



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET
NON TRANSFERABLE

Lincoln, NE 68510-1514
PERMIT

(402) 441-8000

Permit

No. 99380196201

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 04/08/99

Expires 10/08/99

Revenue Code 3157

Establishment

VIRGIL MUNDEN
T11N R5E SEC 1 QTR SE
LOT 19
14201 NW 56 ST-RAYMOND

FEES: \$150.00

Permittee

VIRGIL MUNDEN
14201 NW 56 ST
RAYMOND NE 68428

TOTAL \$150.00

Issued By  Health Director
Lincoln-Lancaster County Health Department

009080

THIS LICENSE OR PERMIT IS ISSUED SUBJECT
TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"



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

A

Permit Number:

993801962

Sewage Disposal System Request for Site Clearance and Permit

Include Form B, Form C
and Applicable Fees
with this Application.

☐ Septic System ☐ Lagoon ☒ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 14201 NW 56 City Raymond NE, Zip 68428
(no rural route)
Legal Description SE 1 11W SE 19
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name Virgil Munden Signature _____
Address 14201 NW 56 City/State/Zip Raymond Ne 68428
☐ Check if owner designed system Home Phone 783-3947 Work Phone _____

C. Contractor

Name Brad Southwick Company Name Southwick Sewer & Drain
Address 17201 So 72 City/State/Zip Hickman Ne 68322
☒ Check if contractor designed system Work Phone 430-7606

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 2 Is there a Whirlpool Bathtub YES ☐ NO ☒
☐ Commercial Establishment/Other Facility Specify _____
Design flow in gallons per day _____ Type of Wastewater: ☐ Domestic ☐ Non-Domestic.

DO NOT WRITE BELOW THIS LINE

Approval Process

☐ Municipal Code 24.38 ☒ County Resolution No. 2832

1. Health Department

Date rec'd 4-6-99
Date fwd 4-7-99

ACTION ☒ Approved ☐ Disapproved
Signature Paul Dorman

2. Supt. Bldg. Insp. or Village Clerk

Date rec'd _____
Date fwd _____

ACTION ☐ Approved ☐ Disapproved
Signature N/A

3. City or County Engineer

Date rec'd _____
Date fwd _____

ACTION ☐ Approved ☐ Disapproved
Signature N/A

Installation Final Written Approval

By Paul Dorman
Date 5-4-99

Business Office Use Only

Date Rec'd 04/08/99
Amt Paid 150
Rec'd By JS Cash/Check No. 3439



Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022

B

Permit Number:

993801962

Sewage Disposal System Soil Absorption Test Data Report Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 14201 NW 56 City RAYMOND NE, Zip 68428
(no rural route)

Owner Virgil W. Munden Address 14201 NW 56 RAYMOND, Ne 68428

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

Date of Tests 3/20/99 to 3/21/99 Weather: Precipitation 0 Temperature 60°

Percolation Test Data Table

A. Hole No.	B. Hole Depth (in)	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings						L. M. N. Results		
		Start		End		Start		Water Lev (in.)	End		Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/in)	
		Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)		Date (Mo/Da)	Time (Hr/Min)				
1	36"	3/20	11:30	3/20	3:30	3/21	11:00	6	3/21	3:00	30	2 1/4	10	
2	36"	3/20	11:33	3/20	3:33	3/21	11:02	6	3/21	3:03	30	2 3/8	9	
3	36"	3/20	11:36	3/20	3:36	3/21	11:04	6	3/21	3:06	30	2 3/8	9	
4	36"	3/20	11:39	3/20	3:39	3/21	11:06	6	3/21	3:09	30	2	15	
5	36"	3/20	11:42	3/20	3:42	3/21	11:08	6	3/21	3:12	30	2 1/8	16	
6	36"	3/20	11:45	3/20	3:45	3/21	11:09	6	3/21	3:15	30	2 1/8	16	

Person Conducting Percolation Tests

Name: Virgil W. Munden

Phone: 783-3941

Address: 14201 NW 56

Raymond Ne 68428

Sum of Percolation Rates: 65

Average of Rates: 11

Rate Used for Calculation: 11

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

C

Permit Number:

993801962

Sewage Disposal System Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.

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

A. System Location (Indicate correct number and street)

Address (no rural route) 14201 NW 56 City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate _____ (min. per inch) Soil Type: _____ Land Slope: _____ %

Type of Absorption System: ☐ Trench ☐ Bed ☐ Other _____

Total Square Feet of Field Required: _____ sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: _____

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 100 ft Number of Trenches _____ Trench Width _____

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Ground Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☐	25 ☒	20 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☒	40 ☒	☒
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Ernesting House Date _____

Installer Brad South Date 4-6-99



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

D

Permit Number:

993801962

Sewage Disposal System As Built Plans & Specifications

Date 5-4-99

Infiltrator Lateral & Dish Box Added 5-4-99

System Location (Indicate correct number and street)

Address 14201 NW 56 City Raymond NE, Zip 68428
(no rural route)

A. Building Sewer

- Material: Sch 40 PVC (attask)
Diameter: 4" in.
- Distance above basement floor: _____ in.
or distance below basement floor: _____ in.
- Distance between dwelling and septic tank: _____ ft.
- Number of clean-outs: _____
- Distances to: well or suction line _____ ft.
stream _____ ft.
pressure line _____ ft.
property line _____ ft.

B. Septic Tank

- Material: Concrete
Number of compartments: 1
- Capacity: 1000 gal.
- Factory built: ☒ Yes ☐ No
- Manholes: Over inlet, diameter 3x9 in.
Over outlet, diameter 15 in.
Riser: ☐ above ☒ below grade 6 in.
- Inlet: ☒ baffle ☐ tee
- Outlet: ☒ baffle ☐ tee
- Depth to top of tank, below unfinished grade: 19 in.
- Distances to: Well or suction line > 50 ft.
Stream NA ft.
Pressure line _____ ft.
Property line > 5 ft.

C. Distribution Box

- Material: PVC
Number available outlets: 5
- Factory built: ☒ Yes ☐ No
- Distance from septic tank: 1' ft.

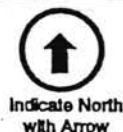
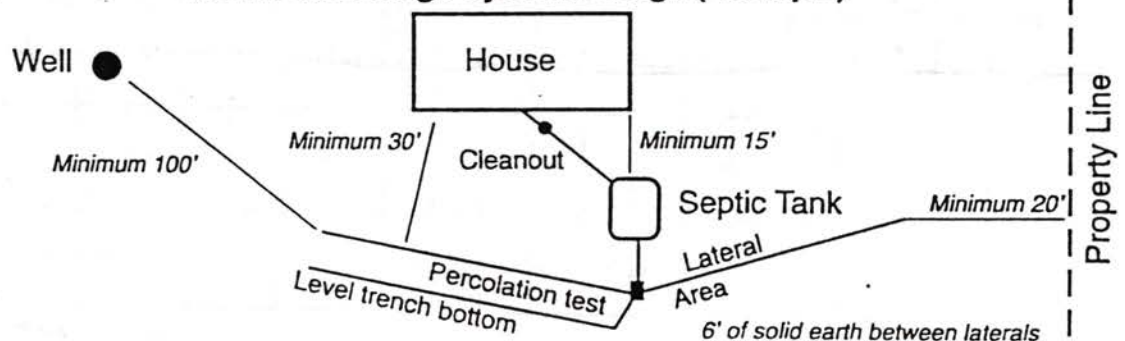
D. Absorption Field

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

- Type: ☒ Half rounds ☐ Perforated pipe
Diameter of half round: 16"
or perforated pipe: _____
Material: ☐ fiberglass ☒ plastic ☒ concrete
☐ other _____
- Lateral lines: Number 2
Length of each line: 115 ft. 90 ft.
_____ ft. _____ ft. _____ ft.
- Trench dimensions: Width 4' ft.
Slope _____ in/100 ft.
Average depth 42-46 in.
- Filter material: Road Gravel
Depth of material 16 in.
- Distances to: Well or suction line > 100 ft.
Stream > 50 ft.
Pressure line > 20 ft.
Property line > 20 ft.

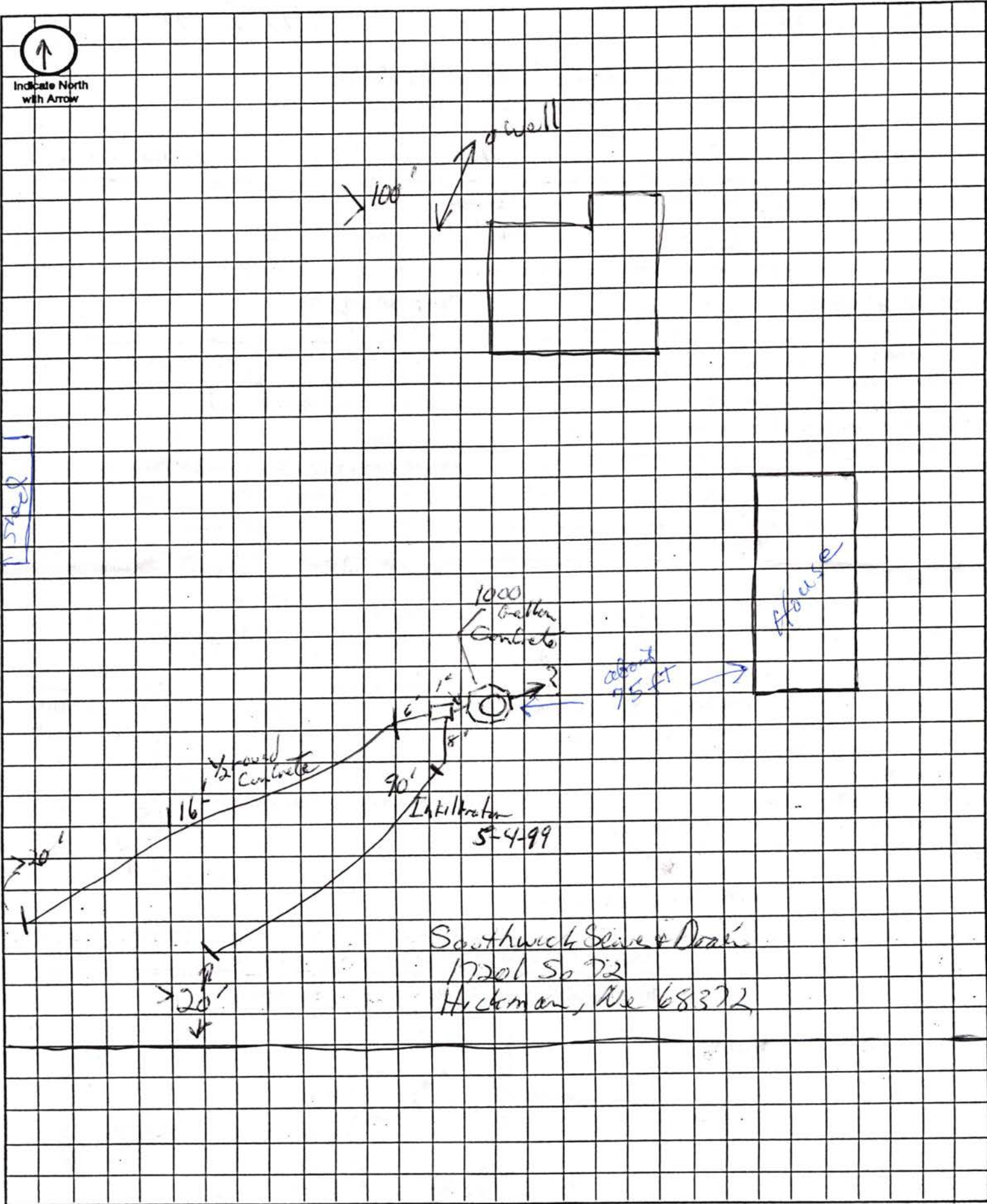
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



Indicate North
with Arrow

As Built Drawing



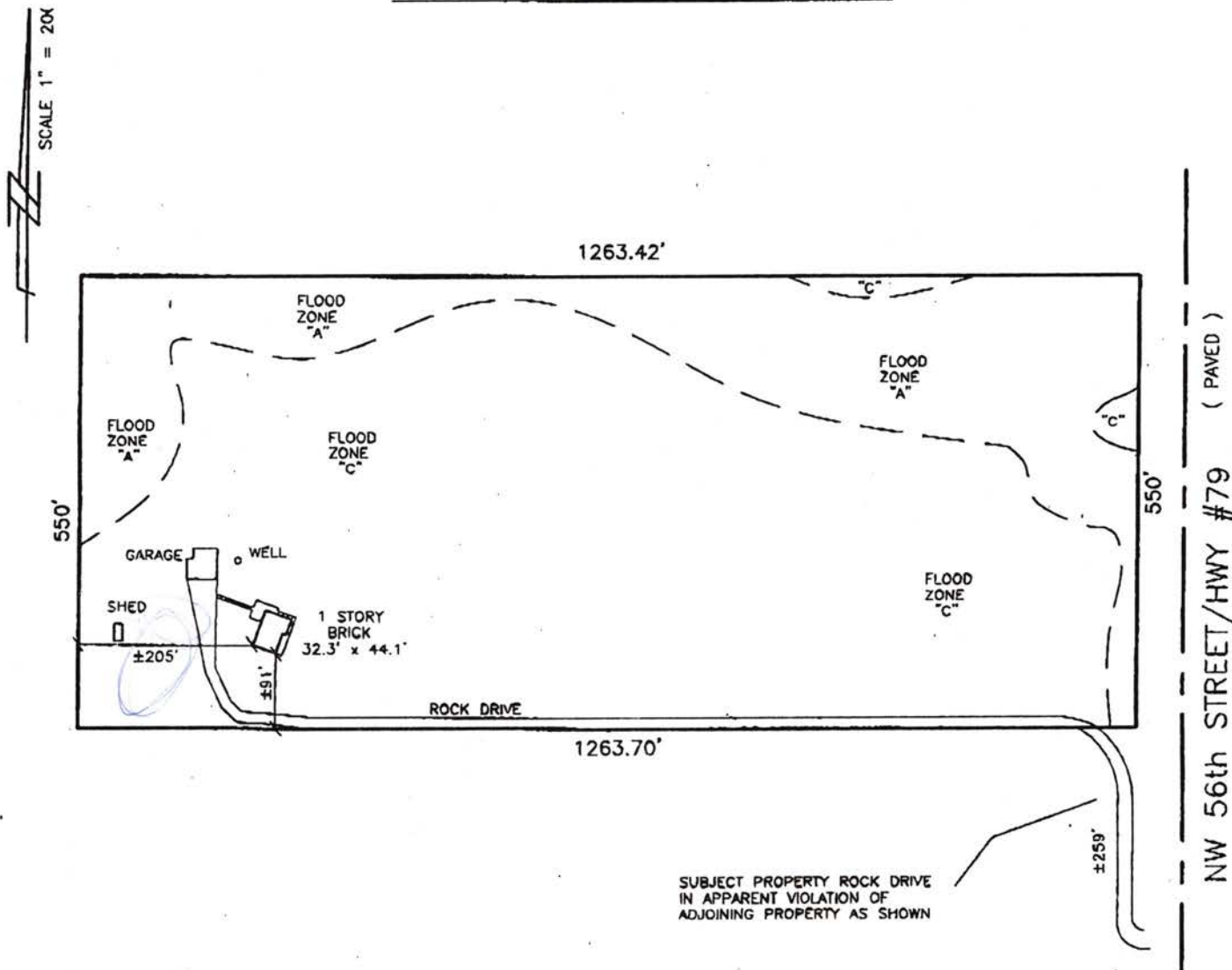
540 W. INDUSTRIAL LAKE DR.,
SUITE 1 - LINCOLN, NE 68528
(402) 476-3020
(402) 476-3138 FAX

K&M inc.
Land Surveying

SHANE CUTTLERS
WOODS BROTHERS

PROJECT # 993035
DATE: 3/4/99 B/P: 80-39

14201 NW 56th STREET



Subject property apparently falls within the confines of Zone " A & C " as determined by the FEMA-FIA
Flood Rate Map community 310138, panel 0001 B, revised 8/3/81.

LEGAL DESCRIPTION: LOT 19 IRREGULAR TRACT, LOCATED IN THE SOUTHEAST QUARTER OF SECTION
1, T 11 N, R 5 E, LANCASTER COUNTY, NEBRASKA

SURVEYOR'S CERTIFICATE

The undersigned does hereby certify that the inspection made this day on the ground of the property legally described hereon and that there are no visible discrepancies, encroachments, overlapping of improvements, easements or rights-of-way in evidence or known to me, except as shown hereon. The foregoing is shown with an accuracy necessary to satisfy the needs of a lender or insurer. This does not guarantee ownership, only the location of said tract. This plat is not a boundary survey and the accuracy may vary upon completion of a boundary survey.

Billy Joe Kerr
Billy Joe Kerr, L.S.





Township 11 Range 5 Section 1
Lancaster County, Nebraska



Carl Kinkade
3/25/99



Munden Residence



Munden Residence
Township 11 Range 5 Section 1
Lancaster County, Nebraska



Carl Kinkade
3/25/99

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Legal Description Lot 19 T11N R5E SEC 1 Location 14201 NW 56th
 Owner/Requestor Munden / Cutlers

WELL/SEWAGE SYSTEM INSPECTION FORM

Based on an inspection this day, the items circled below identify the violations in construction or operation. Some items may not apply. Components that could not be located are indicated as "unknown".

- ☐ New system, initial
☐ New system, followup
☐ Existing system, repair
☐ Existing system, followup
☒ Loan approval
☐ Consultation
☐ Other (Specify)

REMARKS Existing well is located in a pit. New well drilled but not finish and connected to water distribution system. Nitrate sample collected for current well. Decommission well in pit
Septic system installed w/out inspection by LLCHD in 1980
Recommend pumping of tank. Provide a Flood survey to LLCHD
Conduct perc. test. Install lateral(s) based on perc. test. Uncover tank for inspection
 Water System Sewage System ☒ Septic ☐ Lagoon

1. Approved Permit;
(Permit not applicable)
2. Sanitary Seal
3. Screened Vent/Conduit Sealed
4. Well Casing Material
5. Well House
6. Distance of Well from
 - A. Leach Field
 - B. Septic Tank
 - C. Sewer Line
 - D. Frost-Proof Hydrant
 - E. Lagoon
 - F. Accumulated Manure
 - G. Pit or Depression
7. Pressure Line from Sewage System
8. Other Deficiencies (Specify)

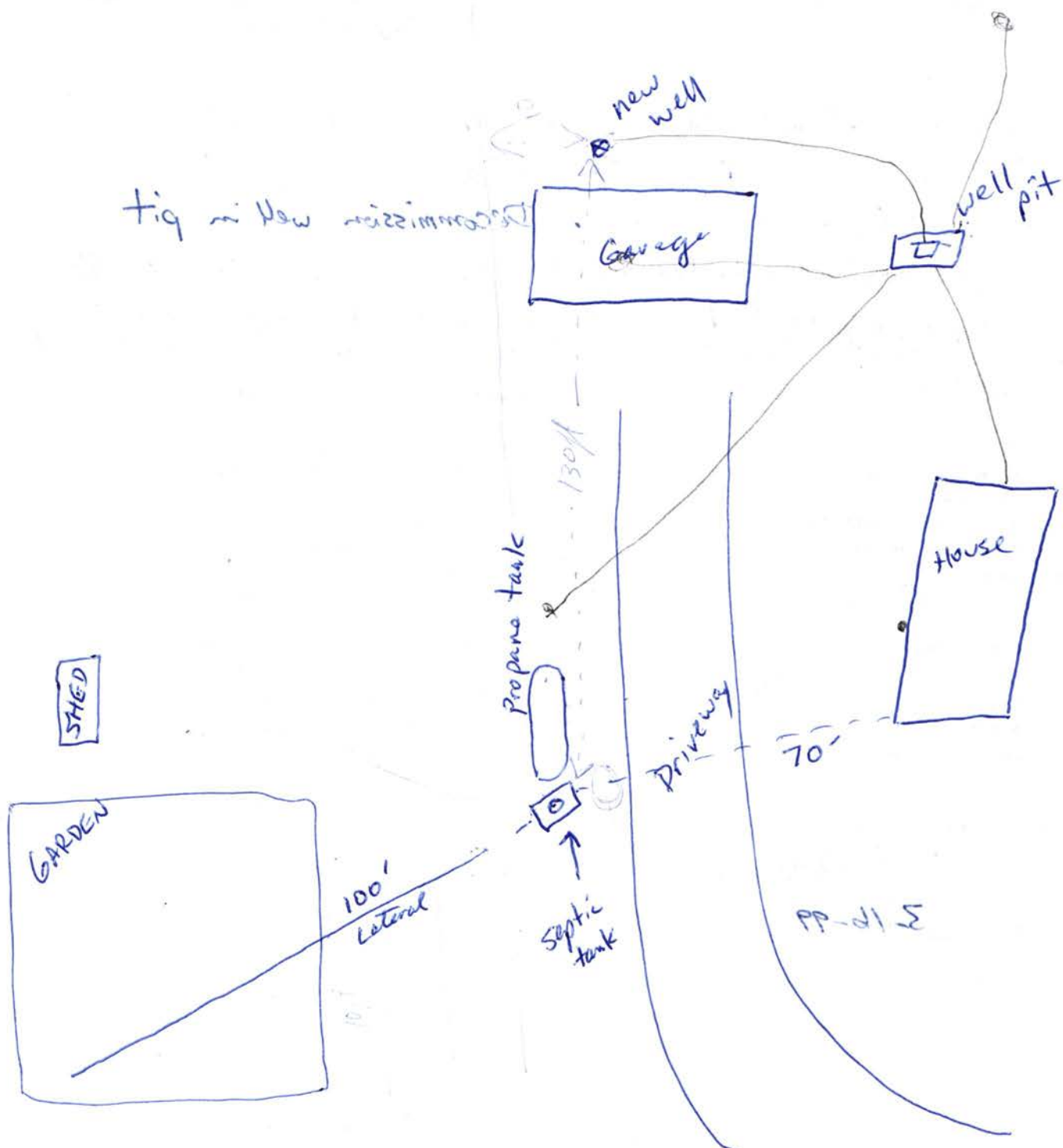
1. Approved Permit;
(Permit not applicable)
2. Visible Discharge or Seepage
3. Location from Property Line Building
4. Location from Water System Component
5. Lateral Construction, Length, Drop
6. Septic Tank Size + Installation
7. Distribution box
8. Lagoon Fencing, Warning Signs, Vegetation, Dike Damage, Locked Gate, Water Depth
9. Constructed According to Sizing
10. Septic Tank: Constructed Properly, Maintained
11. Other Deficiencies (Specify)

Inspected by: Paul Drotzmann
 Date: 3-16-99

Received by: _____

WA1002 MRS MUNDEN VISITED THE OFFICE. SOIL ANALYSIS TO SHOW ABSORPTION FIELD IS ABOVE SEASONAL WATER LEVEL IS NEEDED. ADDITIONAL LATERAL, NOT UNDER GARDEN SPACE TO TOTAL 342 SQ FT IS NEEDED. PIPE UNDER DRIVE WAY MUST MEET CONSTRUCTION REQUIREMENTS.

as seen on 3-16-99
Paul Drotzmann





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 14201 NW 56th STREET - Raymond
Twp 11N Range 5E Section 1 1/4 1/4 Block 19 Addition 68428
Directions to Property _____

Location of Well See attached sheet Tap Location: Inside ☐ Outside ☒
Location of Sewage System Under the garden Year Installed approx 1980

	NAME	ADDRESS	PHONE
Present Owner:	<u>Virgil & Joann Menden</u>	<u>14201 NW 56th ST</u>	
Tenant/Buyer:	<u>SHANE K. PAMELA A CUTLERS</u>	<u>RT 2 Box 32A RAYMOND NE 68428</u>	<u>783-2120</u>
Return to:	<u>SHANE K. CUTLERS</u>	<u>SAME ↑</u>	
Signature of Applicant	<u>[Signature]</u>	Address <u>SAME ↑</u>	Date <u>3/15/99</u>

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 03/15/99
Initials LS
Amount 150⁰⁰
Check No. 4267

DATA ENTRY

Date / /
Case No.
Initials

PRELIMINARY STATUS--By PAUL DROTZMAN DATE: 3/16/99

WATER SYSTEM: Approved ☐ Disapproved ☒
Construction ☐
Bacteria ☒ 0 /ml ☐ /ml
Nitrate ☒ 0.1 ppm ☐ ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☐
Disapproved ☒

Additional Site Visits
Date 5/4/99 by PD
Date 5/5/99 by PD
Date / / by

Comments: Well in pit. New well drilled. Abandon well in pit. Septic system never inspected by LLCHD. Never received final approval. Septic lateral added. Tank pump. New well approved.
See Attached Letter ☐

FINAL STATUS Not approved until corrections made - PD

WATER SYSTEM: Approved ☒ **SEWAGE DISPOSAL SYSTEM:** Approved ☒ Provisional Approval ☐
Approved by Paul Drotzmann Date 5/11/99

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.

Revised/Reprint: 10-9

P7617-66

Yellow - Environmental Health

P8340-19

Pink - Business Office

P6117-7

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: 474-1541



FILING FEE: \$ 60.00

FILE NO. _____

DATE: 9/4/80

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 North Range 5 East; Section 1;
Block _____: Lot _____: Addition _____
Street Address 79 Hwy + Mill Rd.
2. Property Use: Residential ☒; Commercial ☐ Other Use ☐
No. of Bedrooms 2. Describe _____
3. Type of Individual Sewage Disposal System: Septic Tank ☒; Other ☐
4. Distance to public sewer: 1 mile ft.

Vincent Munder
Signature of Applicant (Owner or Lessee)

Raymond, Nebr.
Address

*approved + inspected
by Village of Raymond*
(Do not write below this double line)

- | | | |
|---|---|--|
| 1. Health Department: | Date Rec'd. _____
Date Frwd. _____ | ACTION: Approved ☐ Disapproved ☒
Signature: <u>Errol C. Hood</u> |
| 2. Supt. Bldg. Insp.:
or Village Clerk | Date Rec'd. <u>9/4/80</u>
Date Frwd. <u>9/5/80</u> | ACTION: Approved ☐ Disapproved ☐
Signature: <u>Keith Jacobs</u> |
| 3. City or County
Engineer | Date Rec'd. _____
Date Frwd. _____ | ACTION: Approved ☐ Disapproved ☐
Signature: _____ |

REMARKS OR REASONS FOR DISAPPROVAL System is in flood plain and was put in without Health Department inspection.

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

