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
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $ 150.00 10-4-96 #150 ck #5104 ldf

FILE NO. _____

DATE: 10-3-96

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 7E ; Section 13 ; Block 9 I.L. : Lot _____ : Addition _____
   Street Address 10601 OLIVE CREEK ROAD
2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2 . Describe _____
3. Type of Individual Sewage Disposal System: Septic Tank ☐ ; Other ☒ LAGOON
4. Distance to public sewer: _____ ft.

Christopher A Hawke
Signature of Applicant (Owner or Lessee)

10601 OLIVE CREEK Rd HICKMAN NE 68372
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/4/96 . Date Frwd. 10/4/96 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Head
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 10/8/96 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: _____
3. City or County Engineer : Date Rec'd. 10/8/96 . Date Frwd. 10/9/96 . ACTION: Approved ☒ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: _____ by: J.C.H.
Date: 10/8/96 by: J.C.H.
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/8/96 By: Jerrold C. Head

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

FORM 23-43

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

Lincoln-Lancaster County Health Dept.
3140 "N" Street
Lincoln, NE 68510

**D**

DATE: 10-3-96

FILE NO: _____

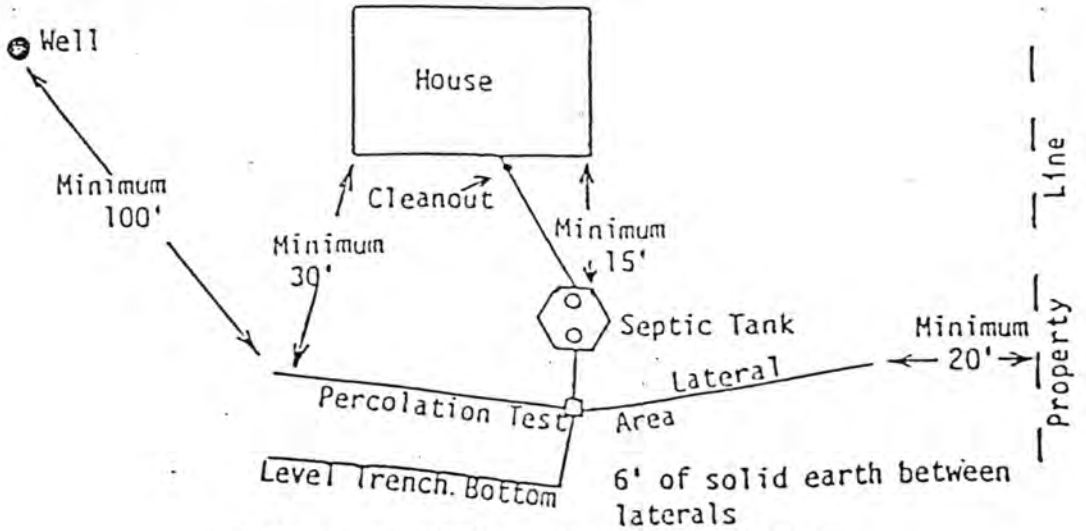
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC Sch 40; Diameter 4" in.
2. Distance above basement floor ____ in., or below basement floor 4 in.
3. Distance between dwelling and septic tank _____ ft.
4. Number of clean-outs 5.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

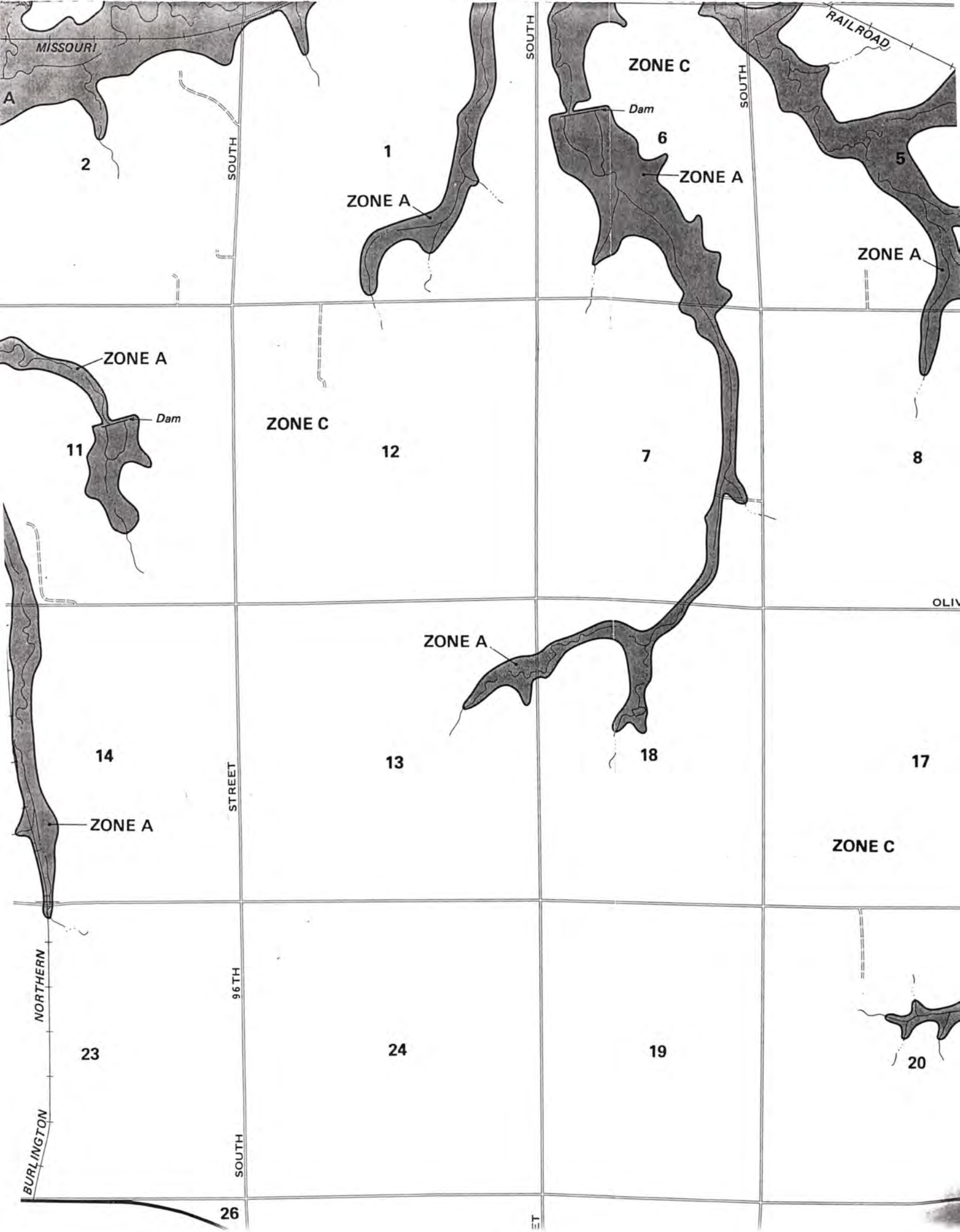
B. SEPTIC TANK:
1. Material _____; No. of compartments _____.
2. Capacity _____ gals.;
3. Factory Built: Yes ☐ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. 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 _____; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☐
(Company _____)
3. Distance from Septic Tank _____ ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☐
Diameter of Half Round _____ or Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line _____, _____, _____, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines ____ ft.
3. Trench dimensions: Width _____ ft.;
Slope _____ in/100 ft.; Average Depth _____ in.
4. Filter Material: _____.
Depth of Material _____ in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.




TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


MISSOURI
A
2
SOUTH
1
ZONE A
SOUTH
ZONE C
Dam
6
ZONE A
RAILROAD
5
ZONE A
ZONE A
Dam
11
ZONE C
12
7
8
OLIV
ZONE A
14
13
18
17
STREET
ZONE A
ZONE C
NORTHERN
96TH
23
24
19
20
BURLINGTON
SOUTH
26
ET

# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

ENVIRONMENTAL HEALTH DIVISION

NON TRANSFERABLE

## PERMIT

Permit

SEWAGE INSTALLATION
LAGOON

No. 96380149701

Issued 10/07/96
Expires 04/07/97
Revenue Code 18754

Establishment

CHRISTOPHER THORTON
T7N R7E SEC 13
LOT 9
10601 OLIVE CREEK ROAD

FEES: $150.00

TOTAL $150.00

Permittee

CHRISTOPHER THORTON
10601 OLIVE CREEK RD
HICKMAN NE 68372

Issued By M. Jane Ford
Health Director

2692

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

# WATER MICROBIOLOGY

STATE LAB NO 1420863

FOR LABORATORY USE ONLY

COMPLETE INFORMATION BELOW

DATE COLLECTED 10 (MO.) 3 (DAY) 96 (YEAR) 2:24 P.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION CHRIS THORTON

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NE SECT 13 TWNSHP 7 N RANGE 7 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
3140 "N" STREET
LINCOLN, NEBRASKA 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

TEST METHOD: ☒ MEMBRANE FILTER ☐ MPN

## COLIFORM PURITY TEST FOR DRINKING WATER

TOTAL COLIFORMS 0 PER 100 ML.

☒ THE WATER MEETS BACTERIOLOGICAL STANDARD

☐ WATER DOES NOT MEET BACTERIOLOGICAL STANDARD

☐ RESULTS MAY BE INVALID DUE TO EXCESSIVE AGE*

*SAMPLES RECEIVED BETWEEN 30-48 HRS. AFTER COLLECTION

SAMPLE NOT ANALYZED BECAUSE OF:

☐ EXCESSIVE AGE ☐ INSUFFICIENT AMOUNT

☐ DAMAGE ☐ IMPROPER CONTAINER

TEST METHOD NUMBER: NIPDWR 141.27

TEST(S) BY

FOR ACCOUNTING USE ONLY

LWB 91

REPORTED 96 OCT 4 PM 12 50

RECEIVED '96 OCT -3 P3:16

# WATER CHEMISTRY

STATE LAB NO. 159178

COMPLETE INFORMATION BELOW

DATE COLLECTED 10 (MO) 3 (DAY) 96 (YEAR) 2:24 P.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION CHRIS THORTON

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NE SECT 13 TWNSHP 7 N RANGE 7 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
3140 "N" STREET
LINCOLN, NEBRASKA 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

FOR LABORATORY USE ONLY

TEST METHOD: USEPA METHOD 353.2

## NITRATE ANALYSIS FOR DRINKING WATER

NITRATE — N less than 0.1 mg/l

NOT TESTED BECAUSE OF:
☐ INSUFFICIENT AMOUNT ☐ DAMAGE ☐ IMPROPER CONTAINER

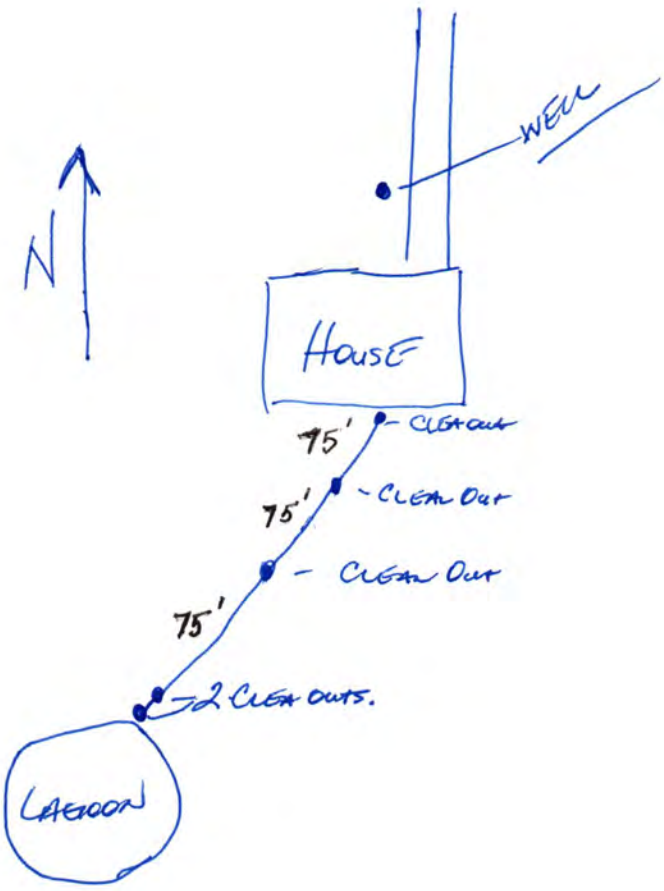
TEST(S) BY JW

FOR ACCOUNTING USE ONLY

LWN 88

RECEIVED '96 OCT -3 P3:15

REPORTED '96 OCT 4 PM 3 45


WELL
N
HOUSE
75'
- CLEAN OUT
75'
- CLEAN OUT
- CLEAN OUT
75'
- 2 CLEAN OUTS.
LAGOON