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

A

FILING FEE: $ 60.00

FILE NO. 2677-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: Twp. 7 North ; Range 6 East ; Section 16 ;
   Block _____ : Lot 7 : Addition _____
   Street Address _____

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. 787-7857

Thomas Nyhoff
Signature of Applicant (Owner or Lessee)

RT 1 Box 153C Martell
Address 68404

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/1/88. Date Frwd. 6/2/88. ACTION: Approved ☒ Disapproved ☐ Signature: Jerold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 6-2-88. Date Frwd. 6-2-88. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bourne

3. City or County Engineer: Date Rec'd. 6/2/88. Date Frwd. " . ACTION: Approved ☒ Disapproved ☐ Signature: Don Thomas

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10-12-88 by: ~~~ need drawing
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

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

FORM 23-43

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 6 East; Section & ¼ Section NW ¼ of the NW ¼ of 16.
Property Dimensions: 1306.16 ft. x 685 ft. Area: 20.54 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☒ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 5-29 to 5-30. Weather: Precip. 0 Temp. 80°.

OWNER:

Address:

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 5/29 End 5/30				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	5/29	2000	5/29	600	5/30	1:00	1ft 3¾in	1:30	1ft 6in	30	2¼in	
2	36	〃	〃	〃	〃	〃	1:01	1ft 7½in	1:31	1ft 8¼in	30	¾in	
3	36	〃	〃	〃	〃	〃	12:58	1ft 1¾in	1:28	2ft 1¾in	30	2in	
4	36	〃	〃	〃	〃	〃	1:03	1ft 5in	1:33	1ft 6½in	30	1½in	
5	36	〃	〃	〃	〃	〃	1:06	11¾in	1:36	1ft 2¾in	30	3in	
6	36	5/29	2000	5/29	600	〃	1:07	1ft 9¾in	1:37	1ft 10¾in	30	1in	

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

Thomas L. Nuhoff
Signature of Person Conducting Test

Address RT 1 Box 153 C Martell Phone 787-7857

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 17 min./inch
B. min./inch
C. min./inch

Remarks:
Soil Type (SCS): Morrill Clay Loam + Shelby Clay Loam
Date:

Gerald C. Hoos
Signature of Reviewing Official

2677-C

Start	1	2
1 9:58 - 1 ft 3 IN	10:28 1 ft 6½ IN	10:58 - 1 ft 7½ IN Dry Refill 10¾
2: 10:00 1 ft 3 IN	10:30 1 ft 4 7/8 IN	11:00 1 ft 6¾ "
3 9:57 1 FT 6 ¾ IN	10:27 1 ft 10 IN	10:57 2 ft ½ IN
4 10:02 1 ft 6"	10:32 1 ft 7¾ IN	1102 - 1 ft 9 IN
5. 10:04 11 ⅛ "	10:34 1 ft 3 IN	1104 - 1 FT 5½ IN Dry Refill 10½ IN
6 10:05 1 ft 3½	10:35 1 ft 5 IN	11:05 ~ 1 ft 6 IN

3	4	5
1 11:30 - 1 ft 2½ IN	12:00 1 FT 5 ½ IN	12:30 1 FT 8 ¾ IN Refill 1 FT ½
2 11:32 - 1 ft 8 ¼ Refill 1 ft ¾ IN	12:02 1 ft 2½	1231 1 FT 5 IN
3 11:27 - 2 ft 2 IN Refill 1 ft 5 IN	11:57 : 1 FT 8 IN	12:28 - 1 ft 9½ IN
4 11:33 - 1 ft 10 IN	12:03 - 1 ft 10 ¾ IN	12:33 1 f 11¾ IN
5 11:36 1 ft ¾ IN	12:06 1 ft 3½ IN	12:36 1 ft 5 ½ Refill 8½
6 11:37 1 ft 7 IN	12:07 1 ft 8¼ IN	1237 1 ft 8½

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

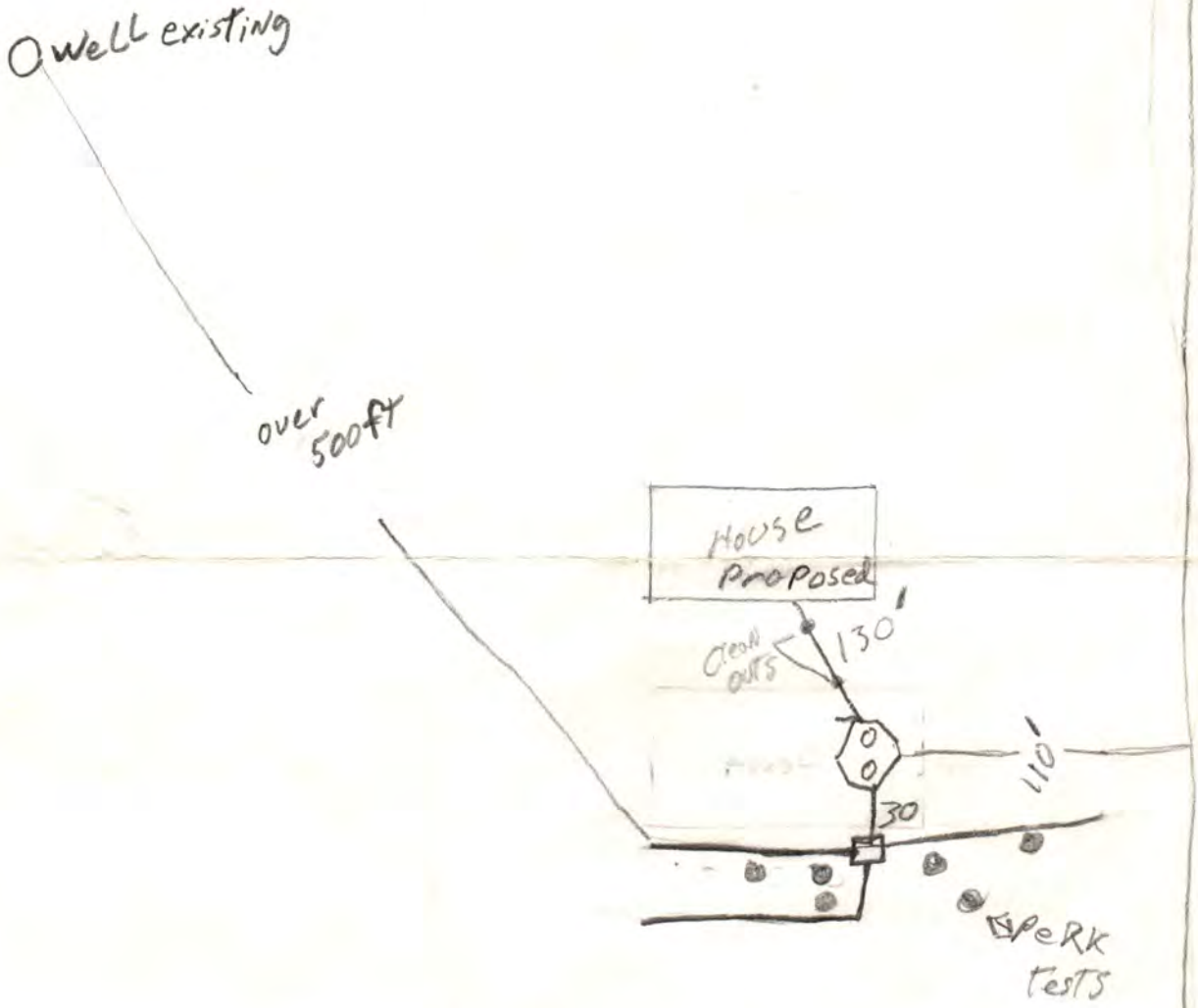
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

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

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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 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 595 sq.ft.

_____
Signature of Reviewing Official

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2677-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

DECEMBER 1, 1988 — THIS PERMIT EXPIRES

THOMAS NYHOFF — ISSUED TO

ROUTE #1, BOX 153-C — ADDRESS

MARTELL, NE 68404

T7N; R6E; Sec NW¼, NW¼ 16 — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION

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
MG	6-7-88	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

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

20109-0977

2677-C

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3 9:57 1 FT 6 ¾ IN	10:27 1 ft 10 IN	10:57 2 ft ½ IN
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5. 10:04 11 ⅛ "	10:34 1 ft 3 IN	11:04 - 1 FT 5½ IN Dry Refill 10½ IN
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3	4	5
1 11:30 - 1 ft 2½ IN	12:00 1 FT 5 ½ IN	12:30 1 FT 8 ¾ IN Refill 1 FT ½
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