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: $ 60.00

FILE NO. 1528-C

DATE: _____

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: SEE ATTACHED
   Twp. 7 north; Range 6E 6PM; Section 17;
   Block _____: Lot _____: Addition _____
   Street Address SW 29th St. between Olive Creek Rd. + W. Princeton Rd

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: N/A ft.

Roger A Koch
Signature of Applicant (Owner or Lessee)

RR (Box 111) Hallam, Ne
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/8/79. Date Frwd. 5/8/79. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5-8-79. Date Frwd. 5-8-79. ACTION: Approved ☒ Disapproved ☐ Signature: a Williamsen

3. City or County Engineer: Date Rec'd. 5-8-79. Date Frwd. 5-8-79. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7-13-79 by: jw
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2-4-82 By: Ron Mangum

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
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B

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PROPERTY WHERE SOIL TESTED:

Location: Township 7 north; Range 6E 6PM; Section & ¼ Section 17/NE
Property Dimensions: 557.32 ft. x 618 ft. Area: 7.91 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☒; Silty Clay Loam ☐; Sandy Loam ☐; Silt Loam ☐; Clay Loam ☐.
Dates of Tests: 27 Ap 79 to 28 Ap 79. Weather: Precip. trace Temp. 50°F.

OWNER: Roger A. Kosh
Address: RR (Box 111) Hallam, Ne

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	27 Ap	1300	28 Ap	1300	28 Ap	1335	20	1408	23	30	3	10
2	36	27 Ap	1300	28 Ap	1300	28 Ap	1339	20	1409	20 5/8	30	5/8	48
3	36	27 Ap	1300	28 Ap	1300	28 Ap	1340	20	1410	20 1/8	30	1/8	240
4	36	27 Ap	1300	28 Ap	1300	28 Ap	1343	16	1413	16	30	0	inf.
5	36	27 Ap	1300	28 Ap	1300	28 Ap	1342	16	1412	16	30	0	inf.
6	36	27 Ap	1300	28 Ap	1300	28 Ap	1341	20	1411	20 1/8	30	1/8	240

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

Roger A. Kosh
Signature of Person Conducting Test

Address RR (Box 111) Hallam, Ne Phone 787-2555 or 787-2775

(Do not write below this line)

REVIEWING ACTION

Remarks: Should disregard Hole #1 in average
Soil Type (SCS): Burchard Clay Loam or Shelby Clay Loam
Date: May 8, 1979

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

Jerrold C. Hood
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 ☒

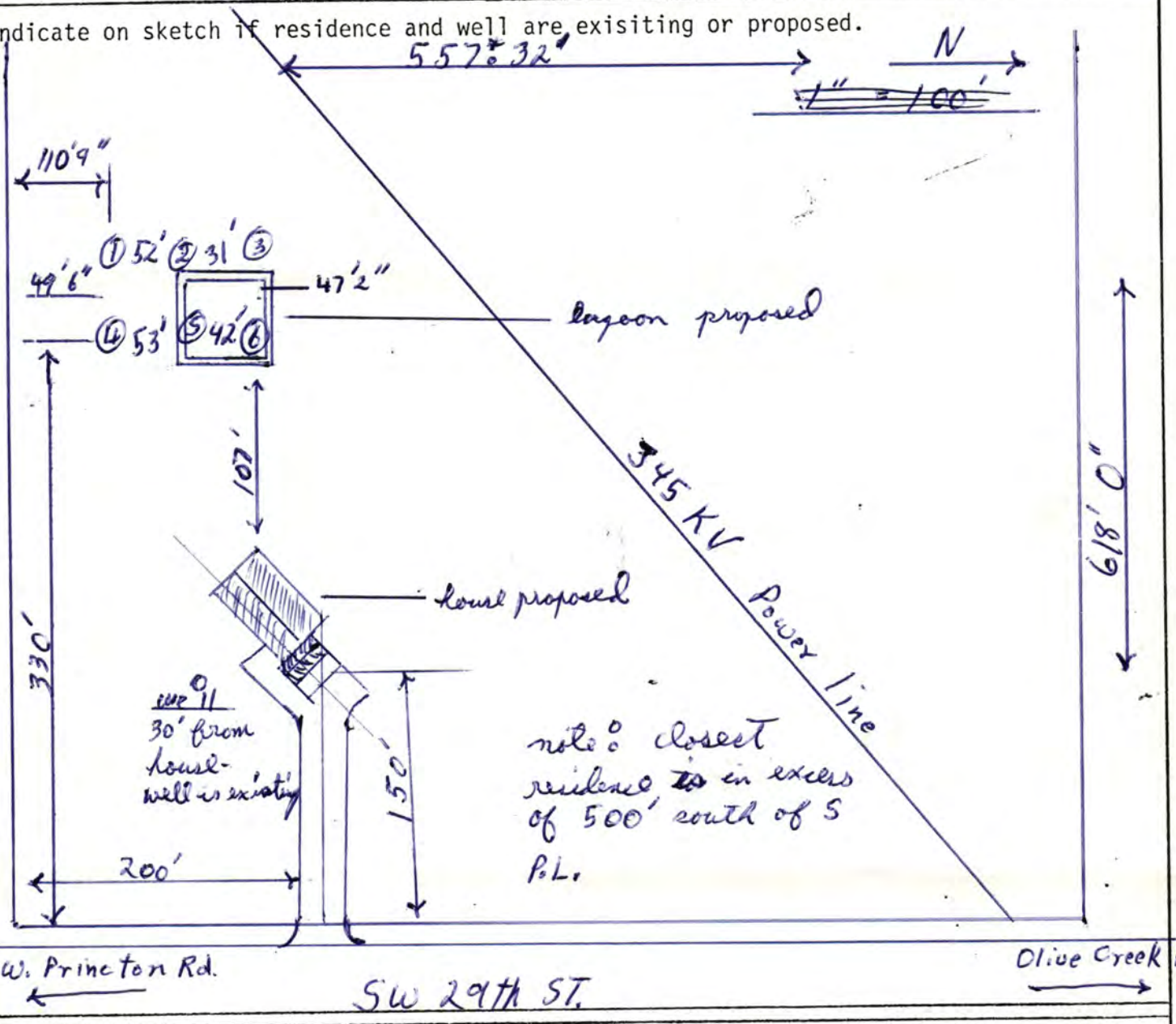
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

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.



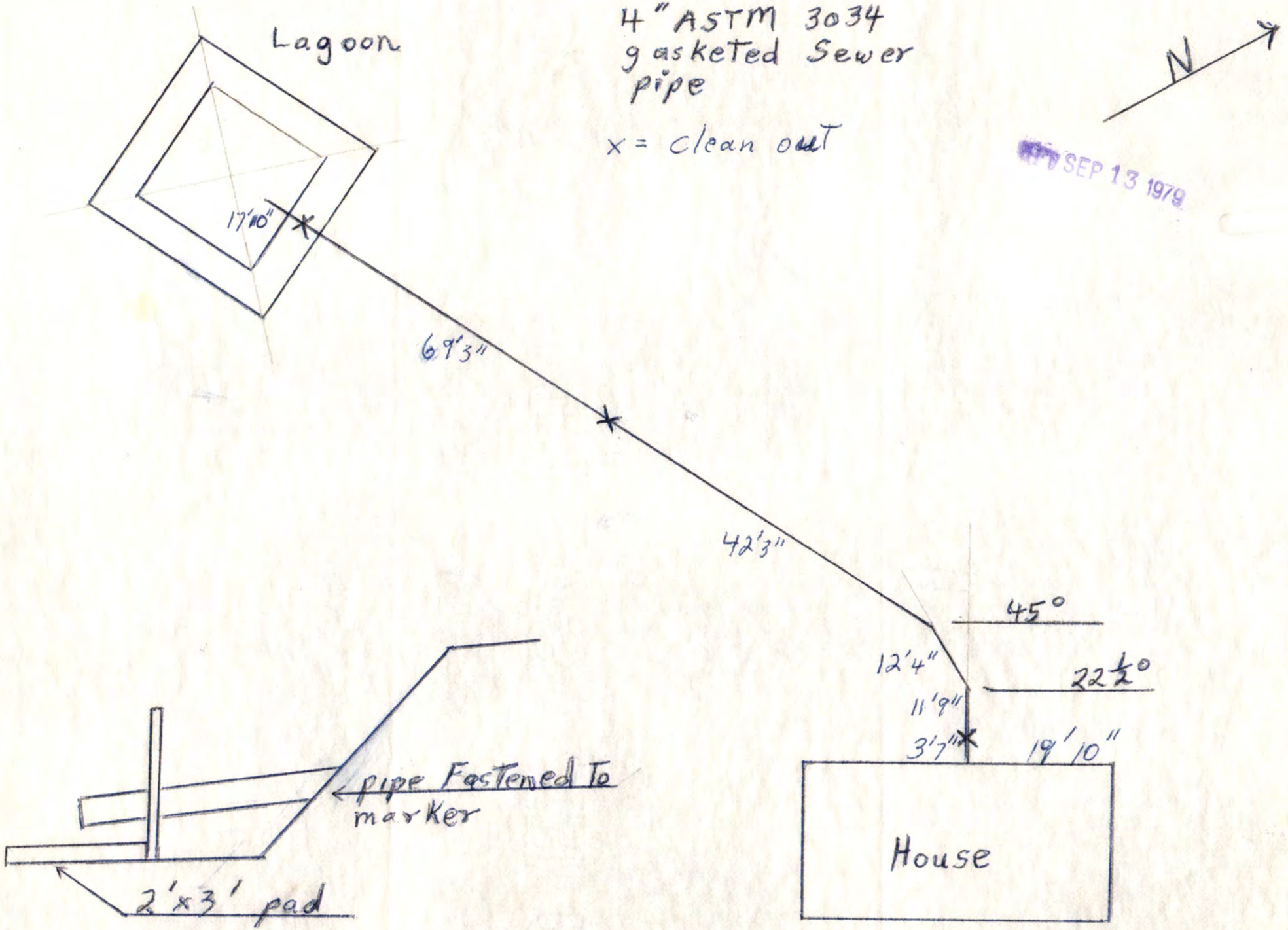
REVIEWING ACTION

Remarks: _____

Date: May 8, 1979

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.

Jerrold C. Hood
Signature of Reviewing Official



24111 SW 29th, Mr+Mrs. Roger Koch Permit #0632

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1528-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

November 8, 1979 — THIS PERMIT EXPIRES

Roger A. Koch — ISSUED TO

Box 111, Hallam, NE — ADDRESS

T7N, R6E, Section 17 — LEGAL DESCRIPTION

NON-TRANSFERABLE — REMARKS:

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 — DATE — 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