LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2835-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

6 MONTHS — THIS PERMIT EXPIRES

GERALD RANDOLPH, RT. 1, BOX 128 — ISSUED TO

MALCOLM, NE 68402 — ADDRESS

T11N; R5E; Sec. 11 SW¼ — LEGAL DESCRIPTION

REMARKS: non-Transferable ALTER, EXTEND OR REPAIR

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
MC	5-8-89	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

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

20109-0977

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 471-7800)

FILE NO. 2835-C

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

DATE: 4/30/89

The undersigned hereby applies for a permit to ALTER ☒, EXTEND ☐, or REPAIR ☐ an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto. S4 T36 W6 S0 L2

1. Legal description of property: Twp. 11N; Range 5E 6th Malcolm Section SW¼ S11;
Block ____; Lot ____; Addition ____
Street Address ____

2. Property Use: Residential ____ ☑; Commercial ____ ☐
No. Bedrooms 3
Describe ____
Other Use ☐
Describe ____

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

4. Description of proposed alteration, extension or repair: the only alternative we have is a Lagoon

5. Work to be done by: Owner ☐; or Contractor ☑, Earnest Construction
Contractor's Name Seward

6. Estimated cost of project:

a. Materials	$	?
b. Labor	$	?
c. Other	$	
TOTAL	$	800.00

Gerald Randolph
Signature of Applicant (owner or lessee)

Rt 1 Bx 128 Malcolm, Ne 68402
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: ____
Filing Fee: $ 30.00

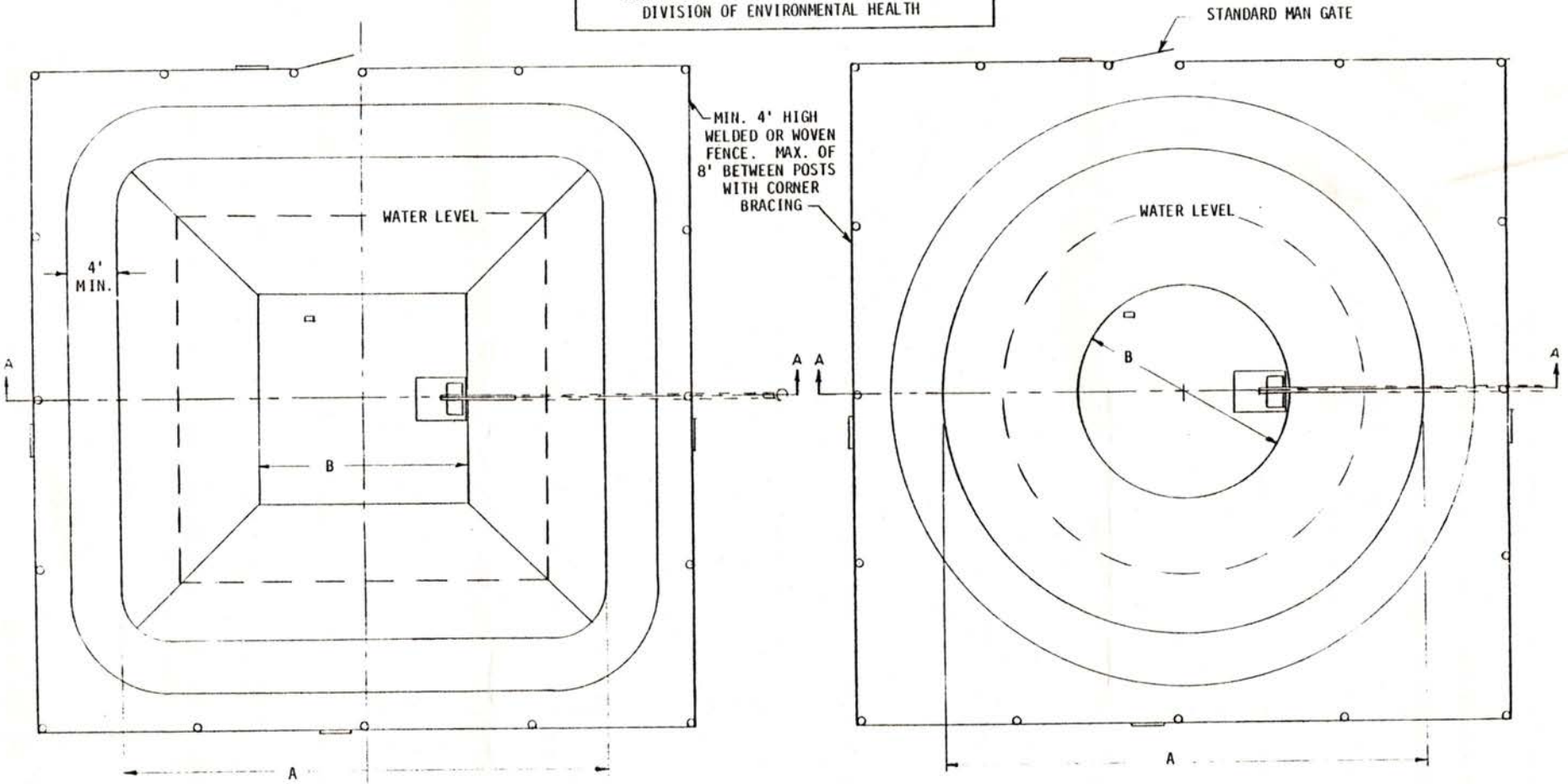
2. Site Visits:
Date: 7/6/89 by: L.C. Hood Need gate, signed drawing
Date: 11-17-92 by: rm
Date: ____ by: ____

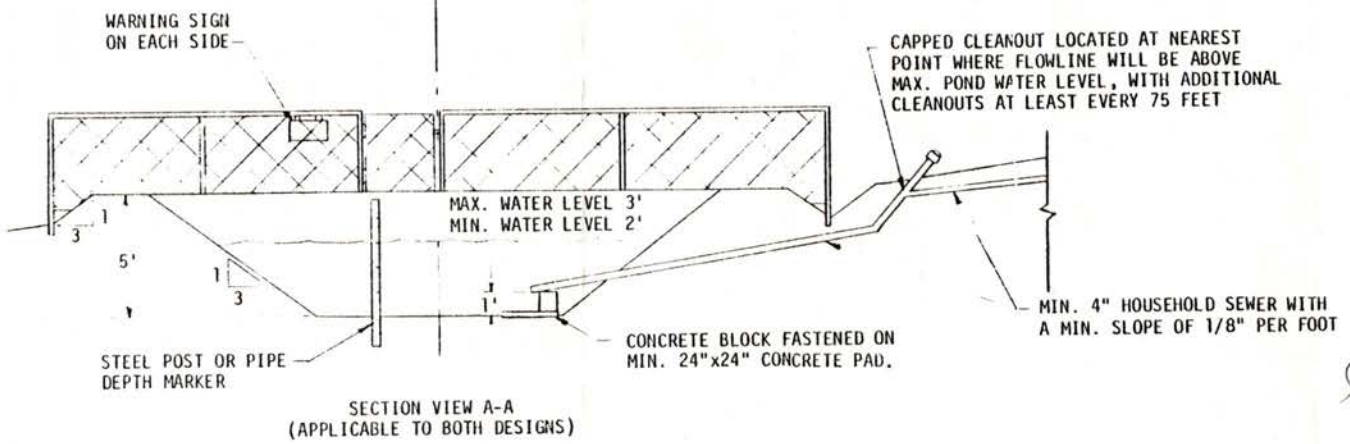
3. Date: Approved ☒; Disapproved ☐
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-17-92 by: [illegible]

WASTE STABILIZATION POND

LINCOLN-LANCASTER COUNTY HEALTH DEPT.
DIVISION OF ENVIRONMENTAL HEALTH





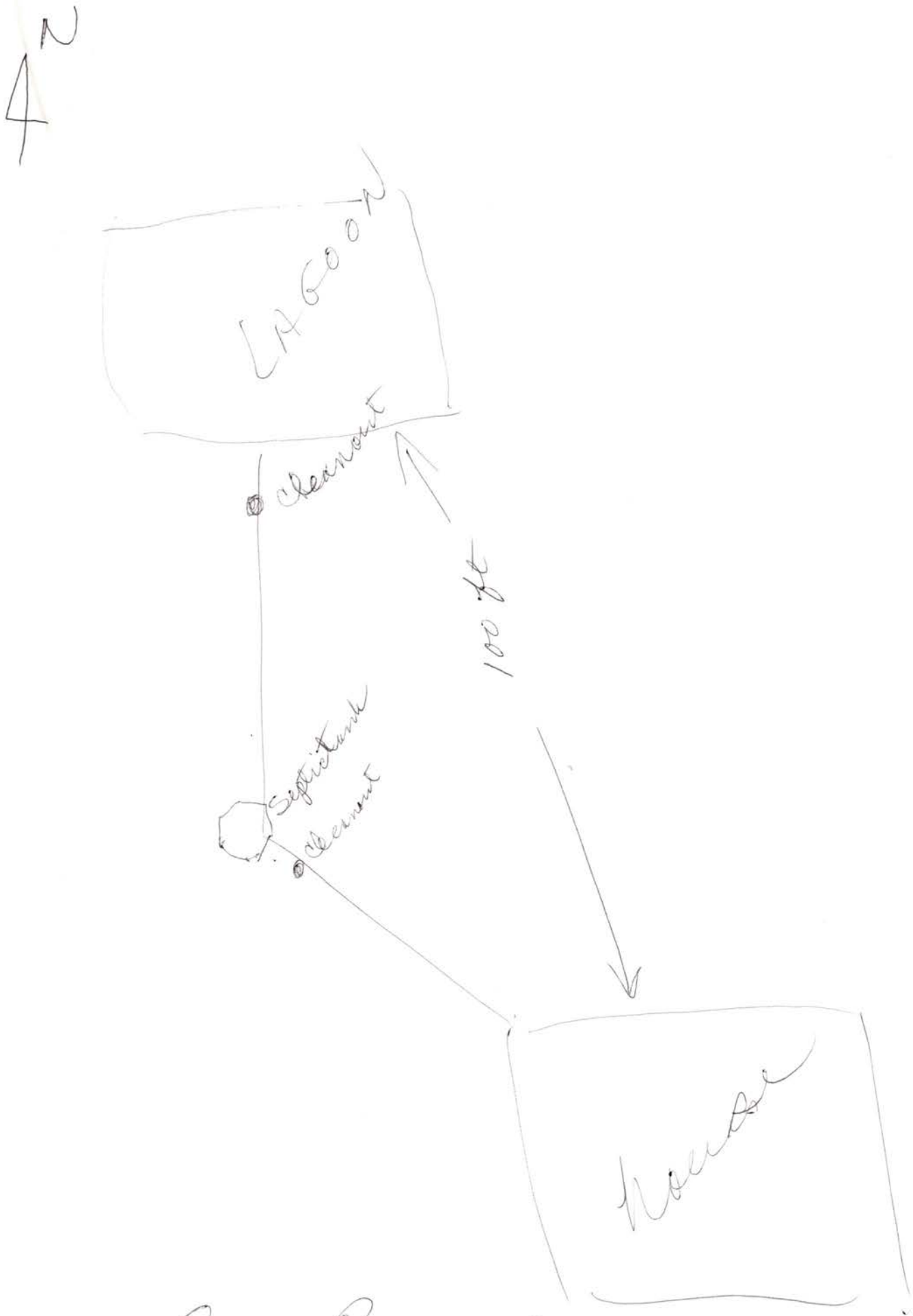
SECTION VIEW A-A
(APPLICABLE TO BOTH DESIGNS)

NUMBER OF BEDROOMS IN THE HOUSE	LAGOON DIMENSIONS (FEET)			
	SQUARE		ROUND	
	A	B	A	B
2-3	43	13	46	16
4	48	18	52	22

ADDITIONAL INFORMATION ON BACK

Gerald Randolph
APPLICANT'S SIGNATURE

FORM 20111-0278



Owner - Elaine Randolph

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 12300 NW 84th St. Malcolm, NE 68402

Twp 11N Range 5E Section 11 1/4 ___ 1/4 ___ Block ___ Lot ___ Addition ___

Directions to Property Hwy 34 west to Hwy 79, 3 ½ miles No., turn West on Waverly Rd to NW 84th, No. ¼ mile

Location of Well North of House - fenced indoor Tap Location: Inside ☒ Outside ☒

Location of Sewage System South side of drive towards power pole Year Installed Unknown

	NAME	ADDRESS	PHONE
Present Owner:	DARWIN + Vickie Barton	12300 NW 84th St. Malcolm, NE 68402	402-796-2692
Tenant/Buyer:	Shannon + Rod Diedrichsen	835 MANATT ST. Lincoln, NE 68521	402-476-2264
Return to:	Home Real Estate Att: Judy Trautman	225 No. Cotner Blvd Lincoln, NE 68510	402-436-3332

Signature of Applicant Judy Trautman Address 225 No. Cotner Blvd Lincoln, NE 68510 Date 8 / 9 / 00

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 08 / 11 / 00

Initials ___ "MAIL"

Amount 150.00

Check No. 4894

DATA ENTRY

Date ___ / ___ / ___

Case No. ___

Initials ___

PRELIMINARY STATUS--By P. DROTZMANN **DATE:** 8 / 14 / 00

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

SEWAGE SYSTEM	
Approved	☐
Provisional	☒
Disapproved	☐

Additional Site Visits

Date 8 / 23 / 00 by PD

Date ___ / ___ / ___ by ___

Date ___ / ___ / ___ by ___

Comments: Portions of the sewer pipe pre-date regulation period and was never inspected.

See Attached Letter ☐

Put padlock on gate to secure entrance.

FINAL STATUS

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

Approved by Paul Drotzmann Date 8 / 30 / 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

Revised/Reprint: 10-95

003

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: SEPT. 22, 1992

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

Legal Description of Property: TWP. 11N; RANGE 5E; SECTION 11; SW¼ BLOCK ____

LOT ____; ADDITION _____; Street Address 12300 N.W. 84th MALCOLM, NE

Directions to Property JUNCTION 34 & 79, HWY 79 NORTH TO WEST WAVERLY RD., WEST 2 MILES, NORTH ¼ MILE. BLUE HOUSE ON EAST SIDE OF ROAD

Location of Well BASEMENT Tap Location: Inside ☒ Outside ☐

Location of Sewage System N.W OF HOUSE Year Installed ____

	NAME	ADDRESS	PHONE
Present Owner:	ELAINE RANDOLPH	12300 N.W. 84th MALCOLM, NE	796-2356
Tenant/Buyer:		Home Real Estate Dave Nichols	Call 437-6883
Return to:	DARWIN GARTON	4451 GRANDVIEW BLVD LINCOLN 68521	476-0493

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

Signature of Applicant [signature] Address 3910 SCOTT ST.
HOME REAL ESTATE

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HEALTH DEPARTMENT USE ONLY

Date Received 11-13-92 Received $150.00 Check ☑ Cash ☐ #4232 Lonhusher

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PRELIMINARY STATUS--DATE 11-17-92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date 11-17-92 by JM
Bacteria	☒	☐	Provisional:	☒	Date _____ by ____
Nitrate	☒ 0.1 ppm	☐	Disapproved:	☐	Date _____ by ____

Comments: Original sewage system predated regulations. There is no record of installing original system. Thus, a provisional approval. A waste stabilization lagoon was installed to replace the septic system. Approximately $ has been set for the lagoon ☐ See Attached Letter

FINAL STATUS

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

APPROVED BY Ron Marquardt DATE 11-23-92

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

Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

003699

(402) 441-8000

Permit

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR-EXTEND LATERALS

Permit # 04390078001

Issued 03/12/04
Expires 09/12/04
Revenue Code 3157

Establishment

EARLE & PAT ABELS
T11N R5E SEC 11
LOT 12
12401 NW 84 STREET

FEES: $100.00

TOTAL: $100.00

Permittee

EARLE & PAT ABELS
12401 NW 84 ST
MALCOLM NE 68402

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☐ Municipal Code 24.38 ☐ County Resolution Number 2832

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☐ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 11 Range ~~4~~ 5 Section ~~5~~ 11 1/4 Section SW
   Block ____ Lot 12 Addition ____
   Parcel ID 05 - 11 - 300 - 003 - 000 (i.e. 99-99-999-999-999)
   Street Address 12401 NW 84th St. Malcolm, NE 68402

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 2 Describe ____

3. **Type of Present Individual Disposal System** ☒ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** add to lateral field (H-10 standard Equalizer)

5. **Work to be done by:** ☐ owner ☒ contractor's name Lloyd Jakoubek Raymond Contracting, Inc

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Earle + Pat Abels Pat Abels Address 12401 NW 84th St, Malcolm Phone 402-796-2242
Applicant Signature (owner or lessee) ____

Please include the permit fee ($100) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 3/12/04 REVIEW: ☒ Approved ☐ Disapproved By: Ron Mazour

Site visits
Date 3/12/04 By rm
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date 3/23/04 By Ron Mazour

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 03/12/04 Amount 100.00 Check No. 5256 Initials ____

White - Division Copy Pink - Business Office Revised 9/00

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

B

Permit Number: 04390780

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 12401 NW 84th St (no rural route) City Malcolm NE, Zip 68402

Owner Scarlet Rat Abels Addresss Same

Soil Type (SCS): Sharpsburg Percolation Rate: 30 min./inch

Date of Tests 3/10/04 to 3/11/04 . Weather: Precipitation 0 Temperature 38°

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)
1	24	3/10	8:00a	3/10	12:00p	3/11	8:00a	6	3/11	12:00p	10	1 3/4	1.75/10 = 6
2	24	"	"	"	"	"	"	"	"	"	30	1 1/4	1.25/30 = 24
3	26	"	"	"	"	"	"	"	"	"	"	1 1/4	1.25/30 = 24
4	25	"	"	"	"	"	"	"	"	"	"	1	1.00/30 = 30
5	24	"	"	"	"	"	"	"	"	"	"	1 3/4	1.75/30 = 17
6	25	"	"	"	"	"	"	"	"	"	"	1 1/2	1.50/30 = 20

Person Conducting Percolation Tests

Name: Terri Jakubek, Raymond Contracting Inc

Phone: 402-783-2663 or 402-890-3870

Address 13800 NW 70th St

Raymond, NE 68428

Sum of Percolation Rates: 121

Average of Rates: 20

Rate Used for Calculation: 30 - 20 mpi variance

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official

Date

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 3-12-04

System Location (Indicate correct number and street)

Address 12401 NW 84th St (no rural route) City Malcolm NE, Zip 68402

A. Building Sewer

1. Material: class 160
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: _____
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: one
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade At Grade in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 48 in.
8. Distances to: Well or suction line 100 ft.
   Stream 100 ft.
   Pressure line 100 ft.
   Property line 100 ft.

C. Distribution Box

1. Material: New Plastic
   Number available outlets: 6
2. Factory built: ☐ Yes ☒ No
3. Distance from septic tank: 3' ft.

D. Absorption Field

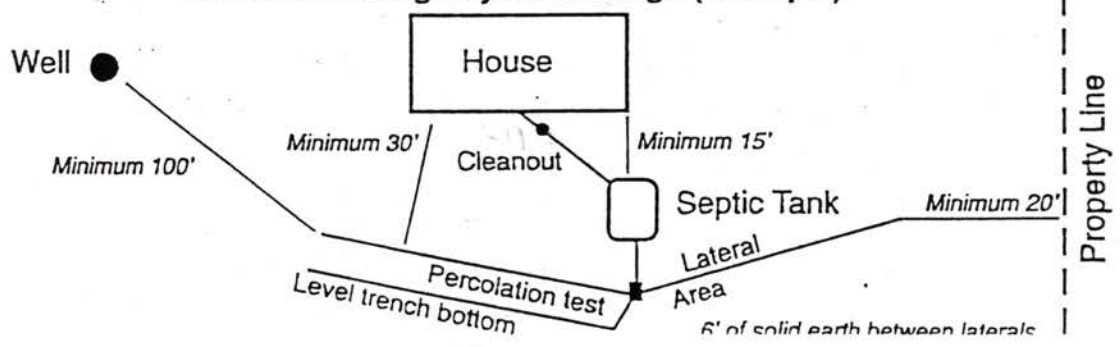
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: New H-10 Eljer
   or perforated pipe: _____
   Material: ☒ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: old 100 ft. old 100 ft.
   New 125 4'wide ft., _____ ft.
3. Trench dimensions: Width 4' ft.
   Slope Flat in/100 ft.
   Average depth 24" in
4. Filter material: Dirt
   Depth of material 24" in.
5. Distances to: Well or suction line 100 ft.
   Stream 100 ft.
   Pressure line 100 ft.
   Property line 100 ft.

Indicate North with Arrow

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

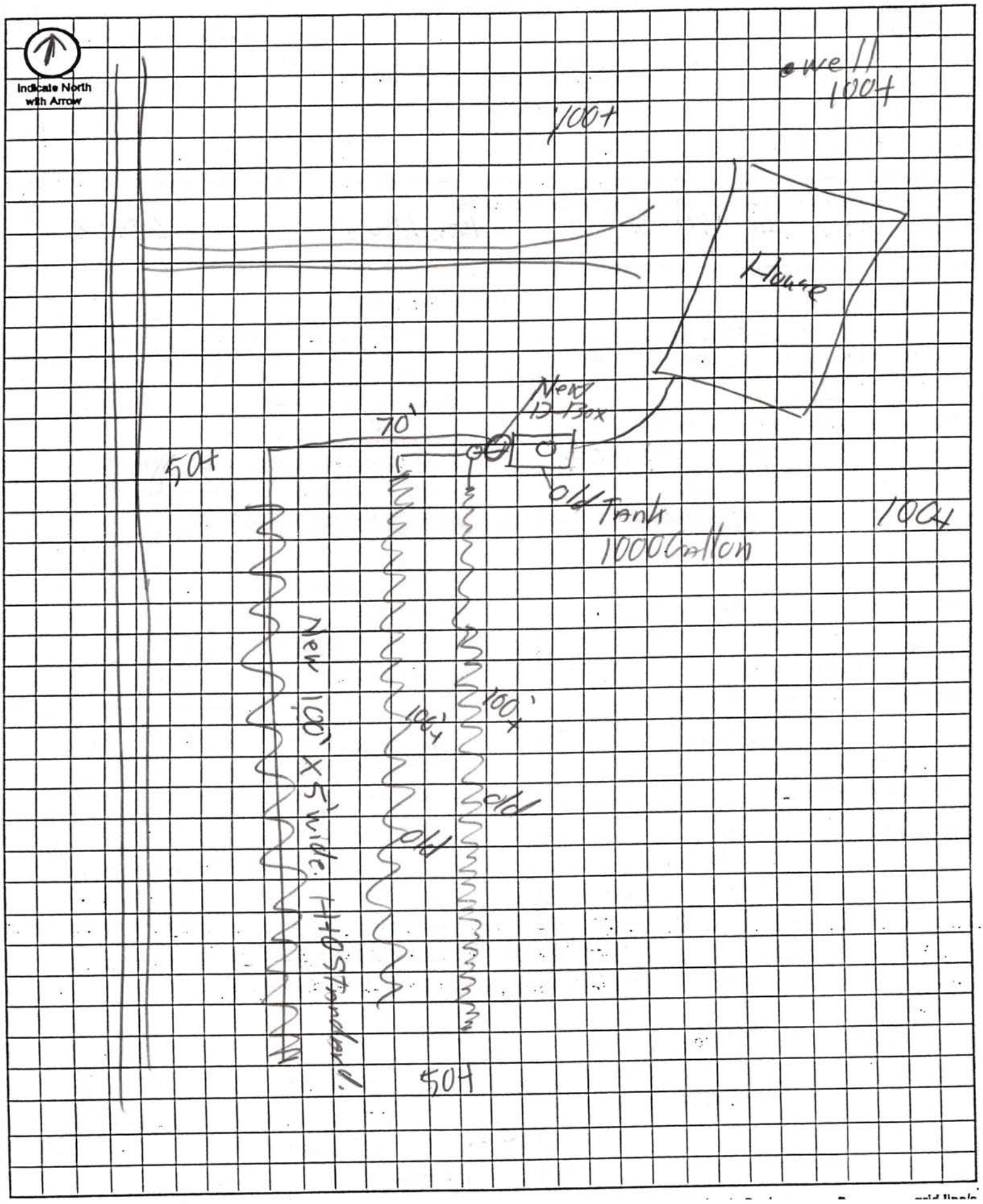
Individual Sewage System Design (Example)



FORM 23-103 10-96

Well

As Built Drawing



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-[redacted] Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL re-finance house

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: 4-2-92

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

Legal Description of Property: TWP. 11N; RANGE 5E; SECTION 11; BLOCK ____

LOT 12II; ADDITION _____; Street Address 12401 NW 84 th

Directions to Property Take Hiway 79, North, 3 mi. TURN WEST on gravel Rd - WEST
Wav Rd + go 2mi. See NW 84 + turn North (Right) + go 2/10 of a mi

Location of ~~Well~~ sewage about '50 SW corner of house from deck of house Tap Location: Inside ☐ Outside ☐

Location of ~~Sewage~~ well System NW corner of house by driveway (between tree + propane tank) Year Installed 1973 ?
Chinese elm tree by

	NAME	ADDRESS	PHONE
Present Owner:	Earle/PATRICIA ABELS	12401 NW 84	796-2242 476-5504
Tenant/Buyer:			
Return to:	Dan Searcy /Provident Fd	40th & South	FAX: 489-5759 474-5559

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

Signature of Applicant Earle & Patricia Abels Address 12401 NW 84

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HEALTH DEPARTMENT USE ONLY

Date Received APRIL 1, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 4-3-92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒ Corrected 4-6-92	☒	Approved:	☒	Date 4-3-92 by mm
Bacteria	☒	☐	Provisional:	☐	Date 4-6-92 by mm
Nitrate	☒ chlorinated	☐	Disapproved:	☐	Date _____ by ____

Comments: three bolts missing from sanitary seal. Also, need a screened air vent
Recommend checking to see if septic tank needs pumping

See Attached Letter ☐

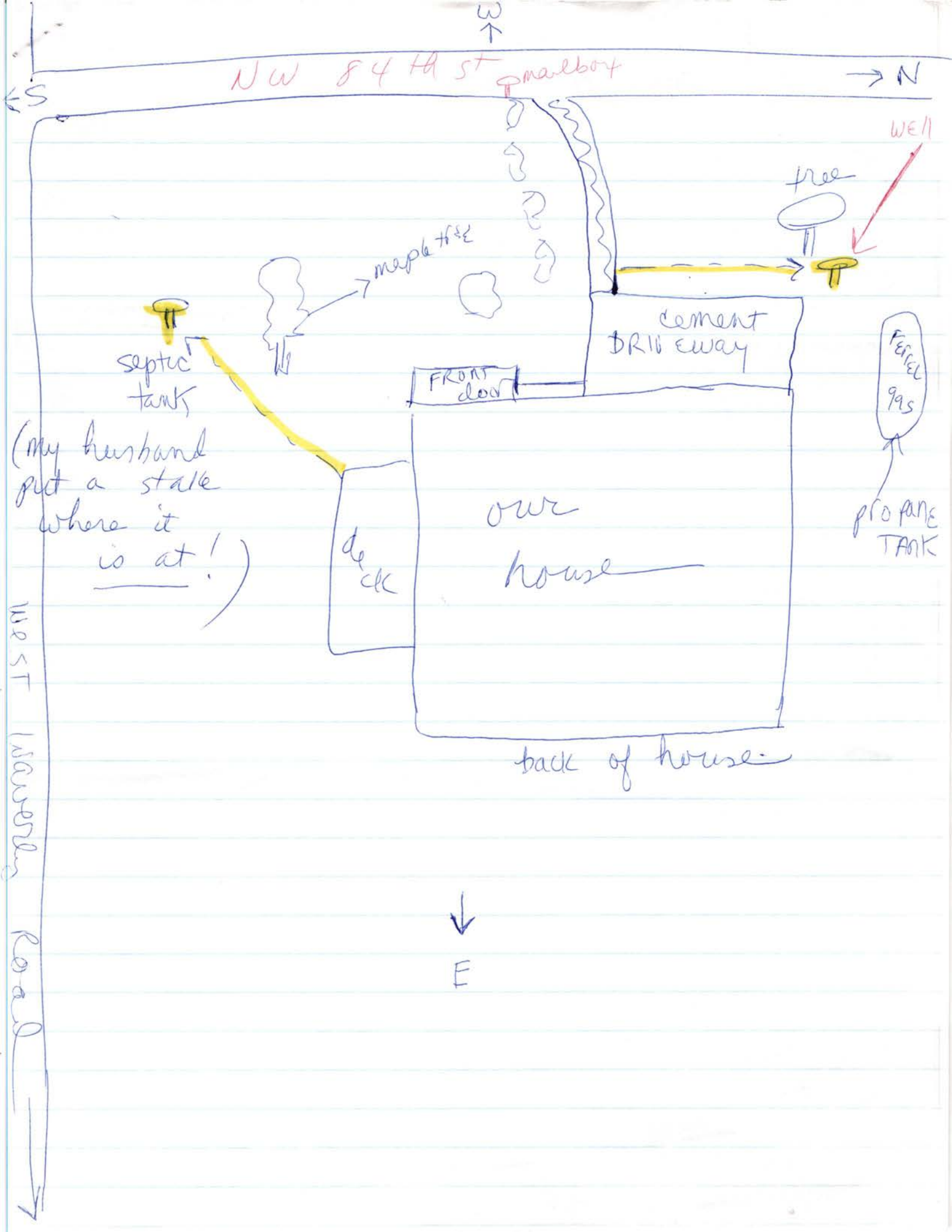
FINAL STATUS

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

APPROVED BY Ron Mangeant, RS DATE 4-9-92

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


W
NW 84th St
mailbox
N
S
WELL
tree
maple tree
septic tank
(My husband put a stake where it is at!)
cement DRIVEWAY
FRONT door
deck
our house
back of house
PROPANE TANK
West Laurel Road
E