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

A

FILING FEE: $ 30.00

FILE NO. A 1402-C

DATE: Aug. 29th 1978

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. 7N ; Range 5E ; Section 31 ;
   Block _____ : Lot _____ : Addition E½OFS½OFSE¼
   Street Address R

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms _____. Describe _____

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

4. Distance to public sewer: — ft.

David T. Kusel
Signature of Applicant (Owner or Lessee)

RR2 Box 38 Wilber NB 68465
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/29/78. Date Frwd. 8/29/78. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hoot

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. [illegible]. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: _____

3. City or County Engineer: Date Rec'd. 8-29-78. Date Frwd. 8-29-78. ACTION: Approved ☒ Disapproved ☐ Signature: Henry Straff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 9-11-78 by: jw
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-11-78 By: James Weverka

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

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

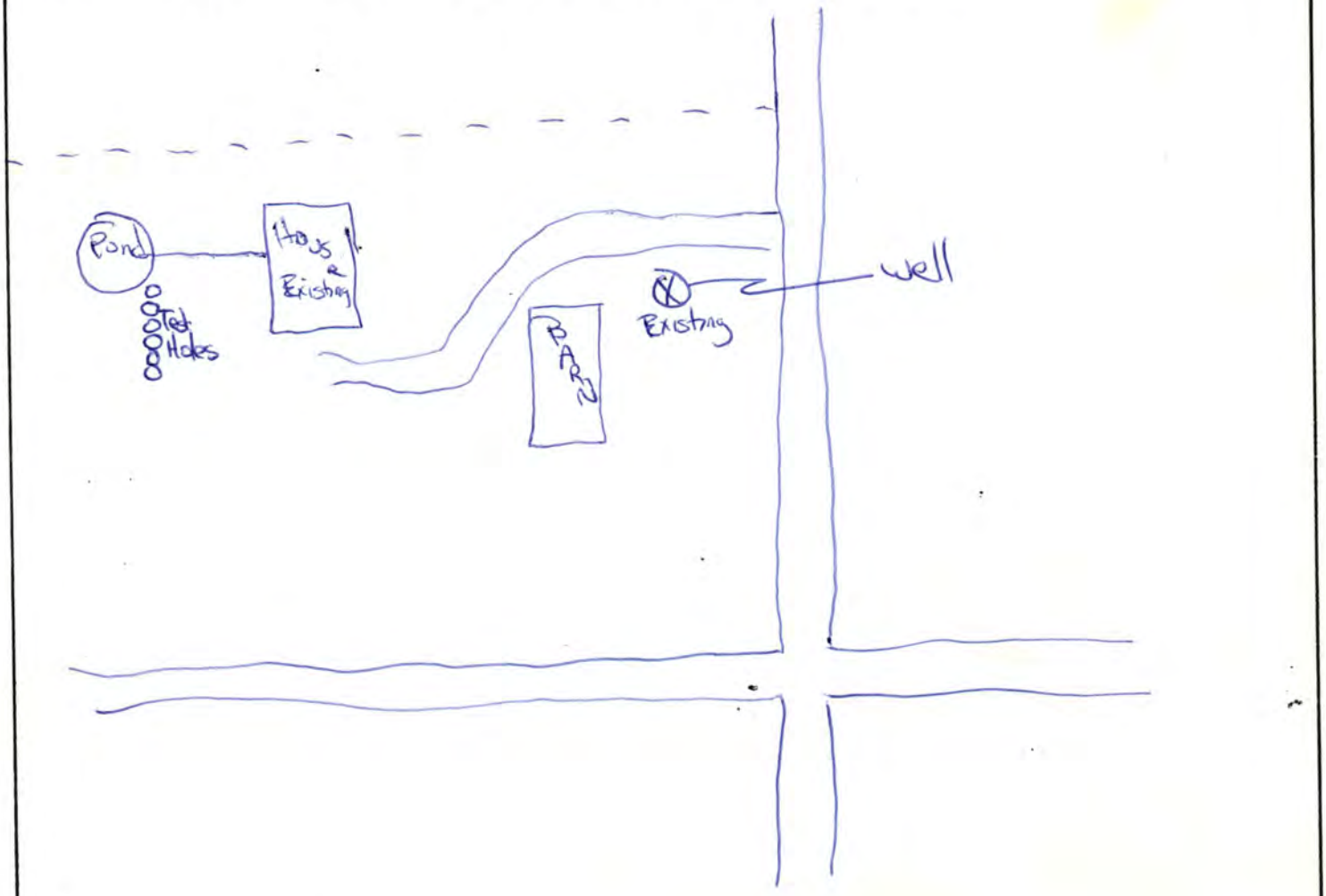
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

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



REVIEWING ACTION

Remarks: _____

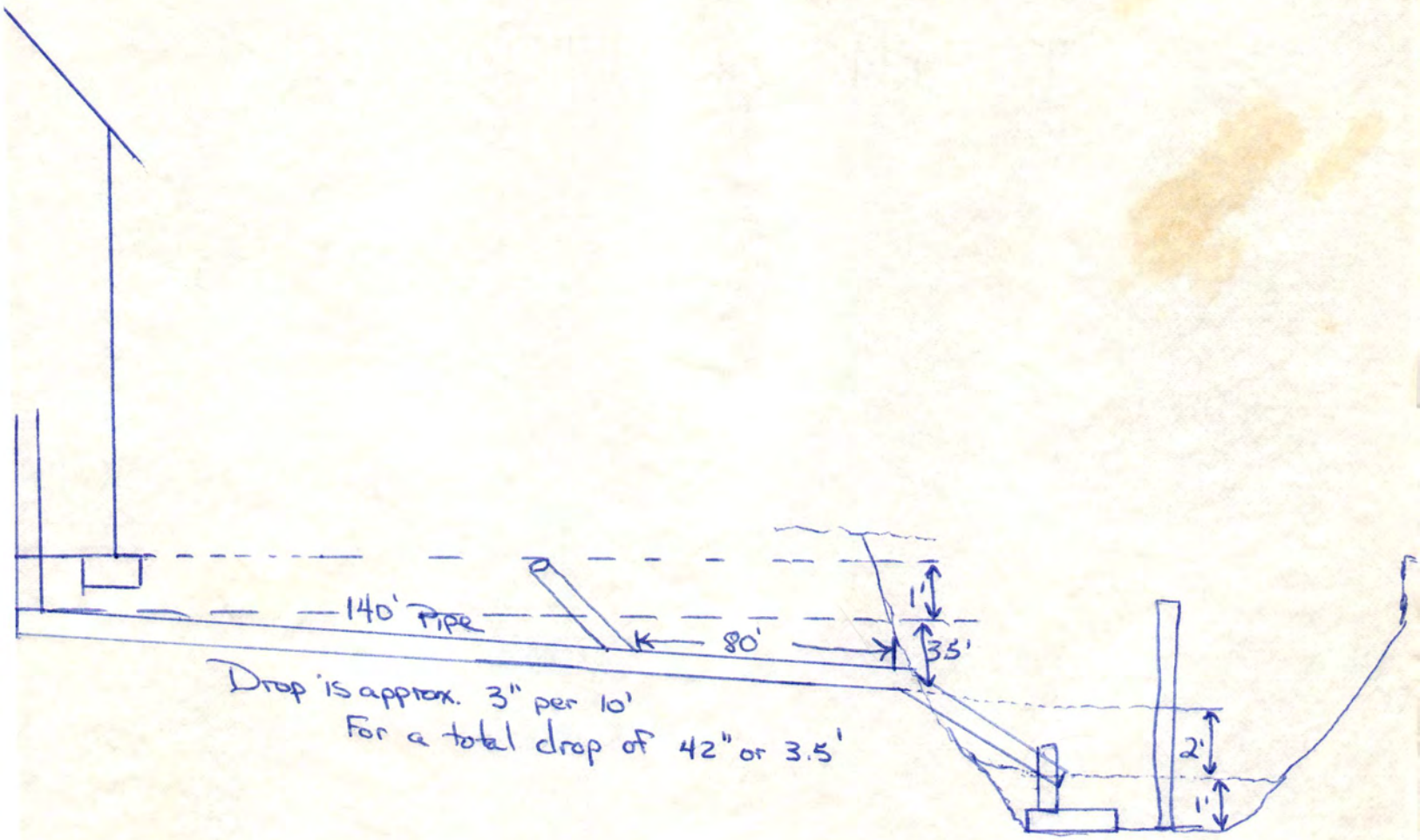
_____

Date: _____

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

_____
Signature of Reviewing Official

SEPTIC SYSTEM



Drop is approx. 3" per 10'
For a total drop of 42" or 3.5'

attn. Jerry 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 475-6221)

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PROPERTY WHERE SOIL TESTED:
Location: Township 7N. ; Range 5
Section & ¼ Sect. Sec 31 SE¼
Property Dimensions: ___ ft. x ___ ft.
Area: 40 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Dave Kuser
Address RR2 Bx 38 Wilber Nb

Dates of Tests: May 9 to May 10. Weather: Precip. 0 Temp. 78 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				
Hole 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	30	5/9	3.30	5/10	4.30	5/10	3.30	12"	4.30	12	60 min	0	
2	30	5/9	"	"	"	5/10	3.30	12"	4.30	12	"	0	
3	30	5/9	"			"	"	12"	4.30	13	"	1"	
4	30	5/9	"			"	"	12"	"	12	"	0	
5	30	5/9	"			"	"	12"	"	12	"	0	
6	30	5/9				"	"	12"	"	12	"	0	

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

Signature of Person Conducting Test

Address Wilber Nb
Phone: 821 2356

KENNETH KRESHEL
BUILDER AND CONTRACTOR
WILBER, NEBR.

(Do not write below this line)

REVIEWING ACTION

REMARKS: S.C.S. Wymore Silty Clay Loam

DATE: August 29, 1978

Approved Percolation Rate(s)
A. 320 min./inch
B. ___ min./inch
C. ___ min./inch

Gerald C. Hood
Signature of Reviewing Official

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

February 29, 1979 — THIS PERMIT EXPIRES

David T. Kuser — ISSUED TO

Rural Route 2, Box 38, Wilber, NE 68465 — ADDRESS

T7N, R5E, Section 31 E½ of S½ of SE¼

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

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

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 283[illegible]

20109-0977