LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2374-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

FEBRUARY 12, 1987 — THIS PERMIT EXPIRES

BILL J. LEONARD — ISSUED TO

ROUTE #1 MALCOLM, NE 68402 — ADDRESS

T11N; R5E; Sec 5; 14101 N.W. 112TH — LEGAL DESCRIPTION

REMARKS: NEW CONSTRUCTION NON-TRANSFERABLE

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 FB — DATE 8/11/86 — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

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

20109-0977

Billy Leonard 796-2345

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
476-5857

A

FILING FEE: $ 60

FILE NO. 2374-C

DATE: 8-4-86

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. 11 N ; Range 5 E ; Section 5 ;
   Block ~~12~~ : Lot 13 Irr.; Addition _____
   Street Address ~~[illegible]~~ 14101 NW 112TH

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: _____ ft.

Billy Leonard
Signature of Applicant (Owner or Lessee)

Rt 1 Malcolm, NE 68402
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/12/86. Date Frwd. 8/13/86. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 8/13/86. Date Frwd. 8/13/86. ACTION: Approved ☐ Disapproved ☐ Signature: Dale Tibbet
3. City or County Engineer: Date Rec'd. 8/13/86 Date Frwd. 8/13/86. ACTION: Approved ☐ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 3-11-87 by: [illegible] sewer line & tank only.
Date: 3-13-87 by: [illegible]
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 3-13-87 By: Ron Morgan

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

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. 2374-O

PROPERTY WHERE SOIL TESTED: Northeast of

Location: Township 11 North; Range 5 East; Section & ¼ Section 5.
Property Dimensions: 273 ft. x 813 ft. Area: 5 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐; Silt Loam ☐; Clay Loam ■.
Dates of Tests: 6-29-86 to 6-30-86. Weather: Precip. 2½" From Pre-Test Temp. 80.
Some water in Holes From Pre-test Rained 2½"

OWNER: Bill Leonard
Address: NW. 112 + Mill Rd. ¼ mi N west side

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"	6-29	3:00 pm	6-30	3:00 pm	6-30	3:00 pm	6"	7:00 pm	5½	30m	½"	
2	36"	6-29	3:00 pm	6-30	3:00 pm	6-30	3:00 pm	6"	7:00 pm	5½"	30m	½"	
3	36"	6-29	3:00 pm	6-30	3:00 pm	6-30	3:00 pm	6"	7:00 pm	5½"	30m	½"	
4	36"	6-29	3:00 pm	6-30	3:00 pm	6-30	3:00 pm	6"	7:00 pm	5½"	30m	½"	
5	36"	6-29	3:00 pm	6-30	3:00 pm	6-30	3:00 pm	6"	7:00 pm	5⅜"	30m	⅝"	
6	36"	6-29	3:00 pm	6-30	3:00 pm	6-30	3:00 pm	6"	7:00 pm	5½"	30m	½"	

Mike Hoogland
Signature of Person Conducting Test
Address 2701 N 27th Lot 22 Phone 464-0638

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

Approved Percolation Rate (a)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

_____
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

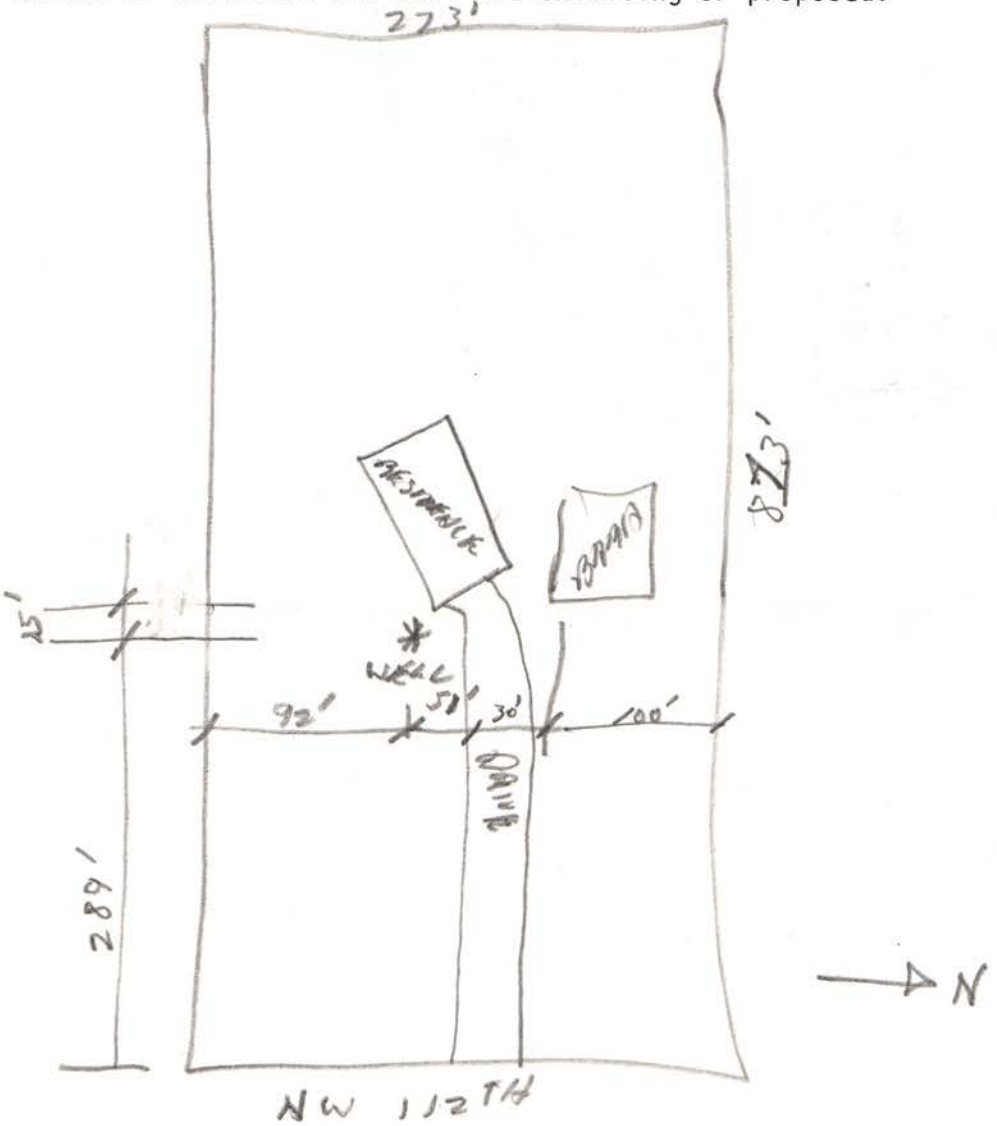
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 2374-C

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 990 sq.ft.

_____
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: 3/13/87

FILE NO. _____

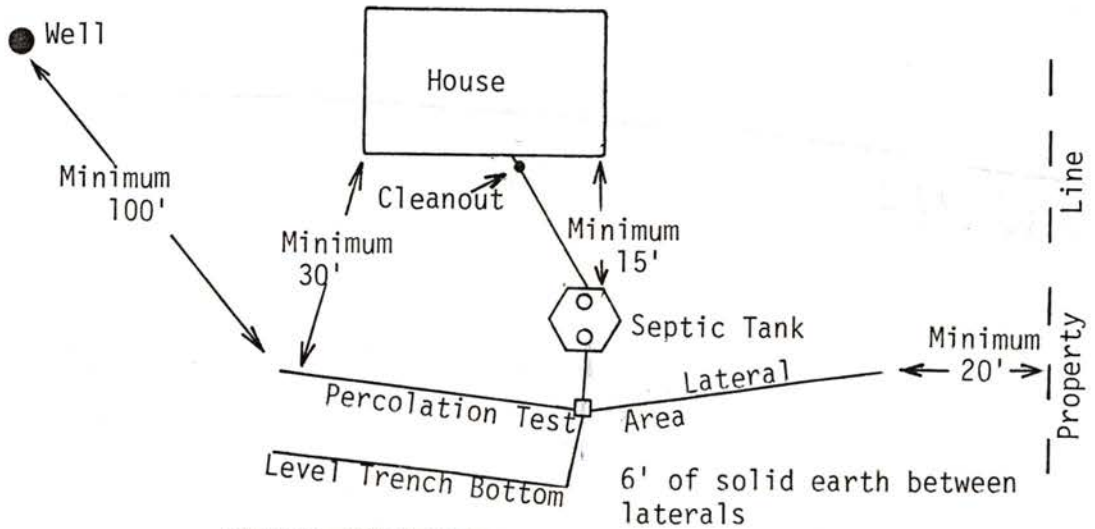
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material _____; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 10 in.
3. Distance between dwelling and septic tank 156 ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line 100+ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line 35 ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments 2.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre Cast Step -)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☒ Grade 24 in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 24 in.
8. Distances to:
Well or Suction Line 100+ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line 35 ft.

C. DISTRIBUTION BOX:
1. Material Concrete; Number - available outlets 3.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank 10' ft.

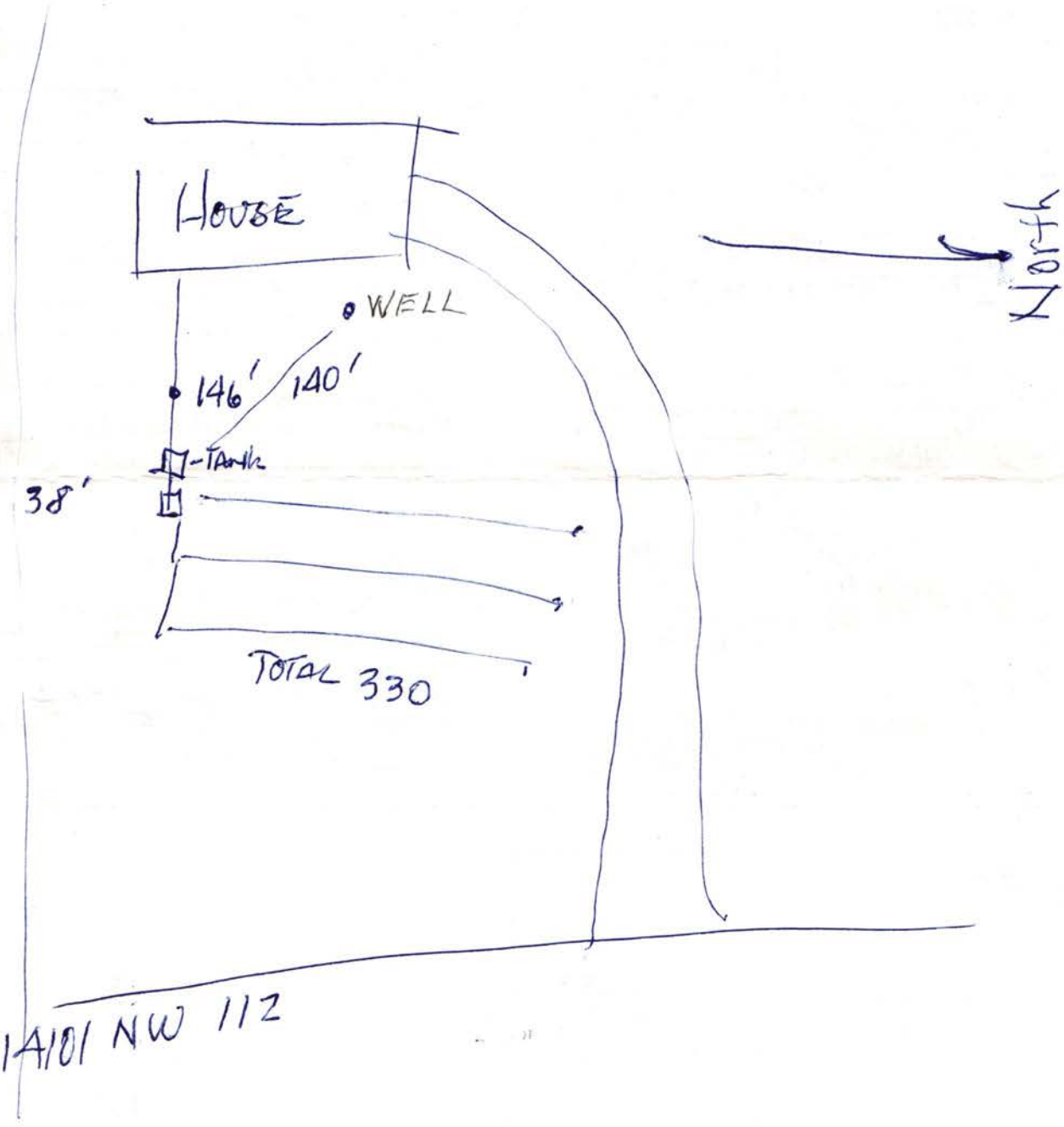
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or Perforated Pipe 4".
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number __ ; Length of each line _____, _____, _____, _____, _____ ft.;
Total length of laterals 330 ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 3 ft.;
Slope 2" in/100 ft.; Average Depth _____ in.
4. Filter Material: Gravel.
Depth of Material 24 in.
5. Distances to:
Well or Suction Line 100+ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line 35 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 3/6/87 INSTALLER Mark Customs Inc
Bob Seurer -



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

COPY

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 $200.00. Allow two weeks for processing. Incomplete information will delay processing.

CLOSING DATE 9-26-02

Legal Description of Property: Street Address 14101 N.W. 112TH ST.

Parcel ID 05-05-400-012-000 (i.e. 99-99-999-999-999)

Twp 11N Range 5E Section 5 1/4 1/4 Block Lot Addition LOT 13

Directions to Property 3-4 MILES NORTH OF MALCOLM ON 112 TH

Location of Well NORTH OF HOUSE Tap Location: Inside ☒ Outside ☐

Location of Sewage System EAST OF HOUSE Year Installed

Site Hazards (dogs, etc.) NONE

	NAME	ADDRESS	PHONE
Present Owner:	CLIFFORD & SHIRLEY LYONS	14101 N.W 112	
Tenant/Buyer:	DONNA & LARRY ALLEN	215 N. LOMBARD LN.	525-6778
Return to:	ROB PREDMORE	7141 A ST.	540-3818 434-3801 (Fax)

Signature of Applicant R. B Predmore Address 7141 A ST - 68510 Date 9/10/02

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 09/16/02 Amount 200.00 Check No. 4050 Initials

DATA ENTRY Date / / Case No. Initials

PRELIMINARY STATUS--By Ron Marquart **DATE:** 9/17/02

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM		Additional Site Visits
Construction	☒ corrected	☒ Conduit broken	Approved	☒	Date 9/20/02 by
Bacteria	☒ 0 /ml	☐ /ml	Provisional	☐	Date 9/23/02 by
Nitrate	☒ 0.3 ppm	☐ ppm	Disapproved	☐	Date / / by

Comments: Recommend checking to see if septic tank needs pumping, to see if septic tank is cracked, and that baffels are intact.

9-20-02 Conduit repaired See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Marquart RS Date 9/24/02

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.

9-23-02

P21606-45

White - Applicant after approval Yellow - Environmental Health

Revised/Reprint: 9-00

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.

[X] Evaluation of the Individual Water System Date: February 22, 1993

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

Legal Description of Property: Irregular Tract SE 1/4 5-11-5 TWP. 11N ; RANGE 5E ; SECTION 5 ; BLOCK ____

LOT 13 ; ADDITION _____ ; Street Address 14101 NW 112th St, Malcolm, NE 68402

Directions to Property 3 miles North of Malcolm

Location of Well 30 feet East from the front of the house. Tap Location: Inside [ ] Outside [X]

Location of Sewage System 200 feet straight East from the Southeast corner of the house. Year Installed 1987

	NAME	ADDRESS	PHONE
Present Owner:	Harold & Janet Byran (Bill Leonard 3 yrs ago)	14101 NW 112th, Malcolm, NE	796-2321
Tenant/Buyer:	Clifford Lyon & Shirley Bower	One Beckman CR, Malcolm, NE	796-2130
Return to:	Lincoln Bank South	4100 So. 27th, Lincoln, NE 68502	423-2361

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

Signature of Applicant Lincoln Bank South By: Carla A. Sherwood Address 4100 So. 27th Street Lincoln, NE 68502

==========

HEALTH DEPARTMENT USE ONLY

Date Received 02/23/93 Received $150.00 M.O. Check [X] # 72978 Cash [ ]

PRELIMINARY STATUS--DATE 2-24-93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	[X]	[ ]	Approved:	[X]	Date 2-24-93 by rm
Bacteria	[X] 0	[ ]	Provisional:	[ ]	Date _____ by ____
Nitrate	[X] <0.1	[ ]	Disapproved:	[ ]	Date _____ by ____

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

See Attached Letter [ ]

FINAL STATUS

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

APPROVED BY Ron Mangum RS DATE 3-5-93

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

260