LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1090-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — December 28, 1977

TYPE OF PERMIT — THIS PERMIT EXPIRES

Mark T. Hakenkamp — 2955 Stratford Ave., Lincoln, NE

ISSUED TO — ADDRESS

T11N; R5E; Section 33; Lot 26 I.T.

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

Health

ISSUING OFFICER

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

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. 1090-C

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

DATE: JUNE 23, 1977

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 5E; Section 33
~~Block~~ _____; Lot 26 I.T.; ~~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. Distance to public sewer: 8-12 miles ~~ft.~~

Mark J. Habenbamp
Signature of Applicant (Owner or Lessee)

2955 Stratford AVE
Address
68502

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 6/27/77. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 6/28/77. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____. ACTION: Approved ☐ Disapproved ☐
Date Frwd. _____. Signature: _____

3. City or County Engineer: Date Rec'd. 6-28-77. ACTION: Approved ☐ Disapproved ☐
Date Frwd. 6-28-77. Signature: Henry Graf
Rec'd 6/28/77 mms

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. 1090-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.

1. Legal description of property: Twp. 11 N.; Range 5E; Section 33
NW¼ of N.W¼ ~~Block~~ _____; Lot 26 IT.; ~~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).

Mark T. Hahenkamp
Signature of Applicant (owner or lessee)

2955 Stratford Ave
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: August 1-77 by: jw
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐ 6/27/77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 2-9-78 by: James Weverka

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 474-1541)

FILE NO. 1090-C

PROPERTY WHERE SOIL TESTED:
Owner: MARK HAKENKAMP
Location: Township 11 N. : Range 5 E
Section & ¼ Sect. Sec 33 NW¼ of NW¼ Address: 2955 Stratford Ave
Property Dimensions: 660' ft. x 1320' ft.
Area: 21 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Dates of Tests: 6-24-77 to 6-25-77. Weather: Precip. 0 Temp. 95 To 70 Rain

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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	36"	6/24/77	4 PM	6/24/77	8 PM	6/25/77	4 PM	6" AT 7:30	8 PM	4½	30	1½"	20/in
2	36"	6/24/77	4 PM	6/24/77	8 PM	6/25/77	4 PM	6" AT 7:30	8 PM	5"	30	1"	30/in
3	36"	6/24/77	4 PM	6/24/77	8 P.M.	6/25/77	4 PM	6" AT 7:30	8 P.M.	5½"	30	½"	60/in
4	36"	6/24/77	4 PM	6/24/77	8 P.M.	6/25/77	4 PM	6" AT 7:30	8 P.M.	5"	30	1"	30/in
5	36"	6/24/77	4 PM	6/24/77	8 P.M.	6/25/77	4 PM	6" AT 7:30	8 P.M.	4"	30	2"	15/in
6	36"	6/24/77	4 PM	6/24/77	8 P.M.	6/25/77	4 PM	6" AT 7:30	8 P.M.	4"	30	2"	15/in
7	36"	6/24/77	4 PM	6/24/77	8 P.M.	6/25/77	4 PM	6" AT 7:30	8 P.M.	5½"	30	½"	60/in
8	36"	6/24/77	4 PM	6/24/77	8 P.M.	6/25/77	4 PM	6" AT 7:30	8 P.M.	4½"	30	1½"	20/in

Sum of Percolation Rates: 250/in
Average of Rates: 31½/in
Mean of Rates:

Mark Hakenkamp
Signature of Person Conducting Test

Address 2955 Stratford
Phone 435-0505

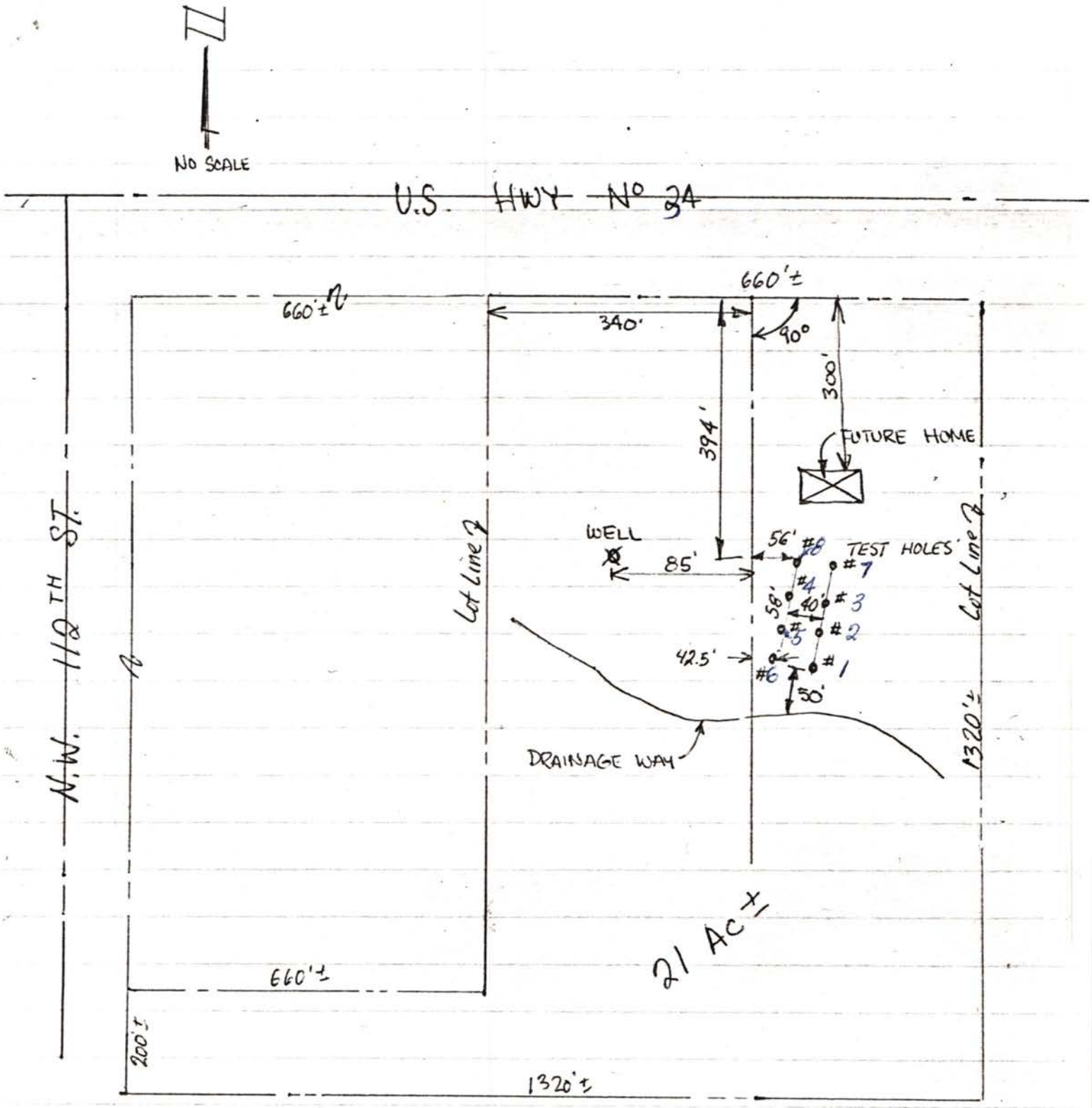
(Do not write below this line)

REVIEWING ACTION

REMARKS: Sharpsburg Silty Clay Loam S.C.S.
DATE: June 27, 1977

Approved Percolation Rate (a)
A. 24 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official



SITE PLAN

No Scale

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. 1090-C

SPECIFICATIONS

DATE: 6-27-77

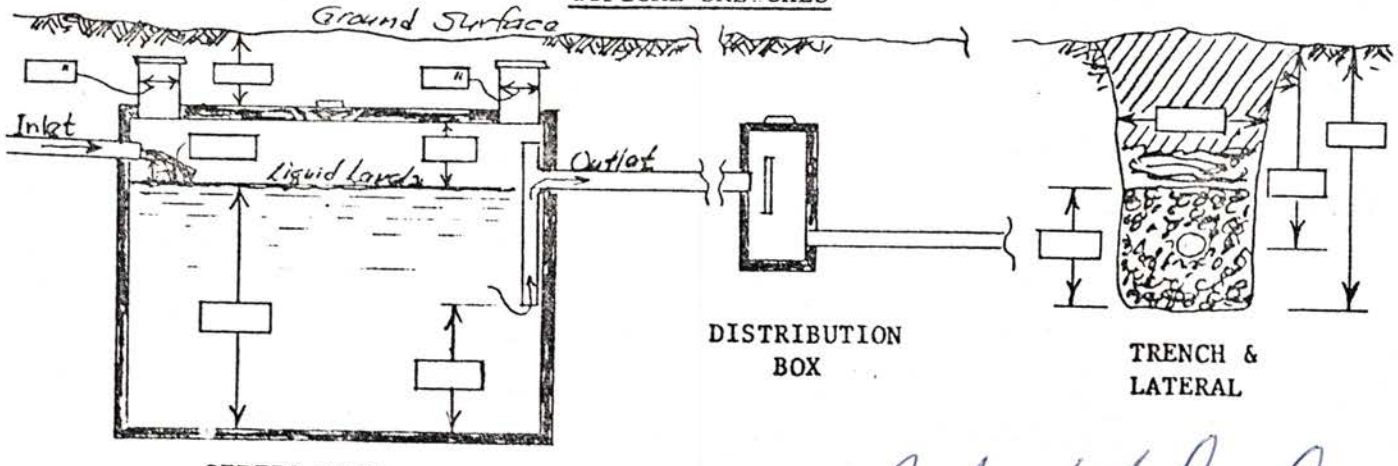
A. BUILDING SEWER:
1. Material PLASTIC; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 12" in.
3. Distance between dwelling and septic tank 20 ft.
4. Number of clean-outs 0.
5. Distances To:
Well or Suction Line 150 ft.;
Stream ___ ft.; Pressure Line 150 ft.+;
Property Line 227 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material CONC.; No. of compartments ONE.
2. Capacity 1500 gals.; Liquid depth 74 in.
3. Factory Built: Yes ☒ (Company Precast Step
No ☐
4. Manholes: Over Inlet; diam. ___ in.
Over Outlet; diam. ___ in.
Below Grade 12" 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 12" in.
8. Distances To:
Well or Suction Line 150 ft.;
Stream ___ ft.; Pressure Line 150 ft.+;
Property Line 250 ft.

C. DISTRIBUTION BOX AS REQD.
1. Material CONC.; No. available outlets ___.
2. Factory Built: Yes ☒, (Company Precast Step
No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank ___ ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ABSORBTION
2. Lateral Lines: Depth below grade ___ in. Number ___; Length of each line ___ ft Total length of Laterals 226 ft.; Slope ___ in/100 ft. Diameter of pipe ___ in.; Shape ___
Material: concrete ☐; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth ___ in.; Width 36 in.
4. Filter Material: ___.
Depth of material from trench bottom ___ in.
5. Distances To:
Well or Suction Line 150 ft.;
Stream ___ ft.; Pressure Line 150 ft.+
Property Line 227 ft.
6. Percolation Rate: 31¼ minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

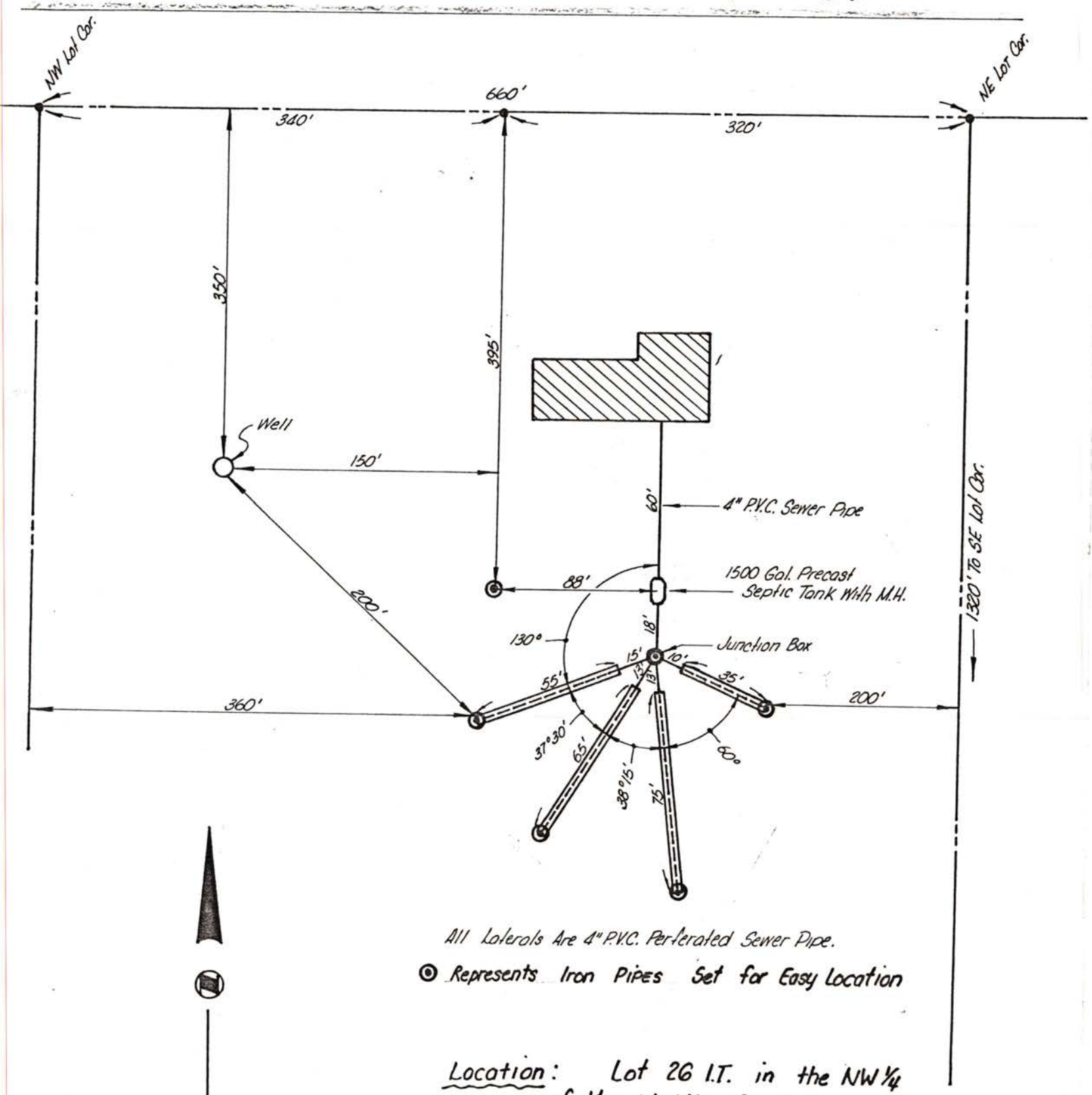
Mark Hahenkamp
Signature of Applicant

Mark & Karen Hakenkamp
R.R. # 4
Lincoln, Nebraska, 68502

FEB 9 1978

Mark Hakenkamp

U.S. HWY. NO. 34



All Laterals Are 4" P.V.C. Perforated Sewer Pipe.

⊙ Represents Iron Pipes Set for Easy Location

Location: Lot 26 I.T. in the NW¼ of the NW¼ Section 33, T. 11 N, R. 5 E., Lancaster County Nebraska.

0016

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.

3339

Legal Description of Property: Street Address 10901 West Hwy #34

Twp 11 Range 5 Section 33 1/4 ___ 1/4 ___ Block ___ Lot 37 Addition ___

Directions to Property Hiway 34 W - property on S side of road

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System ___ Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	Mark Hakenkamp	10901 West Hwy #34	~~796-2268~~ 402 475-3250
Tenant/Buyer:			
Return to:			

Signature of Applicant Dana London by Norma Ellington, Agent Address 618 Spalding Dr. Date 6/2/97

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 06/04/97
Initials ns
Amount 150 ⁰⁰
Check No. 8050

DATA ENTRY

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

PRELIMINARY STATUS--By Ron Maryott **DATE:** 6/6/97

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate*	☒ 9.7 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. * the nitrate level in the drinking water is approaching the 10 ppm limit. Thus, it would be wise to periodically test the water to see if it goes above the 10 ppm limit. See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Maryott, R.S Date 6/11/97

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