LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 95380133101

Issued 08/15/95
Expires 02/15/96
Revenue Code 18754

Establishment
J. GREG SCHWINN
T11N R6E SEC 4
LOT 15
13700 NW 27 STREET

FEES: $150.00

TOTAL $150.00

Permittee
J. GREG SCHWINN
3707 TIMBERLINE CT
LINCOLN NE 68506

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"

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
3140 "N" STREET LINCOLN, NE 68510-1514

FILING FEE: $_____

FILE NO. _____

DATE: Aug 14, 1995

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. 11 N ; Range 6 E of th 6th PM Section 4 ; Block _____ : Lot 15 : Addition South Half of the Southwest Quarter. Street Address 13700 N. W. 27th St.

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

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

4. Distance to public sewer: _____ ft.

J. Greg Schwinn Homes Inc.
Signature of Applicant (~~Owner or Lessee~~) Contractor

3707 Timberline Ct. Lincoln, NE 68504
Address

(Do not write below this double line) S60-2041

1. Health Department: Date Rec'd. 8/14/95. Date Frwd. 8/14/95. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd 8/14/95. Date Frwd. 8/14/95. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

3. City or County Engineer: Date Rec'd. 8-14-95. Date Frwd. 8-14-95. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 8-24-95 by: mm mark fence
Date: 12-8-97 by: mm final cleanup
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12-8-97 By: [signature]

FORM 23-43

FORM 20104-0477
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: 471-7800

D

DATE: 8-14-95

FILE NO. _____

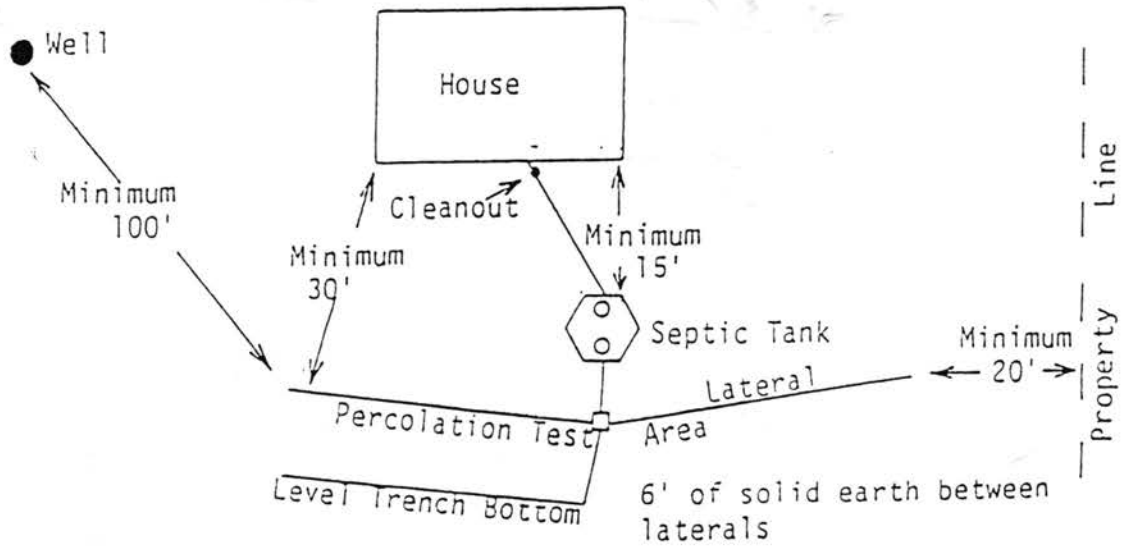
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material C PVC; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 16 in.
3. Distance between dwelling and septic tank 100 ft.
4. Number of clean-outs 3.
5. Distances to:
Well or Suction Line 180 ft.; Stream 250 ft.; Pressure Line _____ ft.; Property Line 100 ft.

B. SEPTIC TANK:
1. Material _____; No. of compartments _____.
2. Capacity _____ gals.;
3. Factory Built: Yes ☐ No ☐
(Company _____)
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 _____ in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material _____; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☐
(Company _____)
3. Distance from Septic Tank _____ 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 _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line _____, _____, _____, _____, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines _____ ft.
3. Trench dimensions: Width _____ ft.;
Slope _____ in/100 ft.; Average Depth _____ in.
4. Filter Material: _____
Depth of Material _____ in.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Pond
250'
13'
55'
Cleanout
45'
Cleanout
15'
Lagoon
180'
108'
Water Well
Property Line
Property Line
SW 27th
N

PID # 12-04-300-809-000 G-087847

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 13700 NW 27

Twp 11N Range 6E Section 4 1/4 ___ 1/4 ___ Block ___ Lot 157 Addition ___

Directions to Property on SW 27th just South of Raymond Road (4th driveway on east side of Road)

Location of Well West of house Tap Location: Inside ☐ Outside ☒

Location of Sewage System North-east of house Year Installed 1995

	NAME	ADDRESS	PHONE
Present Owner:	Howard + Marion Stillinger	13700 NW 27 Raymond NE 68428	783-0383
Tenant/Buyer:	Steve + Denise Dolezal	[redacted] 2845 N54 Lincoln NE 68504	467-2224
Return to:	Capitol Title	P.O. Box 6577 Lincoln, NE 68506-6577	434-3737

Signature of Applicant [signature] Address 2845 N54 Lincoln NE 68504 Date 8/30/00

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 09/07/00
Initials ___
Amount 150.00
Check No. 5956

DATA ENTRY

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

PRELIMINARY STATUS--By PAUL DROZEMANN **DATE:** 9/12/00

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 5.7 ppm	☐ ___ ppm

SEWAGE SYSTEM

Approved ☒
Provisional ☐
Disapproved ☐

Additional Site Visits

Date 9/15/00 by PD
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: ___

See Attached Letter ☐

FINAL STATUS

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

Approved by Paul Drozemann Date 9/25/00

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

P16574-23 9-15-00 P16454-51