LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

PERMIT

Permit

SEWAGE INSTALLATION

No. 97380158201

Issued 05/19/97
Expires 11/19/97
Revenue Code 18754

Establishment

MARK BERG
T11N R6E SEC 9
VALLEY HOMES FARMS BLK ~~2~~ 1 LOT ~~1~~ 2
2200 W JAMES DRIVE

FEES: $150.00

TOTAL $150.00

Permittee

MARK BERG
3911 S 78 ST
LINCOLN NE 68506

4614

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"

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

A

Permit Number:

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☒ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 2200 W. James Drive (no rural route) City Lincoln NE, Zip 68

Legal Description 9 (1/4) (1/4) Section 11N Township 6E Range Valley Home Farms Subdivision 1 Addition 2 Block X Lot

Geographical Location (if known): Longitude _____ Latitude _____

☒ Check if system mail address is not the same as the owner's address

B. Owner

Name MARK BERG Signature X Mark Berg

Address 3911 So. 78th City/State/Zip Lincoln, NE 68506

☐ Check if owner designed system Home Phone 489-0615 Work Phone 473-1452

C. Contractor

Name Gerald Sterns Company Name Sterns Construction

Address _____ City/State/Zip Bennet, NE

☒ Check if contractor designed system Work Phone _____

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 4 Is there a Whirlpool Bathtub YES (NO)

☐ Commercial Establishment/Other Facility Specify _____

Design flow in gallons per day _____ Type of Wastewater: ☐ Domestic ☐ Non-Domestic.

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 2832

1. **Health Department** Date rec'd 5/16/97 Date frwd 5/16/97 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 5/16/97 Date frwd 5/16/97 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd _____ Date frwd _____ **ACTION** ☒ Approved ☐ Disapproved Signature Jim Blaugh

10-20-97, 2 laterals
10-21-97, 2 other laterals, need drawing

Installation Final Written Approval

By Ron Mayfield

Date 12-1-97

Business Office Use Only 3233

Date Rec'd 5/16/97

Amt Paid 150.00

Rec'd By _____ Cash/Check No. 1209

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 2200 West James Drive (no rural route) City Lincoln NE, Zip

Owner MARK BERG Addresss 3911 So. 78th Lincoln, NE 68506

Soil Type (SCS): Sandy / Clay Loam Percolation Rate: min./inch

Date of Tests 5/13 to 5/15 Weather: Precipitation NONE Temperature 65°

Percolation Test Data Table

	A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results		
			Start		End		Start			End				
	Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/in)
DAY 1	4	36"	5/13	1030 AM	5/13	830 PM	5/14	1030	6"	5/14	230	240	3/4"	40 MIN/IN
DAY 1	5	36"	5/13	1030 AM	5/13	830 PM	5/14	1030	6"	5/14	230	240	2"	15 MIN/IN
DAY 1	6	36"	5/13	1030 AM	5/13	830 PM	5/14	1030	6"	5/14	230	240	1 1/4"	24 MIN/IN
DAY 2	1	36"	5/14	500 PM	5/14	800 PM	5/15	1030	6"	5/15	230	240	2 1/8"	14 MIN/IN
DAY 2	2	36"	5/14	500 PM	5/14	800 PM	5/15	1030	6"	5/15	230	240	1 1/2"	20 MIN/IN
DAY 2	3	36"	5/14	500 PM	5/14	800 PM	5/15	1030	6"	5/15	230	240	1 1/4"	24 MIN/IN

Person Conducting Percolation Tests

Name: Dennis Svoboda

Phone: 488-3128

Address 4300 Lenox
Lincoln, NE

Sum of Percolation Rates:

Average of Rates:

Rate Used for Calculation: 40 MIN/IN

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

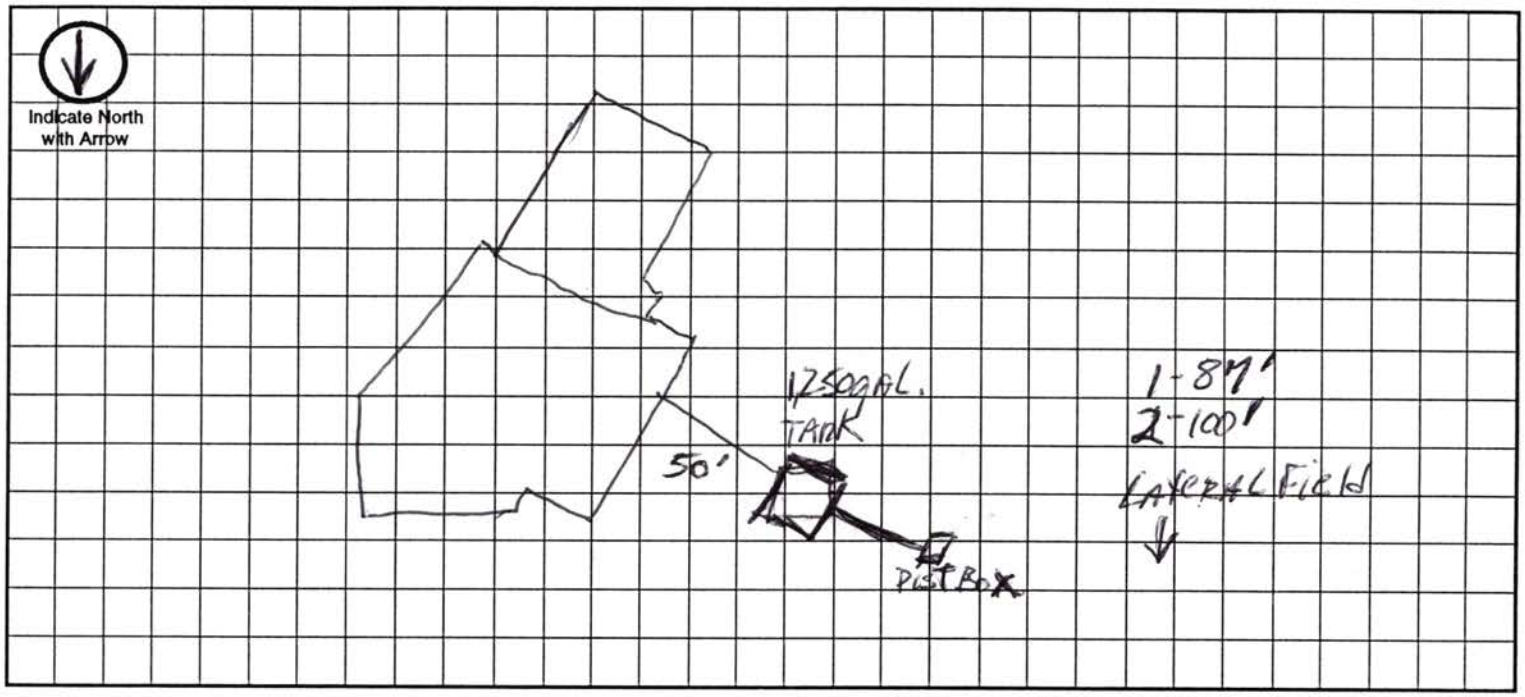
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

Sewage Disposal System
Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.



Approximate Scale: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 2200 West James Drive City Lincoln NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 40 (min. per inch) Soil Type: SHARPSBURG SILTY CLAY LOAM Land Slope: _____ %

Type of Absorption System: ☐ Trench ☐ Bed ☐ Other 3 @ 350 / 4 @ 287

Total Square Feet of Field Required: 1149 sq. ft. (3 × 24 = 72; 4 × 34 = 136; 136 + 72 = 208; 208 − 180 = 28)

Type of Lateral: ☒ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: _____

Capacity of Septic Tank 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 287 ft. Number of Trenches _____ Trench Width 4 FT

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Jeff Walker Date 5/16/97

Installer _____ Date 5/16/97

FORM 23-102 10-96

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

D

Permit Number:

Tim Hier
432-8948

Sewage Disposal System
As Built Plans & Specifications

Date 10-20-97

System Location (Indicate correct number and street)

Address 2202 W. James Rd (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: Sch 40 PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 10" in.
3. Distance between dwelling and septic tank: 70' ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☒ below grade 18" in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 18" 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: 6
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 10' ft.

D. Absorption Field

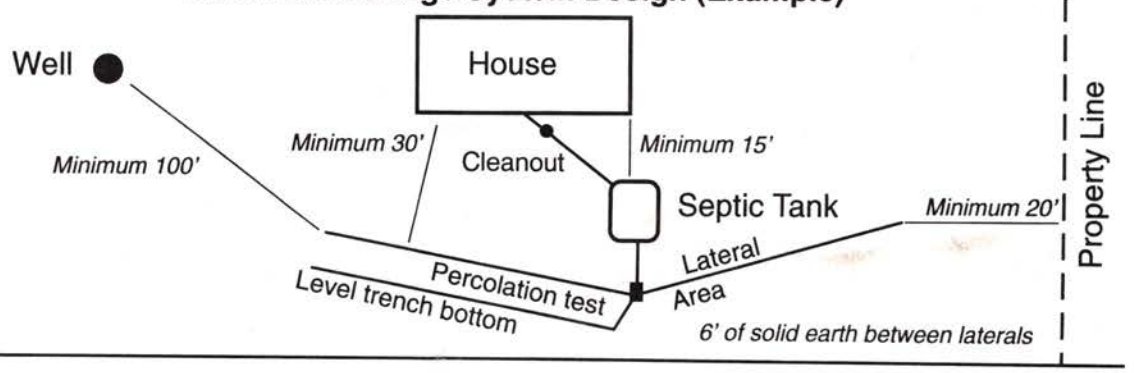
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 4"
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 100' ft. 90' ft.
   90' ft. 100' ft., _____ ft.
3. Trench dimensions: Width 3' ft.
   Slope 3" in/100 ft.
   Average depth 4' in
4. Filter material: Gravel
   Depth of material 6" To 7" in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Complete "As Built" drawing on back of this form.

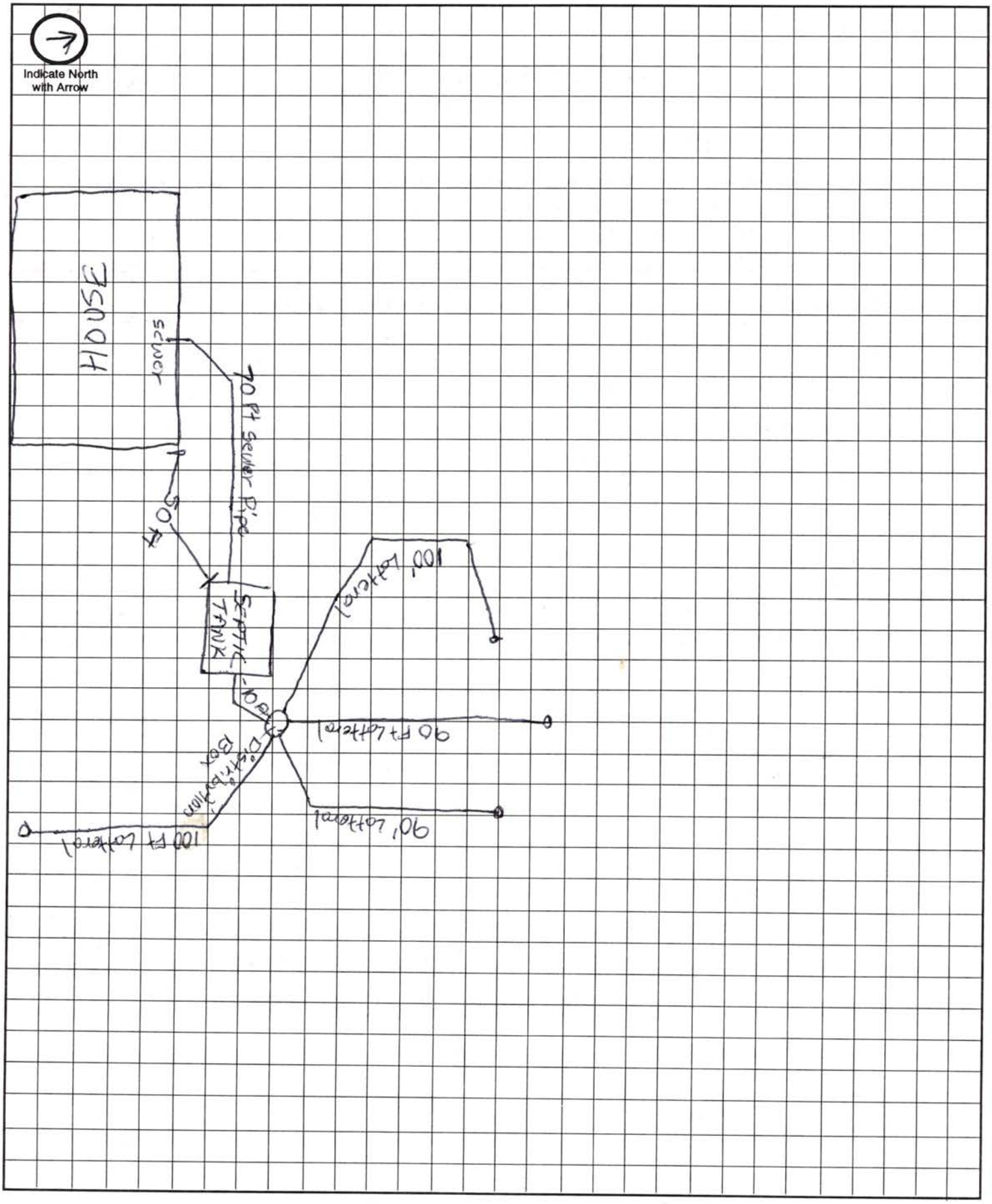
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



Approximate Scale: _____ft. = _____ grid line/s

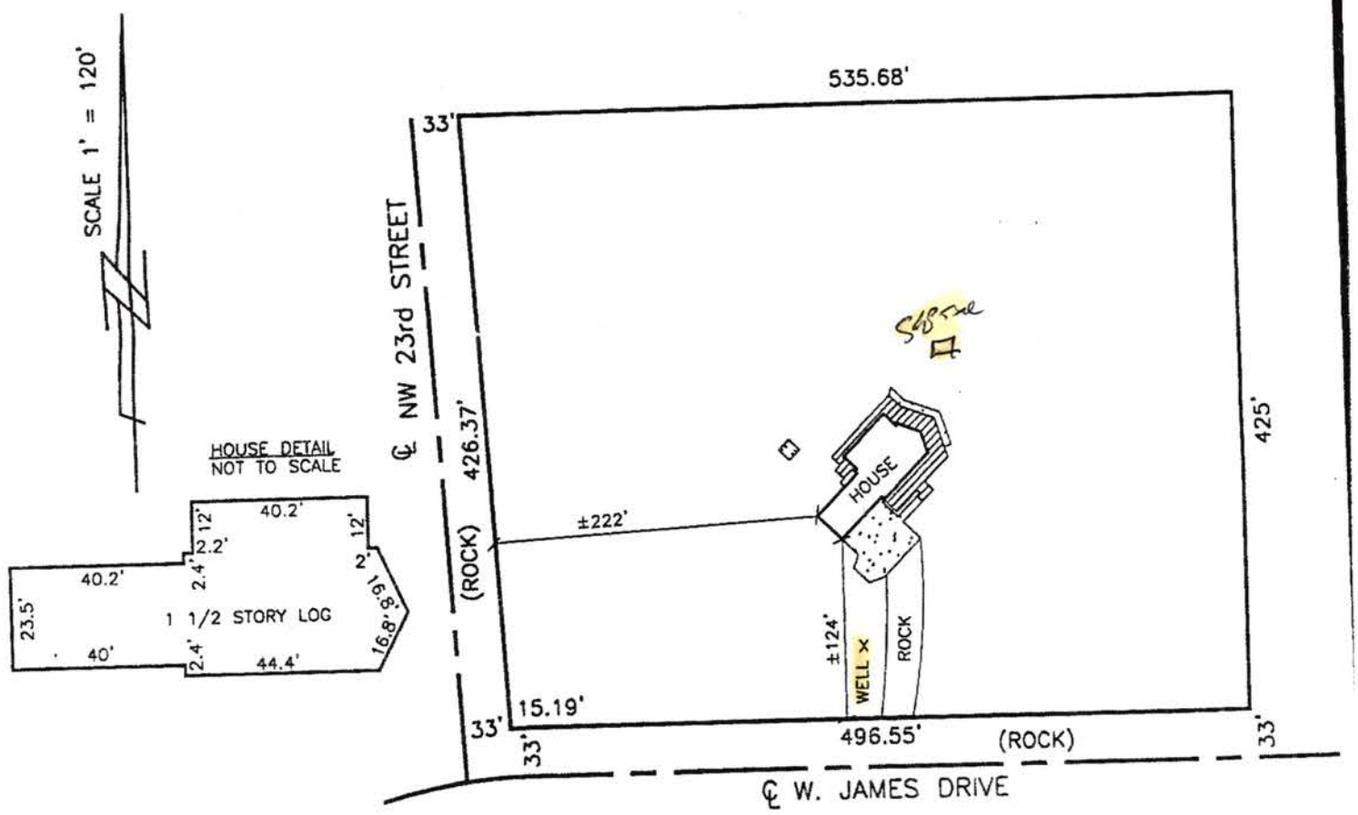
640 W. INDUSTRIAL LAKE DR.,
SUITE 1 · LINCOLN, NE 68528
(402) 476-3020
(402) 476-3138 FAX

K&M inc.
Land Surveying

MARK & PEGGY BERG
NEBRASKA TITLE COMPANY

PROJECT # 985137
DATE: 5-17-98 B/P: 68-46

2200 W. JAMES DRIVE



Subject property apparently falls within the confines of Zone " C " as determined by the FEMA-FIA Flood Rate Map community 310134, panel 0020 B, revised 2-3-82.

LEGAL DESCRIPTION: LOT 2, BLOCK 1, VALLEY HOME FARMS, LANCASTER COUNTY, NEBRASKA

SURVEYOR'S CERTIFICATE

The undersigned does hereby certify that the inspection made this day on the ground of the property legally described hereon and that there are no visible discrepancies, encroachments, overlapping of improvements, easements or rights-of-way in evidence or known to me, except as shown hereon. The foregoing is shown with an accuracy necessary to satisfy the needs of a lendor or insuror. This does not guarantee ownership, only the location of said tract. This plat is not a boundary survey and the accuracy may vary upon completion of a boundary survey.

Billy Joe Kerr

Billy Joe Kerr, L.S.

NEBRASKA REGISTERED LS-483 LAND SURVEYOR BILLY JOE KERR

Oct 14 02 10:36a SHUMAKER TIRE 4172711016 p.1


(Joins sheet 8)
N
1 Mile
5000 Feet
Scale 1:20000
(Joins sheet 14)
(Joins sheet 18)
470 000 FEET
2 760 000 FEET
OAK CREEK CEMETERY
UNION PACIFIC
Oak Creek
Warwick Rd
New septic
NW 27th
5
4
8
9
16
17

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 $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 2200 W. JAMES DRIVE

Parcel ID 12 - 09 - 301 - 002 - 000 (i.e. 99-99-999-999-999)

Twp 8N Range 6E Section 9 1/4 ___ 1/4 ___ Block 1 Lot 2 Addition VALLEY HOME FARMS

Directions to Property RAYMOND RD TO NW 27TH, SOUTH 1 1/2 MILES TO JAMES DRIVE EAST 1/3 MILE ON NORTH SIDE

Location of Well SEE SURVEY Tap Location: Inside ☐ Outside ☐

Location of Sewage System SEE SURVEY Year Installed 1997

Site Hazards (dogs, etc.) ___

	NAME	ADDRESS	PHONE
Present Owner:	MARK + PEGGY BERG	2200 W. JAMES DR RAYMOND, NE 68428	783-2015
Tenant/Buyer:	SCOTT COATSWORTH		
Return to:	ROGER HARPER HOME REAL ESTATE	225 N. COTNER BLVD LINCOLN, NE 68505	430-6670 323-7080 (Fax)

Signature of Applicant R A. Harper Address SAME AS ABOVE Date 10/16/02

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 10/16/02 Amount $200.00 Check No. 5959 Initials ___

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

PRELIMINARY STATUS--By Ron Marquart **DATE:** 10/17/02

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 4.0 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

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 Marquart, RS Date 10/21/02

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.

10-17-02 cks Ecrbs

P21617-34

White - Applicant after approval Yellow - Environmental Health

Revised/Reprint: 9-00

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 2200 W. James Dr. Raymond, Ne

Twp 10N Range 6E Section 9 1/4 ___ 1/4 ___ Block 1 Lot 2 Addition Valley View Farms

Directions to Property 1/4 MI NO. OF WAVERLY RD ON N.W. 27th Turn right onto West James Dr. 2 blocks

Location of Well FRONT YARD Tap Location: Inside ☒ Outside ☐

Location of Sewage System BACK OF HOUSE Year Installed 1997

	NAME	ADDRESS	PHONE
Present Owner:	Mark Berg	2200 W James Dr.	783-2015
Tenant/Buyer:			
Return to:	same		

Signature of Applicant Mark Berg Address 2200 W. James Dr. Date 6 / 2 / 98

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 6 / 3 / 98

Initials ns

Amount $150.00

Check No. 2259

DATA ENTRY

Date ___ / ___ / ___

Case No. ___

Initials ___

PRELIMINARY STATUS--By Ron Marquart **DATE:** 6 / 5 / 98

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 3.2 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___ / ___ / ___ by ___

Date ___ / ___ / ___ by ___

Date ___ / ___ / ___ by ___

Comments: Recommend checking every 2-3 yrs to see if septic tank needs pumping.

See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Marquart, RS. Date 6 / 15 / 98

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