance to public sewer: greater than 2 miles ft.

Elaine Sieper
Signature of Applicant (Owner or Lessee)

Rt 1 - Box 171 B - Raymond Ne 68428
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/4/84. Date Frwd. 6/5/84. ACTION: Approved ☑ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☑ Disapproved ☐ Signature: Gerald Dennis

3. City or County Engineer: Date Rec'd. 6/5/84. Date Frwd. 6/5/84. ACTION: Approved ☑ Disapproved ☐ Signature: Don Thomas

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 9-27-84 by: DM
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-27-84 By: Ron Maynard

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: 474-1541

B

13301 N. 14th

FILE NO. 2095-C

PROPERTY WHERE SOIL TESTED: Lot #2

Location: Township 11 ; Range 6 ; Section & ¼ Section NE¼ NE¼.
Property Dimensions: 291.3 ft. x 795.6 ft. Area: 5.32 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 6/2 ~~6/3~~ to June 3 . Weather: Precip. 0 Temp. 80 .

OWNER: Roger & Elaine Pieper

Address: Rt 1 - Box 171B. Raymond 68428

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	30	6-2	7:00	6-3	4:00	6-3	4:15	14½					
2	30	6-2	(	6-3	(	(	(	16					
3	30	6-2	)	6-3	)	)	)	13½					
4	30	6-2	)	6-3	)	)	)	13					
5	30	6-2	)	6-3	)	)	)	12					
6	30	6-2	)	6-3	)	)	)	16½					

Roger Pieper & Elaine Pieper
Signature of Person Conducting Test

Address Rt 1 - Box 171B Raymond 68428 Phone 785-7295

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

(Do not write below this line)

REVIEWING ACTION

Remarks: CLAY
Soil Type (SCS): Coeta silty loam
Date: _____

Approved Percolation Rate (a)
A. 53 min./inch
B. _____ min./inch
C. _____ min./inch

Ron Marquardt
Signature of Reviewing Official

PAGE

NAME CONTACT DATE

ADDRESS 1st APPT. DATE

CITY PHONE DATE SOLD

DIRECTIONS

MERCHANDISE

	4:10 - 4:40	4:45 - 5:15	5:20 - 5:50	5:55 - 6:25
1.	14 1/2	15 1/2	14 3/4	15
2.	16	16 1/2	16	16 1/2
3.	13 1/2	14	13 1/2	13 3/4
4.	13	13 1/2	13 1/8	13 3/4
5.	12	12 1/2	12 1/2	12 1/2
6.	16 1/2	17	16 3/4	17

6:30 - 7:00	7:05 - 7:35	7:40 - 8:10
15 1/8	14 1/2	15 - 1/2
16 3/8	16	16 5/8 - 5/8
13 7/8	13 3/8	14 1/8 - 5/8
13 5/8	13 1/2	13 3/4 - 3/4
12 7/8	12 3/4	12 3/4 - 3/4
16 5/8	17	16 3/4 1/4

.50
.625
.625
.75
.75
.125

7.500

5.86
6) 35.00
39
800
54
40

53 min/mi

1.86
6) 11.25
11
25
24

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: 474-1541

C

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

FILE NO. 2095-C

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

REVIEWING ACTION

Remarks: _____

Date: June 4, 1984

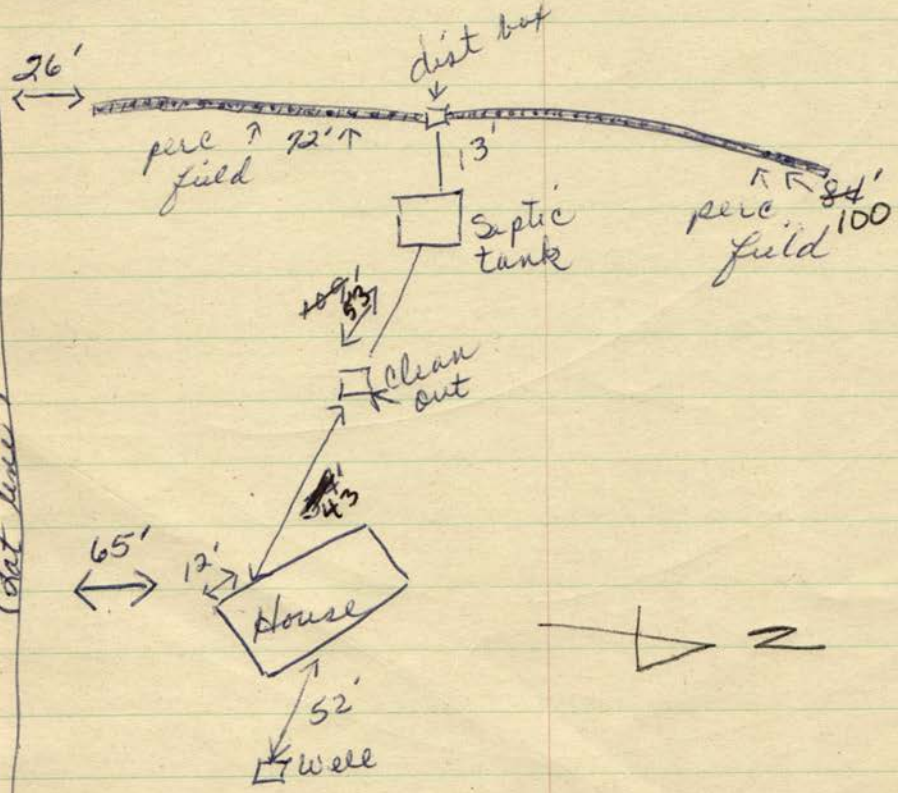
Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 625 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

13301 N 14th

Roger Sieper
Rt 1 - Box 171B.
Raymond Ne. 68428
785-7295
} mailing address

Phone in construction home 475-3992



726' East & West (Lot)

356' North & South (Lot)

Lincoln-Lancaster County Health Department

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.

Legal Description of Property: Street Address 13301 N. 14th St, Raymond

NE Sect. Twp 11 Range 6E Section ~~NE~~ 1/4 ___ 1/4 ___ Block ___ Lot 2 Addition ___

Directions to Property 11 ↑ 6

N. on 14th St from Lincoln

Location of Well ___ Tap Location: Inside ☐ Outside ☒

Location of Sewage System ___ Year Installed ___

→ call owner

	NAME	ADDRESS	PHONE
Present Owner:	Linda Zeigler	13301 N. 14th St Raymond 68428	476-7482
Tenant/Buyer:	Richard & Peggy Neuhaus	RR3 Box 57 Columbus NE 68601	(402) 564-0924
Return to:	Lynne Schroeder	Woods Bros. Realty 3737 S. 27th Lincoln, NE 68502	(402) 499-2222

Signature of Applicant Lynne Schroeder for Peggy & Richard Neuhaus

Address 3737 S. 27th Lincoln NE 68502 Date 5/20/99

~~1705~~

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 05/20/99
Initials ~~LS~~
Amount 150 ~~00~~
Check No. 363

DATA ENTRY

Date ___/___/___
Case No. ___
Initials ___

NO3 P7726-69

Bac P8525-17 Des coli

PRELIMINARY STATUS--By Ron Maranowit **DATE:** 5/21/99

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☒ ~~Pos~~ shock treated /ml
Nitrate	☒ 3.6 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date 6/7/99 by rm
Date 6/9/99 by rm & O
Date ___/___/___ by ___

Comments: Recommend checking to see if septic tank needs pumping.

See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Maranowit, R.S. Date 6/18/99

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 - Bu

Revised/Reprint: 10-95

Bact → 6/16/99 P8525-61 negative

Bact → 6/14/99 P8525-60 negative

Bac. P8340-23

2nd Bac P8525-21

Closing 9-1-95

013

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 13301 No. 14TH

Twp 11N Range 6E Section ~~NE~~ NW 1/4 NE 1/4 NE Block ___ Lot 2 Addition ___

2846 Directions to Property APPROX. 7 MI. NO. OF SUPERIOR ST. ON No. 14TH WEST SIDE OF ROAD

Location of Well FRONT DOOR E. S.E. IN FLOWER BED Tap Location: Inside ☐ Outside ☒

Location of Sewage System UNDER OUT HOUSE IN BACKYARD Year Installed 1986

	NAME	ADDRESS	PHONE
Present Owner:	HAROLD M CROUSE	13301 No. 14TH	477 5449
Tenant/Buyer:	KENNETH W ZEIGER	1801 GROVELAND LINCOLN, NE 68521	476-7482
Return to:	BUYER	SAME	

Signature of Applicant Ken Zeiger Address 1801 GROVELAND LINCOLN, NE 68521 Date 8/7/95

HEALTH DEPARTMENT USE ONLY

Date Received 8/8/95 Received $150.00 Check ☒ 055426 Cash ☐

PRELIMINARY STATUS--By Ron Marquardt **DATE:** 8/8/95

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☐	Approved ☒	Date 8/17/95 by RM
Bacteria	☒ 0 /ml	☒ 1 /ml	Provisional ☐	Date 8/21/95 by ___
Nitrate	☒ 4.0 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Correct fee, with sheet. Left at

Comments: ___

See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Marquardt, RS Date 8/24/95

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.

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

~~2200 St Marys Avenue~~ 340 N ST. 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: 10-6-94

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

Legal Description of Property: TWP. 11 NORTH; RANGE 6 EAST of 6TH PM; SECTION 11; BLOCK ___

LOT 2; ADDITION ___; Street Address 13301 N. 14TH ST

Directions to Property 6 MI NORTH OF SUPERIOR ST ON WEST SIDE OF N. 14TH ST. JUST BEFORE MILL RD. (LOG CABIN HOME)

Location of Well FRONT YARD FLOWER BED (IRIS) Tap Location: Inside ☑ Outside ☑

Location of Sewage System BACK YARD WEST of WALK OUT UNDER OUTHOUSE Year Installed 1986

	NAME	ADDRESS	PHONE
Present Owner:	ROGER PIEPER	13301 N. 14TH RAYMOND 68428 NE	476-3992
~~Tenant~~/Buyer:	H. MICHAEL CROUSE	542 PIER ONE LINCOLN 68528 NE	477-6743
Return to:	H MICHAEL CROUSE	SAME	SAME 792-2045

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

Signature of Applicant H. Michael Crouse Address 542 PIER ONE LINCOLN 68528

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HEALTH DEPARTMENT USE ONLY

Date Received OCTOBER 6, 1994 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 10-11-94

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 10-11-94 by mm
Bacteria	☒	☐	Provisional:	☐	Date ___ by ___
Nitrate	☒ 39	☐	Disapproved:	☐	Date ___ by ___

Comments: Recommend checking to see if septic tank needs pumping.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ron Magnuson RS DATE 10-19-94

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