Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR-EXTEND LATERAL & INSTALL
DROP BOX

Establishment

ROGER LARSON
T10N R8E SEC 30 QTR NE
STEVCR LOT 40
600 S 112 ST

Permittee

ROGER LARSON
600 S 112 ST
LINCOLN NE 68520

Permit # 02390072401

Issued 06/04/02
Expires 12/04/02
Revenue Code 3157

FEES: $100.00

TOTAL: $100.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002423

#0239000724

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 10N Range 8E Section 30 1/4 Section NW
   Block _____ Lot _____ Addition _____
   Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address 600 So 112 Lincoln, Ne 68520

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** Extend Lateral 100' w/ Eljen Hinator & install Drop Box to use new Lateral 1st then to old system

5. **Work to be done by:** ☐ owner ☒ contractor's name Southwick Sewer & Drain

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 Roger Larson Address 600 S 112 Lincoln Phone _____
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 6/4/02 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date 6/7/02 By DS
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 1/9/03 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: 06/04/02 Amount 100.00 Check No. 4707 Initials ao

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 6-8-02

Roger Larson

System Location (Indicate correct number and street)

Address 600 S 11Z (no rural route) City LINCOLN NE, Zip 68520

A. Building Sewer

1. Material: _____
   Diameter: _____ 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: _____
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ❑ Yes ❑ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ❑ above ❑ below grade _____ in.
5. Inlet: ❑ baffle ❑ tee
6. Outlet: ❑ baffle ❑ tee
7. Depth to top of tank, below unfinished 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
3. Distance from septic tank: _____ ft.

D. Absorption Field

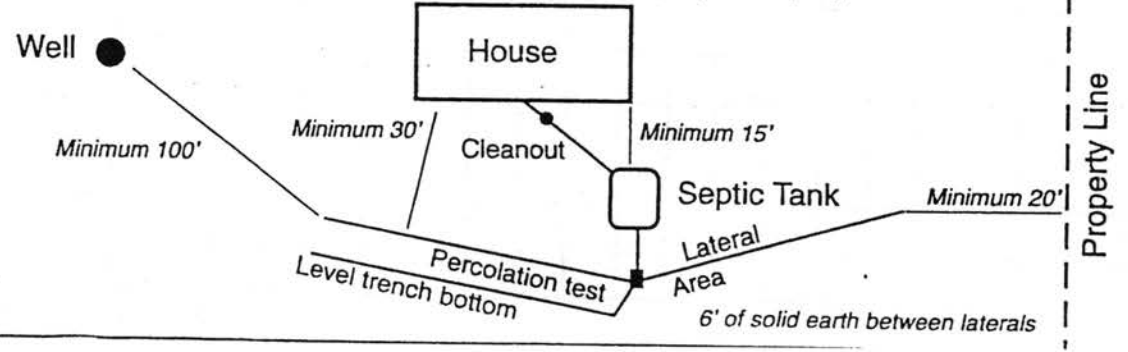
(Provide as-built drawings on back of this form)

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. _____ ft.
   _____ ft. _____ ft., _____ 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.

Indicate North with Arrow

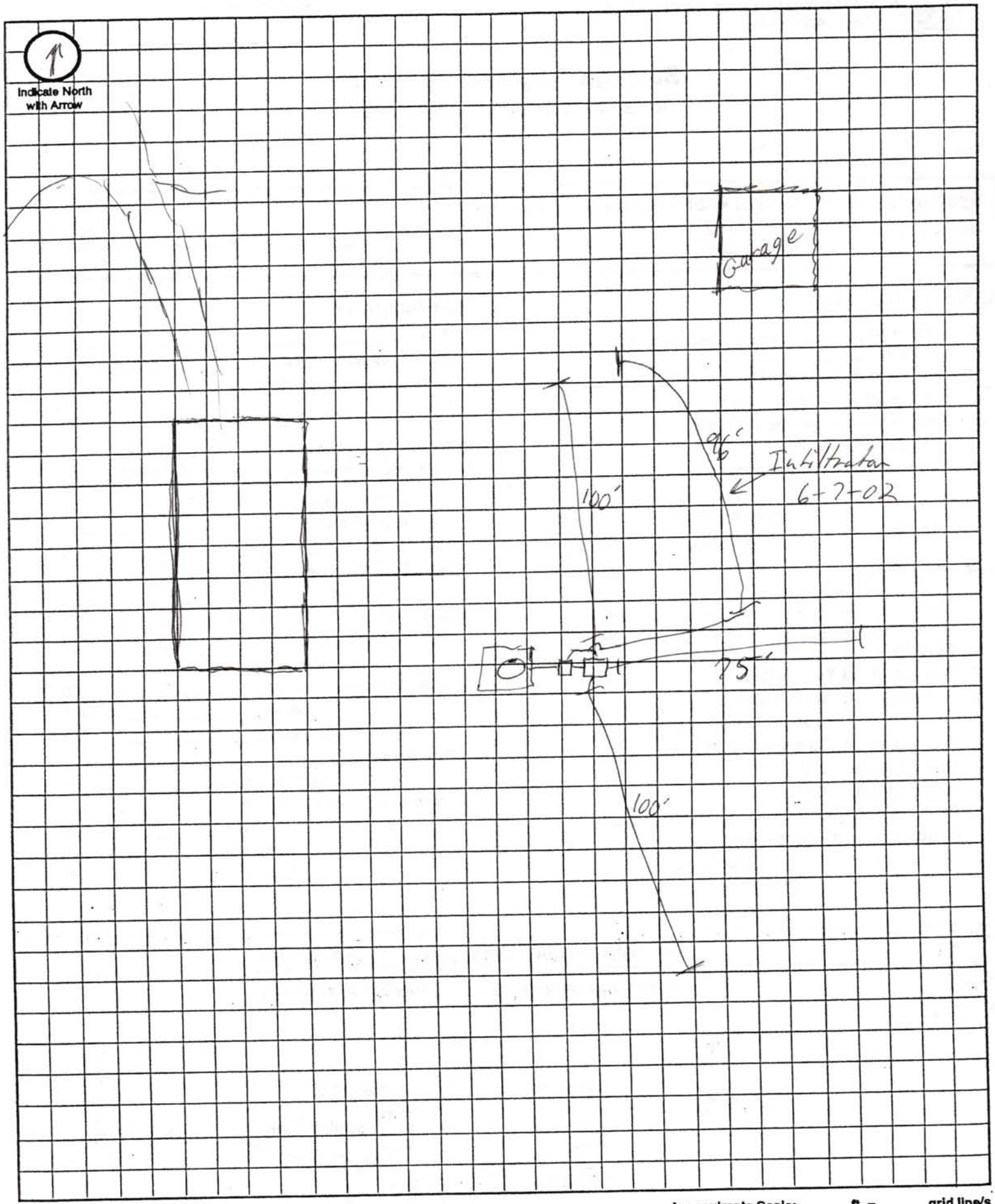
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



Approximate Scale: _____ft. = _____ grid line/s

FILE NO. L137

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

February 12, 197 — THIS LICENSE OR PERMIT EXPIRES

Roger T. Larson — LICENSEE OR PERMITTEE

1143 Mulder Dr., Lincoln, NE — ADDRESS

T10N, R8E, Section 30, Lot part 36. I.T. — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
45692	NE 1 27	30.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

HEALTH APPLICATION

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

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. 1137

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

DATE: _____

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

SEE ATTACHED

1. Legal description of property: Twp. 10N ; Range 8E ; Section 30
Block _____; Lot PART 36 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: ✓ ft.

Roger Lassmby by Verley D. Bowman
Signature of Applicant (Owner or Lessee)

~~5720~~ 1143 Mulder Dr.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/12/77 . Date Frwd. 8/12/77 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 8-12-77 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: Dirk Baasch

3. City or County Engineer: Date Rec'd. 8/12/77 . Date Frwd. 8/22/77 . ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

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. 1134

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. 10N ; Range 8E ; Section 30 ; Block ; Lot PART 36 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. 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).

Roger Larson by Wesley D Bowers
Signature of Applicant (owner or lessee)

1143 Mulder Dr
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 5/12/78 by: J.C.A.
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒ ; Disapproved ☐ 5/12/78
by: Jerrold C. Hoob

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 5/12/78 by: Jerrold C Hoob

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. 1137

PROPERTY WHERE SOIL TESTED:
Location: Township _____: Range _____
Section & ¼ Sect. _____
Property Dimensions: _____ft. x _____ft.
Area: _____acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: _____
Address: _____

Dates of Tests: aug 6-77 to aug 7-77. Weather: Precip. 0 Temp. 90°

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	32"	8/6	1PM	8/7	10AM	8/7	10PM	12"	1PM	5 3/4	30M	3/4	
2										5 1/2		3/4	
3										8		1/2	
4										6 1/4		3/4	
5										8 1/4		1/2	
6										11 3/4		1/2	

Robert D Johnson
Signature of Person Conducting Test

Address 2618 no 33rd
Phone 432-3595

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: Sharpsburg Silty Clay Loam. (C.C.D.)
DATE: August 12, 1977

Approved Percolation Rate (a)
A. 48 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrald C. Hoge
Signature of Reviewing Official

6
5
4
3
2
1
House
200'
Road
Drive
Drive

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. 1137

SPECIFICATIONS

DATE: _____

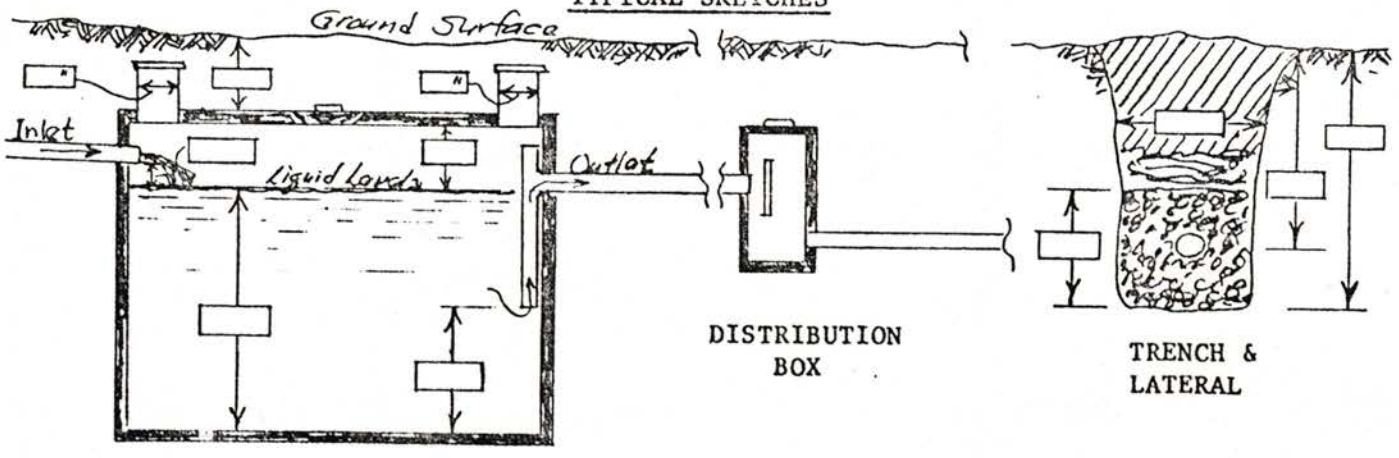
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Conc; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 51 in.
3. Factory Built: Yes ☐ (Company Ore Cast Step) No ☐
4. Manholes: Over Inlet; diam. 4 in.
Over Outlet; diam. 4 in.
Below Grade _____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 ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

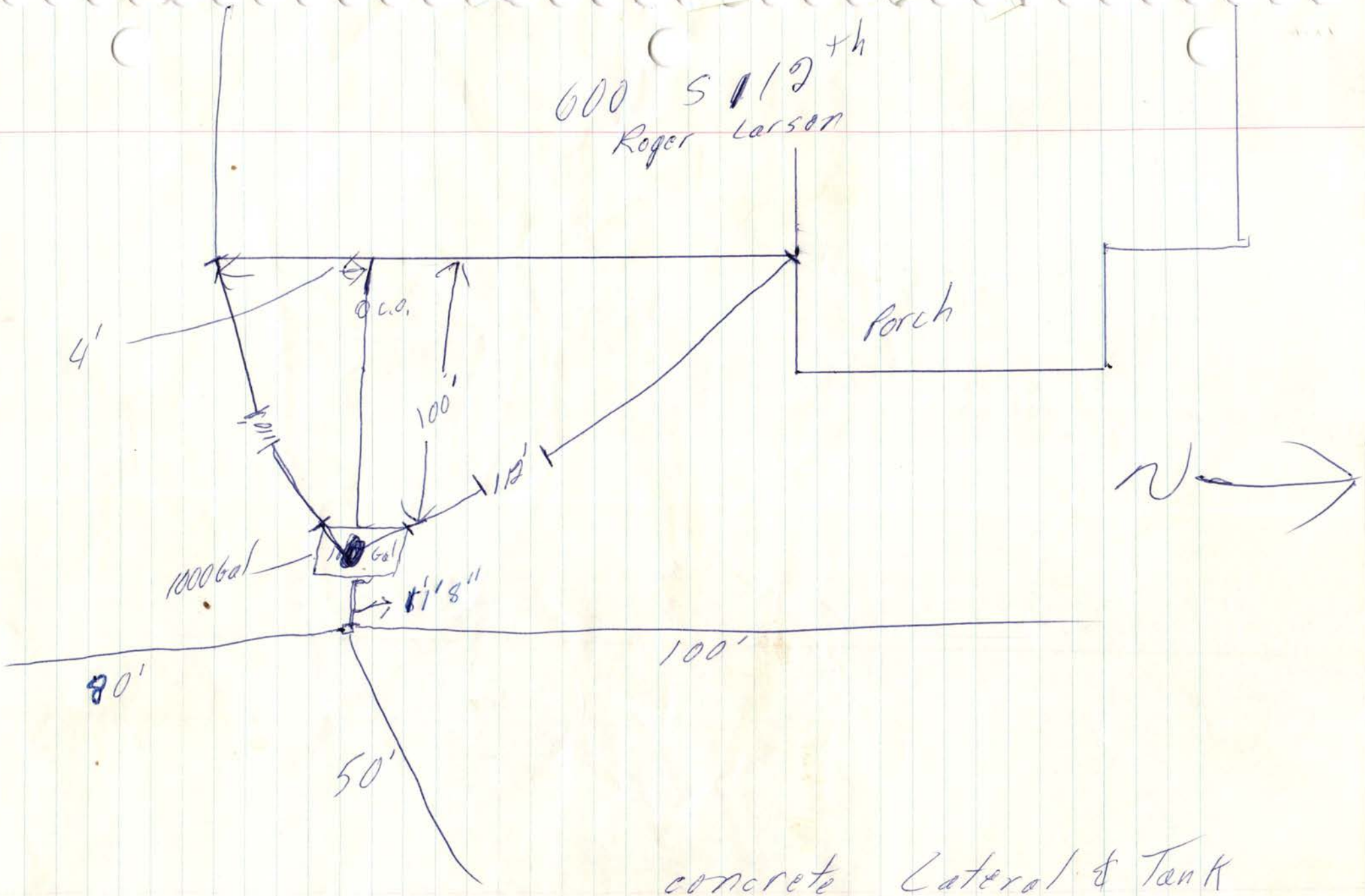
C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes ☒, (Company Ore Cast Step Co) No ☐
3. Dimension: Length 21 in.; Width 14 in. Depth 14 in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half moon
2. Lateral Lines; Depth below grade __in. Number ____; Length of each line ___ft Total length of Laterals 229 ft.; Slope ____in/100 ft. Diameter of pipe 20 in.; Shape Half moon Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____ Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: Road gravel. Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Signature of Applicant



concrete Lateral & Tank

Bouwens - plumbing

EASEMENT

This agreement made this _____ day of _____, 1977, between ROGER T. LARSON and SHIRLEY M. LARSON, husband and wife, herein called the Party of the First Part, GARY H. ERNST and DONA R. ERNST, husband and wife, herein called the Party of the Second Part, and KENLON HAKE and MAUREEN R. HAKE, husband and wife, herein called the Party of the Third Part:

WHEREAS, the Party of the First Part is seised of an estate in fee simple free from incumbrances of a parcel of land described as follows:

Parts of Lot 36 Irregular Tract in the N1/2 Section 30, Township 10 North, Range 8 East, 6th Principal Meridian, Lancaster County, Nebraska, further described as follows:

Beginning at the Southwest corner Lot 35, thence Easterly parallel to and 440.0 feet from North line said Lot 35, a distance of 1081.4 feet to a point on the East line said Lot 36; thence Southerly along East line Lot 36, 440.0 feet; thence Westerly parallel to North line said Lot 36, 450.9 feet; thence Northerly parallel to West line said Lot 36, 410.0 feet; thence Westerly parallel to North line said Lot 35; 635.0 feet to a point on the West line said Lot 36; thence Northerly along said West line, 30.0 feet to point of beginning, containing 4.97 acres more or less.

Beginning at a point of the West line said Section 30; 439.4 feet North of the West 1/4 corner said Section 30; thence Easterly parallel to North line said Lot 36, 635.0 feet; thence Northerly parallel to West line said Section 30, 410.0 feet; thence Westerly parallel to North line said Lot 36, 635.0 feet; thence Southerly along West line Section 30, 410.0 feet to point of beginning, containing 5.98 acres more or less,

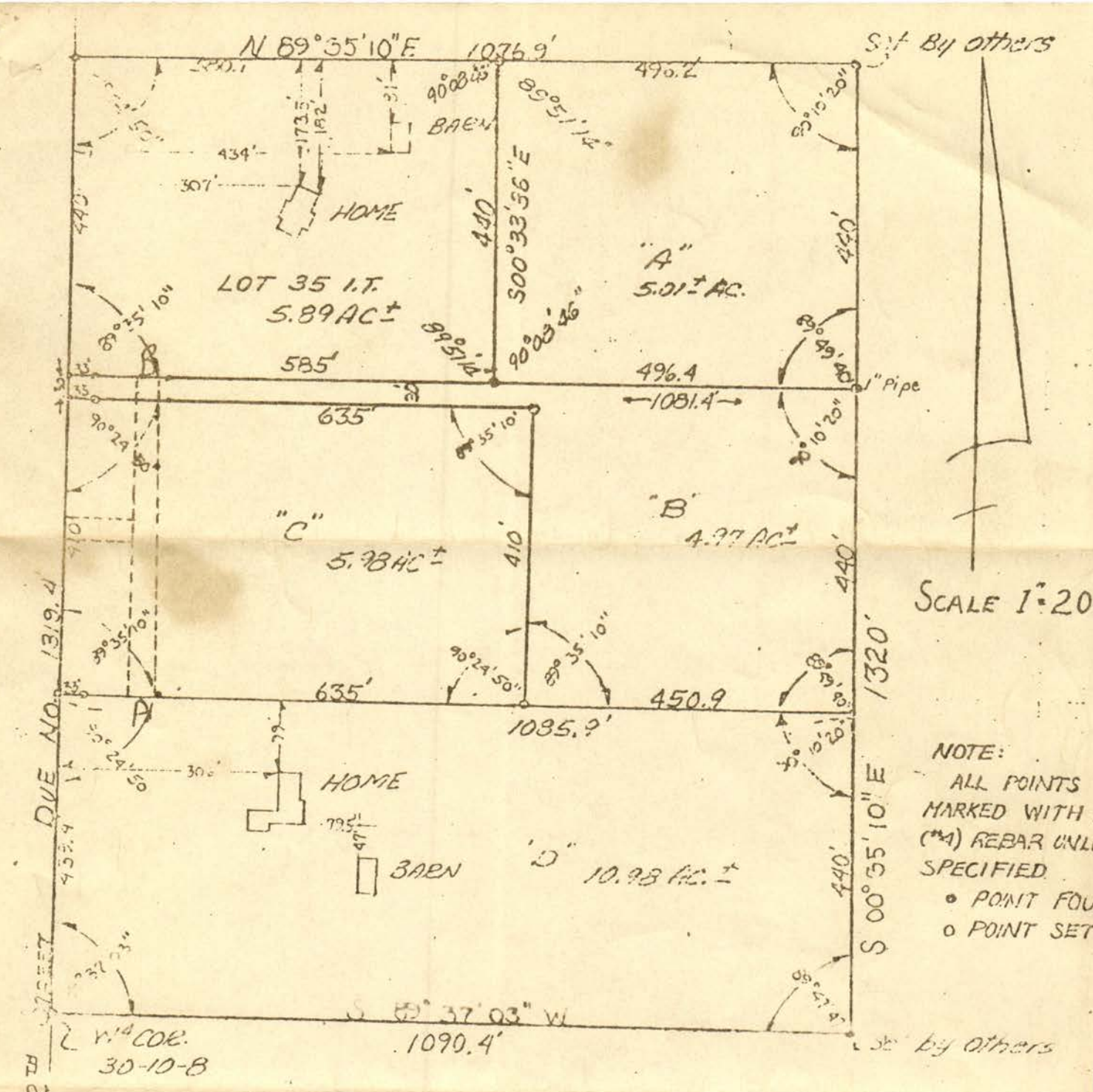
and delineated on the plan annexed hereto, across which there runs a private road shown on the said plan by the dotted lines where the road opens into South 112th Street, and the points where it opens into the lots owned by the Party of the Second Part and Party of the Third Part and delineated on the plan as point A and B.

AND WHEREAS, the Party of the Second Part is seised in fee simple of another parcel of land near the first-mentioned land, and bordering on the immediate south line of the above tract of land.

AND WHEREAS, the Party of the Third Part is seised in fee simple of another parcel of land near the first-mentioned land and bordering on the immediate north of the above tract of land.

AND WHEREAS, the Party of the First Part has agreed, in consideration of the sum of One Dollar ($1.00) and other valuable consideration to be paid to him by the Parties of the Second and Third Part, to grant to the Parties of the Second and Third Part an easement or right of way over the said private road for the purposes and in the manner hereinafter expressed:

In pursuance of the said agreement and in consideration of the sum of One Dollar ($1.00) and other valuable consideration paid by the Parties of the Second and Third Part to the Party of the First Part, the receipt whereof is hereby acknowledged, the Party of the First Part hereby grants unto the Parties of the Second and Third Part, their heirs and assigns:



CERTIFICATE

I hereby certify that each of the foregoing proposed lots have been accurately surveyed and each lot corner has been accurately staked and marked.

NEBRASKA REGISTERED LS-250 LAND SURVEYOR K. B. SMITH

K B Smith

L.S. 250

B-10

S-27

12

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.

[X] Evaluation of the Individual Water System Date: September 17, 1992

[X] Evaluation of the Sewage Disposal System [X] Enclosed is $150.00

Legal Description of Property: TWP. 10N; RANGE 8E; SECTION 30; BLOCK ____

LOT 40; ADDITION _____; Street Address 600 So. 112th Street, Lincoln, NE 68500

Directions to Property * Lot 40, NE Quarter 30-10-8, Lincoln, Lancaster County, NE

Location of Well NW corner of house-4' from house Tap Location: Inside [ ] Outside [X]

Location of Sewage System 75' ESE of house & visible SE corner of house Year Installed ____

	NAME	ADDRESS	PHONE
Present Owner:	Roger T. and Shirley M. Larson	600 So. 112th St, Lincoln	488-9479
Tenant/Buyer:	(for refinancing purposes)		
Return to:	Lincoln Bank South	4100 South 27th Street, Lincoln, NE 68502	423-2361

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

Signature of Applicant Lincoln Bank South By: Carol A. Rose Address 4100 South 27th Street Lincoln, NE 68502

==========

HEALTH DEPARTMENT USE ONLY

Date Received SEPTEMBER 16, 1992 Received $150.00 Check [X] Cash [ ]

PRELIMINARY STATUS--DATE 9/21/92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	[X]	[ ]	Approved:	[X]	Date 9/21/92 by J.C.H.
Bacteria	[X]	[ ]	Provisional:	[ ]	Date _____ by ____
Nitrate 0.4 PPM	[X]	[ ]	Disapproved:	[ ]	Date _____ by ____

Comments: WELL APPEARS TO HAVE BEEN STRUCK BY SOMETHING CAP IS A LITTLE COCKED AND AN EAR IS PARTIALLY BROKEN HOWEVER EVERY THING SEEMS TO BE TIGHT. IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter [ ]

FINAL STATUS

	WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM:	
	Approved: [X]	Approved: [X]	Provisional Approval: [ ]

APPROVED BY Leland C. Hood R.E.H.P. DATE SEPTEMBER 25, 1992

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