LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1018-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

September 23, 1977 — THIS PERMIT EXPIRES

Cecil Bykerk — ISSUED TO

307 South 54 St., Lincoln, NE 68510 — ADDRESS

T11N, R5E, Section 4 — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
[illegible]	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

Health — ISSUING OFFICER

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

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

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1018-C

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

DATE: March 23, 1977

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

1. Legal description of property: Twp. T11N ; Range R5E ; Section 4 (see below)
   Block ____; Lot ____; Addition ____
   Street Address ____

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

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

4. Distance to public sewer: ____ ft. (Approximately 2½ miles north of Malcolm)

Surveyer's description for deed purposes: West 483.5' of the SE¼ of the SW¼ of section 4, T11N R5E of the 6th P.M. said tract containing 14.60 acres more or less. Surveyed in April 1976 by Robert B. Bates of Lincoln.

Signature of Applicant (Owner or Lessee)

307 South 54th Street, Lincoln, Nebraska 68510
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 3-23-77 . ACTION: Approved ☐ Disapproved ☒
   Date Frwd. ____ . Signature: Ronald Maynard

2. Supt. Bldg. Insp.: Date Rec'd. 3-23-77 . ACTION: Approved ☐ Disapproved ☐
   Date Frwd. ____ . Signature: ML

3. City or County Engineer: Date Rec'd. 3-23-77 . ACTION: Approved ☐ Disapproved ☒
   Date Frwd. 3-23-77 . Signature: Henry Kraft

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 [X]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1018-C

DATE: March 23, 1977

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. T11N ; Range R5E ; Section 4(see below) ; Block ; Lot ; Addition .
Street Address .

2. Property Use: Residential [XX]; Commercial [ ]
No. of Bedrooms 3
Describe:
Other Use
Describe:

3. Type of Individual Sewage Disposal System: Septic Tank [XX]; 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).

Surveyer's description for deed purposes: West 483.5' of the $SE\frac{1}{4}$ of the $SW\frac{1}{4}$ of section 4, T11N R5E of the 6th P.M. said tract containing 14.60 acres more or less. Surveyed in April 1976 by Robert B. Bates of Lincoln.

Arild Bykerk
Signature of Applicant (owner or lessee)

307 South 54th Street Lincoln 68510
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; 3-23-77
Filing Fee: $ 30.00

2. Site Visits:
Date: 7/26/77 by: J. C. H.
Date: / / by:
Date: / / by:

3. Date: Approved [X]; Disapproved [ ]
by: Ronald Mangum

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 7/26/77 by: Jerrold C. Hood

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. 1018-C

PROPERTY WHERE SOIL TESTED:
Location: Township T11N : Range R5E
Section & ¼ Sect. Sec.4 SW¼
Property Dimensions: 483.5 ft. x 1320 ft.
Area: 14.64 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: Cecil D & Loree G. Bykerk
Address: 307 South 54th Street
Lincoln 68510

Dates of Tests: March 20, 1977 to March 21, 1977. Weather: Precip. None Temp. 35°F.

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	33	3/20	3:00	3/20	7:00	3/21	4:00	6	4:30	5 1/8	30	7/8	34.3
2	31	3/20	3:00	3/20	7:00	3/21	4:02	6	4:32	5 3/4	30	1/4	120
3	33	3/20	3:00	3/20	7:00	3/21	4:04	6	4:34	5	30	1	30
4	31	3/20	3:00	3/20	7:00	3/21	4:06	6	4:36	5 3/4	30	1/4	120
5	30	3/20	3:00	3/20	7:00	3/21	4:08	6	4:38	5 7/8	30	1/8	240
6	33	3/20	3:00	3/20	7:00	3/21	4:10	6	4:40	4 7/8	30	9/8	26.6

Cecil D Bykerk
Signature of Person Conducting Test

Sum of Percolation Rates: 570.9
Average of Rates: 95.1
Mean of Rates: .60

Address 307 South 54th Street 68510
Phone ofc 472-2698 home 489-5296

(Do not write below this line)

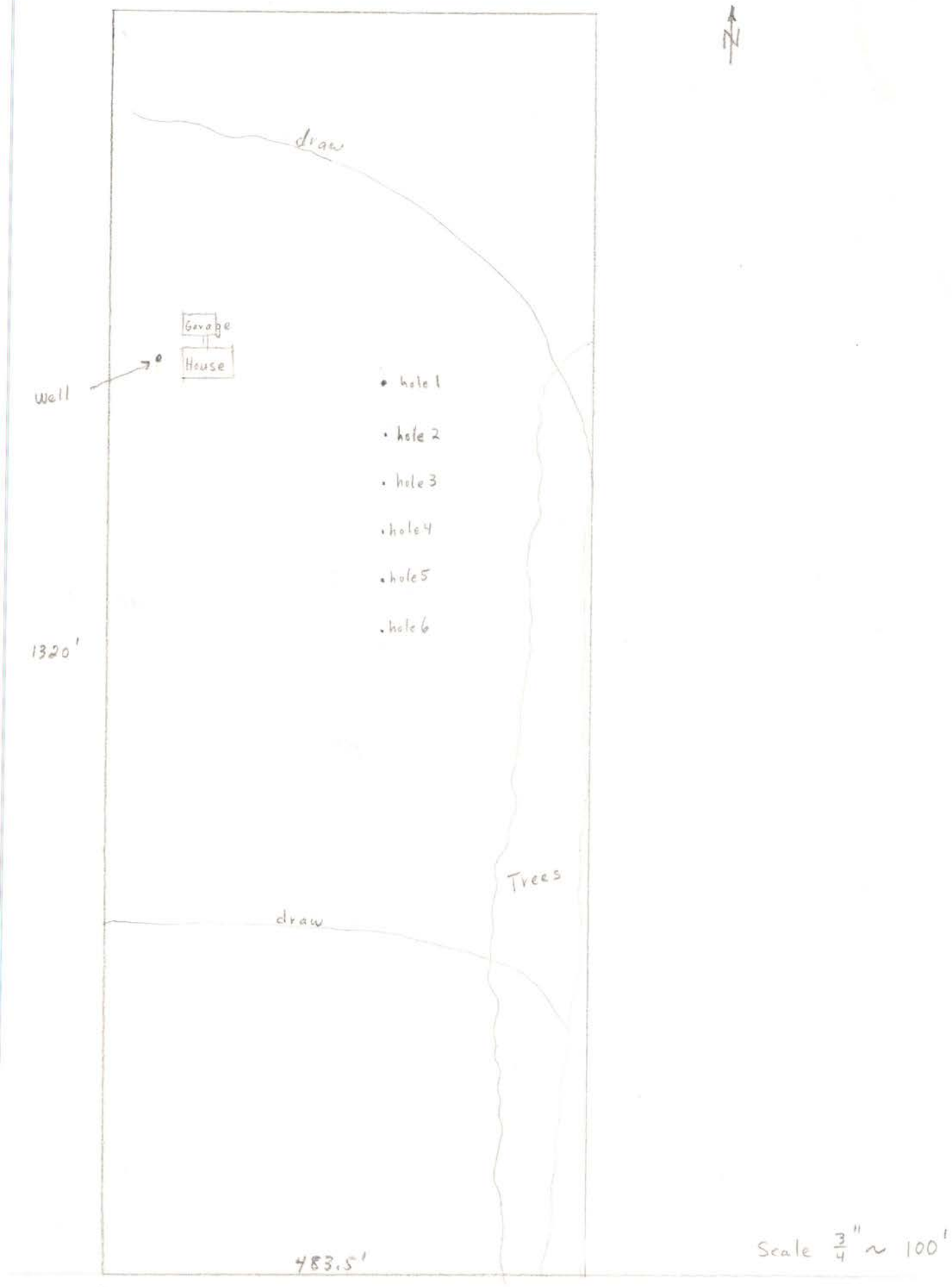
REVIEWING ACTION

REMARKS: Sharpsburg Silty Clay Loam (S.C.S.)

DATE:

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

Gerrold C. Hood
Signature of Reviewing Official


draw
Garage
House
Well
hole 1
hole 2
hole 3
hole 4
hole 5
hole 6
1320'
Trees
draw
483.5'
N
Scale 3/4" ~ 100'
← 1/4 mile to blacktop
West Mill Road

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
City Ordinance No. 9150 [ ]
County Resolution No. 2832 [X]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 10-18C

SPECIFICATIONS

DATE: _____

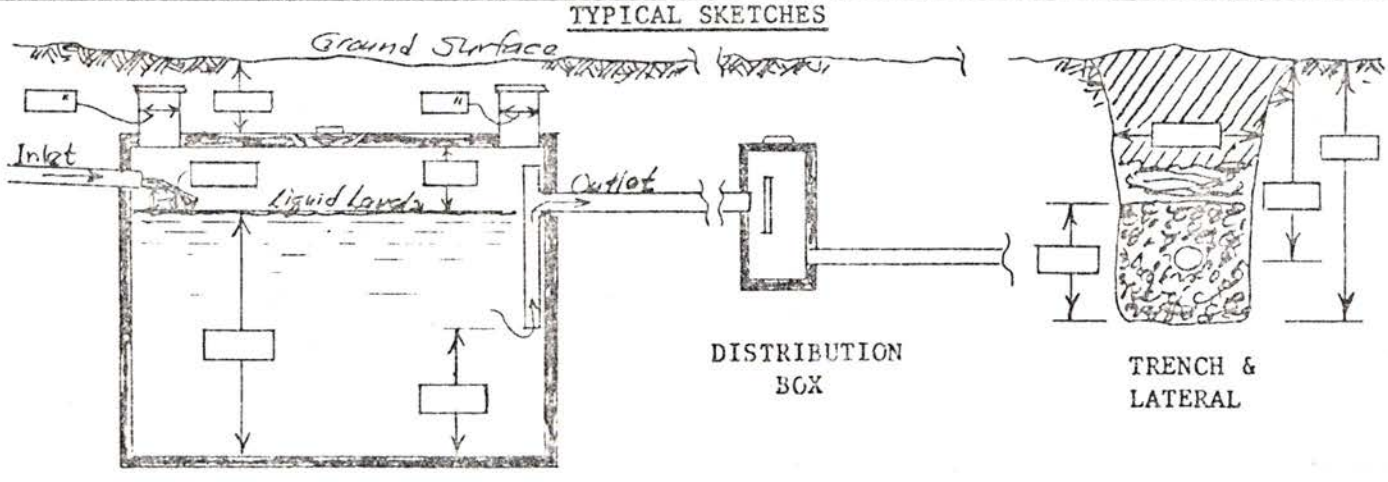
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes [ ] (Company _____)
No [ ]
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle [ ]; or Tee [ ]
6. Outlet: Baffle [ ]; or Tee [ ]
Depth of outlet below inlet ___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 _____; No. available outlets _____.
2. Factory Built: Yes [ ], (Company _____
_____ No [ ]
3. Dimension: Length ____in.; Width ___in.
Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes [ ], No [ ]
(If yes, show detailed plans.)

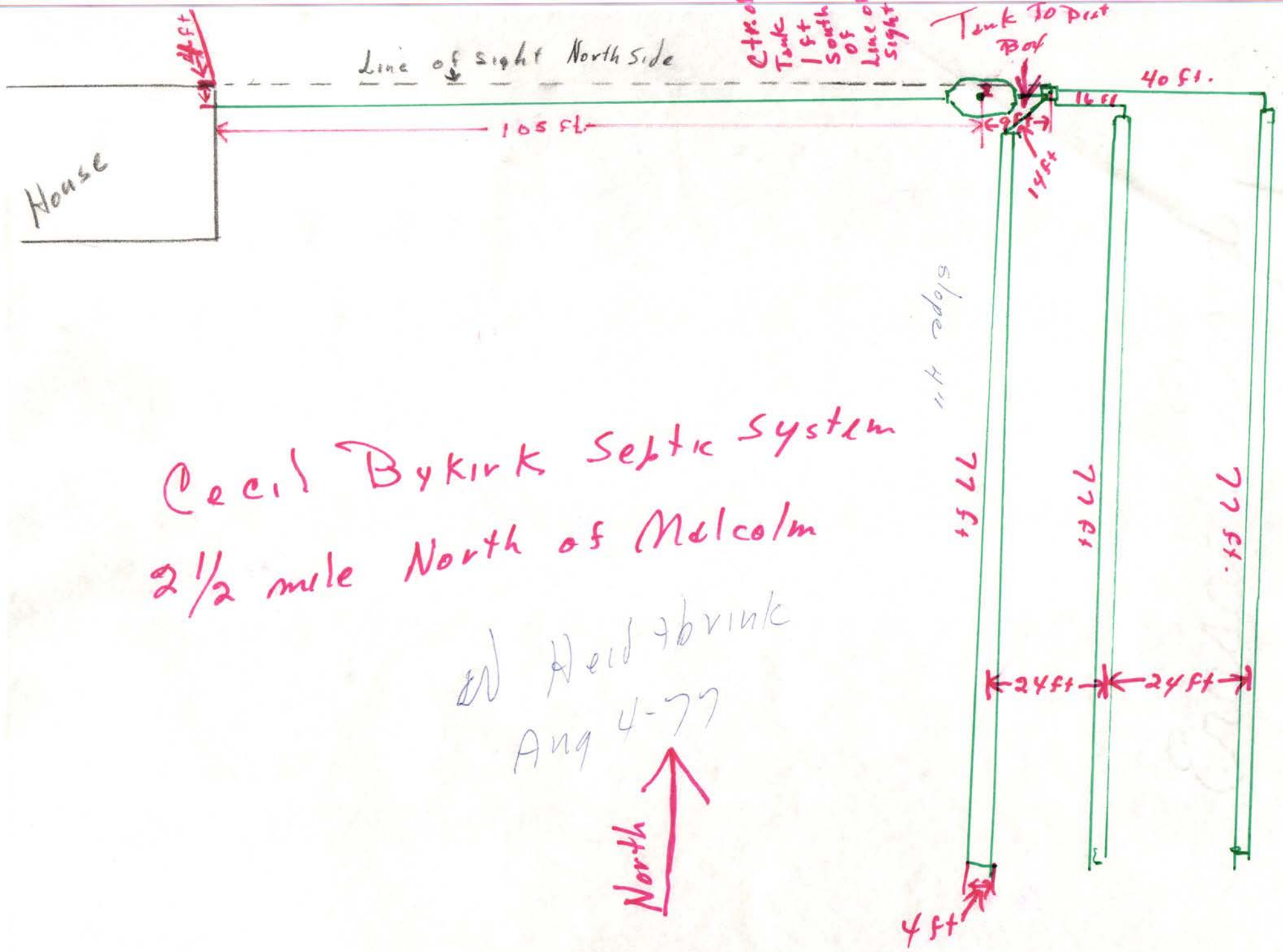
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade __in.
Number 3; Length of each line ___ft
Total length of Laterals 231 ft.;
Slope 6 in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete [ ]; fiber asbestos [ ]; clay [ ]; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.;
Width 48 in.
4. Filter Material: _____.
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: 48 minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

_____
Signature of Applicant



Cecil Bykirk Septic System

2 1/2 mile North of Malcolm

Ed Heidbrink

Aug 4-77

002

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 10800 W. Mill Road

Twp 11 N Range 5E Section 4 1/4 SW 1/4 ___ Block ___ Lot 10 Addition ___

Directions to Property North from Malcolm on pavement (112th) to West Mill Rd; the east on W. Mill ± 1/4 mile. First drive on north.

Location of Well West of house about 30' Tap Location: Inside ☐ Outside ☒ North side of house.

Location of Sewage System East of house ± 105' See attached drawing Year Installed 1978

	NAME	ADDRESS	PHONE
Present Owner:	Gregory Brown	10800 W. Mill Rd Malcolm NE 68402	796-2201 472-2657
Tenant/Buyer:	Refinance		
Return to:	Marlin Lyon	First Commerce Savings 126 N. 11th, POB 80036 Lincoln NE 68501	

Signature of Applicant Gregory W Brown Address 10800 W Mill Malcolm NE 68402 Date 2/6/94

HEALTH DEPARTMENT USE ONLY

Date Received 2/9/94 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By R. Marquart **DATE:** 2/9/94

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☒	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ 4.0 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

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

See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Marquart, R.S. Date 2/17/94

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.

RECEIVED JAN 14 1992

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: 8 Nov '91

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

Legal Description of Property: TWP. 11 ; RANGE 5 ; SECTION SE 1/4 of SW 1/4 4 ; BLOCK ____

LOT 10 ; ADDITION _____ ; Street Address 10800 W. Mill Rd Malcolm NE 68402

Directions to Property Hiway 34 To 55 M Thru Malcolm 3 miles North on 112th St To West Mill Road And 1/4 mile East To Driveway - Two story Brick House

Location of Well 50' West of House By Driveway Tap Location: Inside ☐ Outside ☒

Location of Sewage System In Front * To East of Pole Barn Year Installed 1978 Sowers control cool By Kerk

	NAME	ADDRESS	PHONE
Present Owner:	Glenn & Joan Leitner	10800 W. Mill Rd, Malcolm	796-2337
Tenant/Buyer:			
Return to:	Century 21 Home & Farm	2200 S. 40th	

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

Signature of Applicant Greg W Brown Address 3743 Woods Ave Lincoln NE 68510

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HEALTH DEPARTMENT USE ONLY

Date Received JANUARY 14, 1992 Received $~~150.00~~ 150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 1-15-92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:	SITE VISIT:
Construction	☒	☐	Approved: ☒	Date 1-15-92 by [illegible]
Bacteria	☒	☐	Provisional: ☐	Date _____ by ____
Nitrate	☒ 4.8 6 mile	☐	Disapproved: ☐	Date _____ by ____

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

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ron Mayfield, RS. DATE Jan-27-92

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