LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2381-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

FEBRUARY 25, 1987 — THIS PERMIT EXPIRES

AMY WHITE, AMERICAN CHARTER, 3930 SOUTH STREET, LINCOLN, NE 68506 — ISSUED TO / ADDRESS

T10N; R8E; Sec 22; Lot 31; 1435 Plum Ridge Road — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE 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	DATE	AMOUNT
CH	2/26/87	60.00

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2381-C

DATE: 8-8-86

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 8E ; Section 22 ; Block _____ : Lot 31 I.T. : Addition NW¼
   Street Address 1435 Plum Ridge Rd
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: N/A ft.

Amy J. White - Loan Officer
Signature of Applicant (Owner or Lessee)

3930 South St. American Charter
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/25/86. Date Frwd. 8/26/86. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 8-26-86. Date Frwd. 8-26-86. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Boeman
3. City or County Engineer: Date Rec'd 8/26/86. Date Frwd. 8/26/86. ACTION: Approved ☐ Disapproved ☒ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 8/26/86 By: J. C. Wood

* PERMIT CAME CONSIDERABLY AFTER INSTALLATION

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: 471-7800

B

FILE NO. 2381-C

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: 8/16/86 to 8/17/86. Weather: Precip. .25 Temp. 80-85.

OWNER: John Leonhardt

Address: 1435 Plum Ridge Rd.

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"	8/16	5:30	8/17	3:00	8/17	3:00	6"	7:00	5 5/8"	30	3/8"	
2	36"	8/16	5:30	8/17	3:00	8/17	3:00	6"	7:00	2"	30	4"	
3	36"	8/16	5:30	8/17	3:00	8/17	3:00	6"	7:00	4 5/8	30	1 3/8"	
4	36"	8/16	5:30	8/17	3:00	8/17	3:00	6"	7:00	4 7/8	30	1 1/8"	
5	36"	8/16	5:30	8/17	3:00	8/17	3:00	6"	7:00	2 1/2"	30	3 1/2"	
6	36"	8/16	5:30	8/17	3:00	8/17	3:00	6"	7:00	5 5/8	30	3/8"	

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

James R. Krupl
Signature of Person Conducting Test

Address 2121 South 52nd. Lincoln NE 68506 Phone 464-0638

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: August 25, 1986

Approved Percolation Rate (a)
A. 17 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

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: 7-31-86

FILE NO. 2381-C

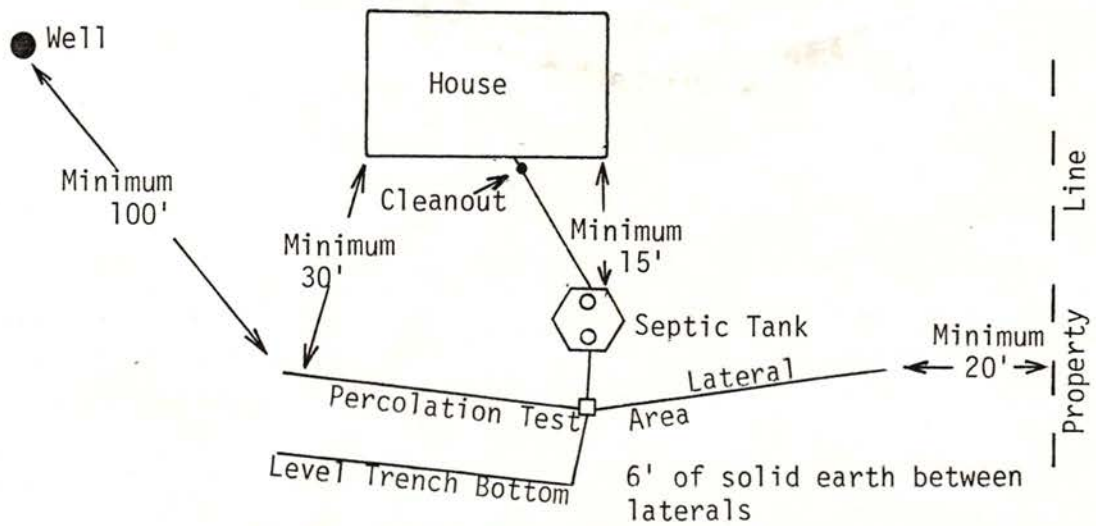
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material plastic ; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor ____ in.
3. Distance between dwelling and septic tank 160' 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 1.
2. Capacity 1000 gal gals.;
3. Factory Built: Yes ☒ No ☐
(Company Precast)
4. Manholes: Over Inlet; diam. ____ in.
Over Outlet; diam. ____ in.
Riser Above ☐ Below ☒ Grade 12 in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 36 in.
8. Distances to:
Well or Suction Line no well 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 Precast)
3. Distance from Septic Tank 92 ft.

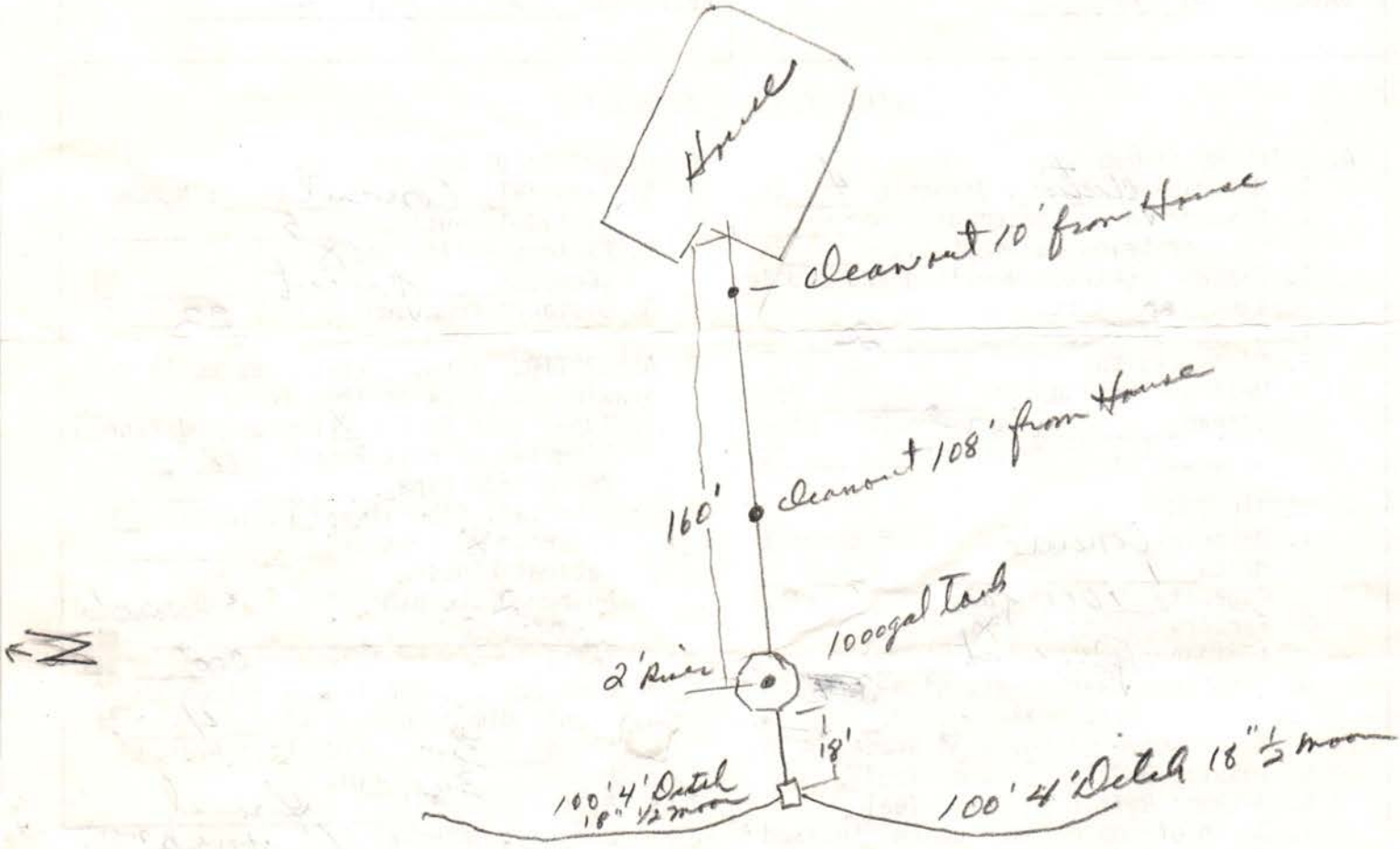
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 18" or
Perforated Pipe ____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other ____.
2. Lateral Lines:
Number 2 ; Length of each line 100', 100', ____, ____, ____ ft.;
Total length of laterals 200' ft.;
Distance between lateral lines ____ ft.
3. Trench dimensions: Width 4 ft.;
Slope 3 in/100 ft.; Average Depth 36 in.
4. Filter Material: Gravel
Depth of Material 6" above & below in.
5. Distances to:
Well or Suction Line ____ ft.;
Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE _____ INSTALLER _____



007

Rec'd 9-7-93 mlr

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 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 1435 Plum Ridge Road

Twp 10N Range 8E Section 22 1/4 ___ 1/4 ___ Block ___ Lot 31 Addition ___

Directions to Property 1/4 mile east of 148th & Holdrege, south side of Holdrege

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System West of house Year Installed 1984

	NAME	ADDRESS	PHONE
Present Owner:	John F. Leonhardt	1435 Plum Ridge Road	467-7307
Tenant/Buyer:			
Return to:			

Signature of Applicant John F. Leonhardt Address 1435 Plum Ridge Lincoln, NE 68527 Date 9/3/93

HEALTH DEPARTMENT USE ONLY

Date Received 9/7/93 Received $150.00 Check ☑ Cash ☐

PRELIMINARY STATUS--By R Margwart **DATE:** 9/8/93

Cass Co Rural Water Dist.

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☐	☐	Approved ☑	Date ___/___/___ by ___
Bacteria	☐ ___/ml	☐ ___/ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☐ ___ppm	☐ ___ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: Recommend checking to see if septic tank need pumping

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Public Water Supply Approved: ☐ **SEWAGE DISPOSAL SYSTEM** Approved: ☑ Provisional Approval: ☐

Approved by Ron Margwart, RS Date 9/9/93

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 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: 1-9-92

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

Legal Description of Property: TWP. 10; RANGE 8; SECTION 22; BLOCK ___

LOT 31; ADDITION ___; Street Address 1435 Plum Ridge Road

Directions to Property 1/4 mile east of 148th & Holdrege

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System West of house Year Installed 1984

	NAME	ADDRESS	PHONE
Present Owner:	John F. Leonhardt	1435 Plum Ridge	467-7307
Tenant/Buyer:			
Return to:			

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

Signature of Applicant John F. Leonhardt Address 1435 Plum Ridge Rd

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HEALTH DEPARTMENT USE ONLY

Date Received 1-10-92 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 1-13-92

WATER SYSTEM:	Approved	Disapproved (Rural Water Dist Public Supply)	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☐	Date 1-13-92 by rm
Bacteria	☐	☐	Provisional:	☐	Date ___ by ___
Nitrate	☐	☐	Disapproved:	☐	Date ___ by ___

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

See Attached Letter ☐

FINAL STATUS (public supply)

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

APPROVED BY Roy Maynard RS DATE 1-13-92

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