Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

008646

(402) 441-8000

Permit: SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

Permit # 06390084701

Issued 02/15/06
Expires 02/15/07
Revenue Code 3157

Establishment: MADELINE AHLSCHWEDE
T11N R5E SEC 8 QTR NE
LOT 9IT
13369 NW 112 ST-MALCOLM

FEES: $150.00

Permittee: MADELINE AHLSCHWEDE
6335 O ST
APT 528
LINCOLN NE 68510

TOTAL: $150.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

FEB 1 5 2006

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 11N Range 5E Section 8 1/4 Section NE
   Block _____ Lot 97 Jts Addition _____
   Parcel ID 05 - 08 - 200 - 001 - 000 (i.e. 99-99-999-999-999)
   Street Address 13369 NW 112th St Malcolm, NE 68402

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe _____

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

4. **Description of proposed alteration, extension or repair** replaced old septic tank (metal) with new 1000 gallon Concrete tank, add new line from house to tank & newline from tank to laterals.

5. **Work to be done by:** ☐ owner ☒ contractor's name Lloyd Jirkaubek, Klaymond 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 Madeline Ahlschwede Address 6335 'O' St Apt 528 Lincoln, NE 68510 Phone 402-486-2299
Applicant Signature (owner or lessee) Madeline A. Ahlschwede

Please include the permit fee (~~$100~~ $150) 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 2/15/06 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date ____/____/____ By _____
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 02/24/06 By DS

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: 2/15/06 Amount $150.00 Check No. 6063 Initials LS

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 2/6/06

Ahlschwede

System Location (Indicate correct number and street)

Address 13369 NW 112. (no rural route) City Malcolm NE, Zip 68402

A. Building Sewer

1. Material: class 40
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 2' in.
3. Distance between dwelling and septic tank: 14' ft.
4. Number of clean-outs: one
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 24 in.
   Over outlet, diameter 24 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: 53" 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: N/A.
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

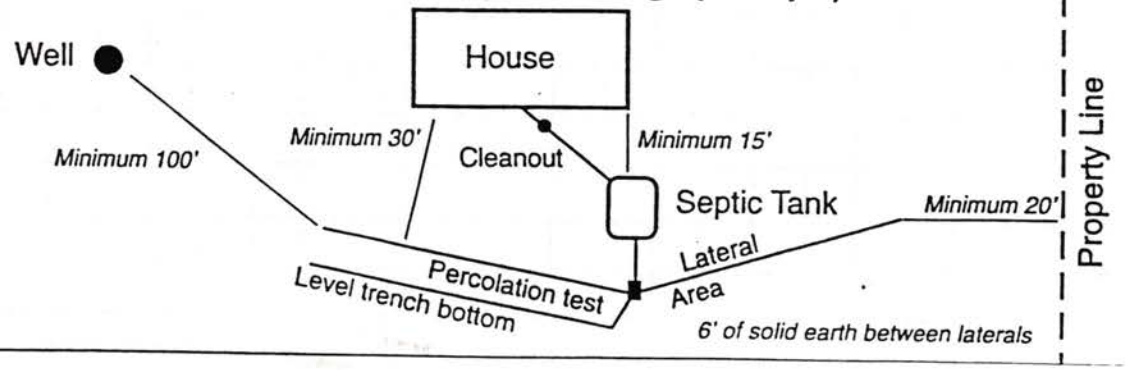
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☒ concrete
   ☐ other _____
2. Lateral lines: Number 1
   Length of each line: 100? ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth 39" in
4. Filter material: Gravel
   Depth of material 18"- 24" in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 78' ft.

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

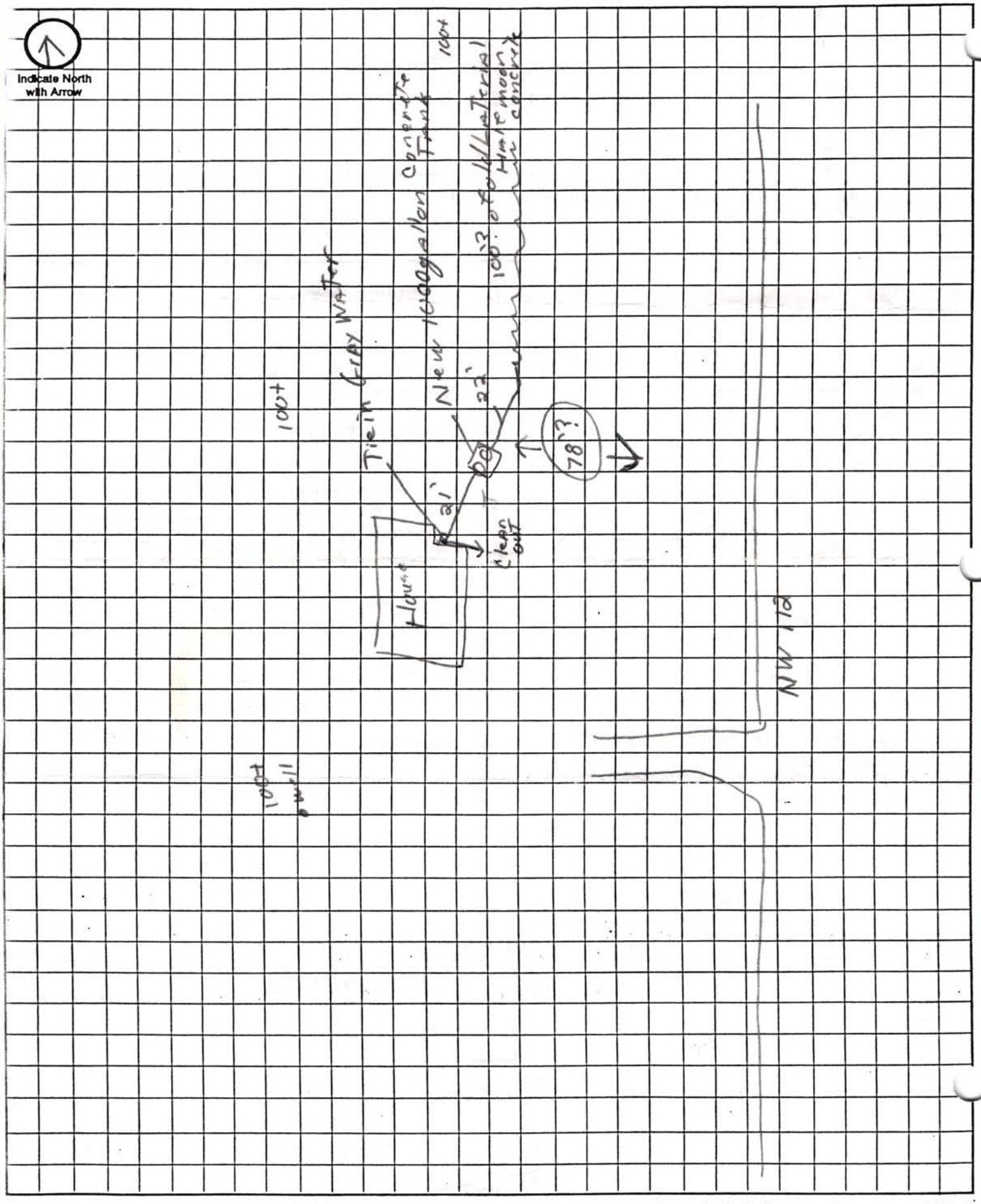
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1456-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

May 9, 1979 — THIS PERMIT EXPIRES

Madeline A. Ahlschwede — ISSUED TO

Box 140, Malcolm, NE 68402 — ADDRESS

T11N, R5E, Section 8, Lot 1 — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE (Repair)

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 15.00	$	$	$ 15.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

2832

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: 475-6221)

FILE NO. 1456-C

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

DATE: November 7, 1978

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.

1. Legal description of property: Twp. 11 N ; Range 5 E; Section 8 ;
Block ; Lot 1 ; Addition
Street Address N. 112 th

2. Property Use: Residential ☒; Commercial ☐
No. Bedrooms 3 + 1 very small den or Childs
Describe
Other Use ☐
Describe

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

4. Description of proposed alteration, extension or repair: Replace "orangeburg" drainage tile with a 3' trench and 16" half moon tile from Pre-Cast Step Co 99' long - 3½-4' deep. 2½ ton of Slope was carefully tucked gravel

5. Work to be done by: Owner ☒; or Contractor ☐, Contractor's Name

6. Estimated cost of project:

a. Materials	$	351 89
b. Labor	$	
c. Other	$	80 00
TOTAL	$	431 89

Trenching - $80.00

Pre Cast Step Co.
99' of 16" X 36" tile 209.20
tax 6.09
$215.29

L. P. Stewart.
Gravel road size
9.80 ton $68.60
9.95 ton $69.85
tax 4.15
$142.60

$209.29
$142.60
$351.89

Madeline A. Ahlschwede
Signature of Applicant (owner or lessee)

Box 140, Malcolm, Neb. 68402
Address

(Do not write below this line)

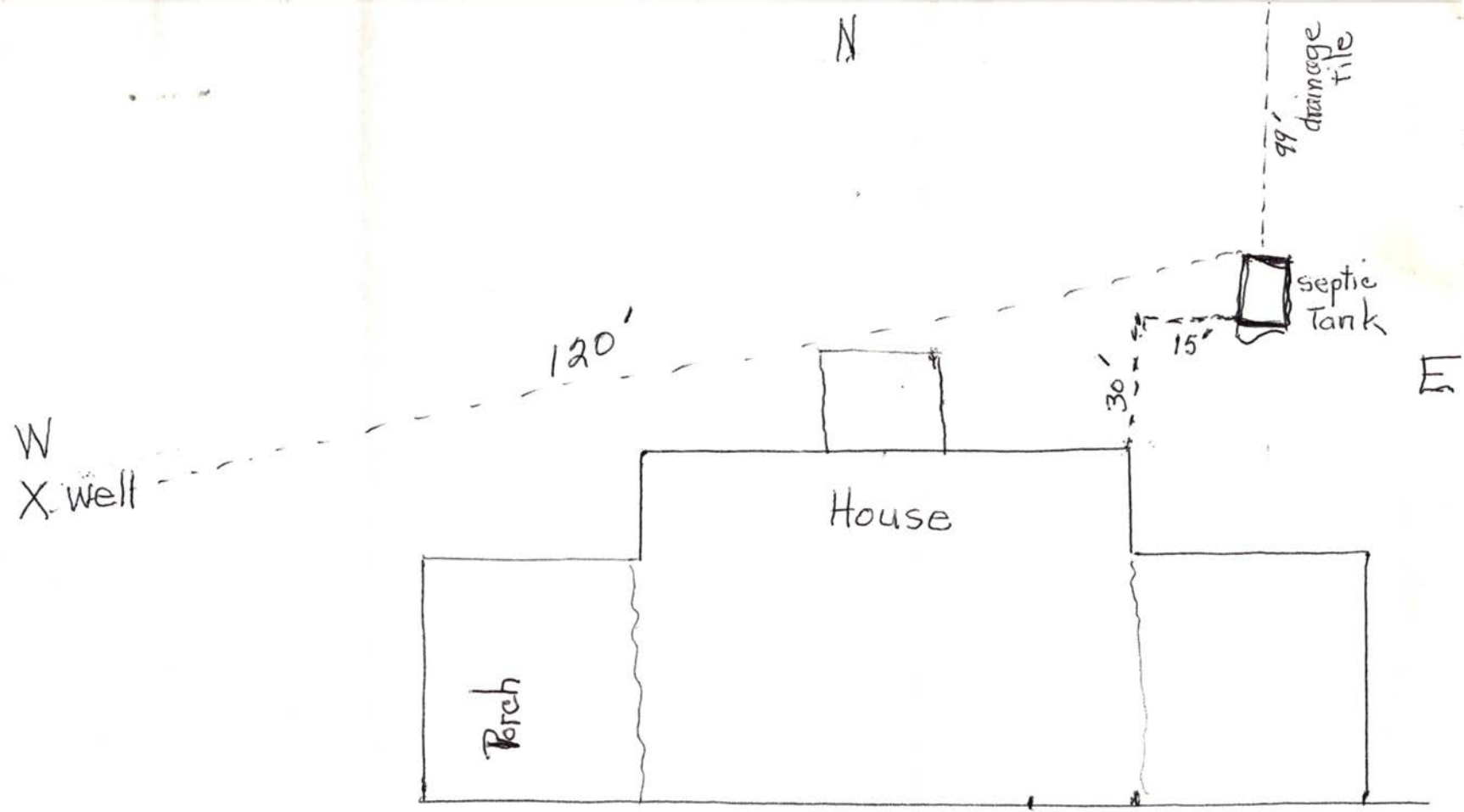
REVIEWING ACTION

1. Date Rec'd:
Filing Fee: $ 15.00

2. Site Visits:
Date: by:
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐
by: Jerrold C. Read

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: by:



Elvin + Madeline Ahlschwede

Lancaster Co.

S

Lot 1 sec. 8 Twp 11 Range 5