LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 813-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

November 10, 1976 — THIS PERMIT EXPIRES

Alvin Vandergrind — ISSUED TO

Firth, NE — ADDRESS

T7N: R7E: Sec. 29-SE¼: EXTEND — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$15.00	$	$	$15.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

ISSUING OFFICER

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 813-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 4-29

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. SD 7 ; Range 7 ; Section 29
   Block _____; Lot _____; Addition _____
   Street Address _____

2. Property Use: Residential _____ ☒ ; Commercial _____ ☐
   No. of Bedrooms 3 . Describe: _____
   Other Use _____ ☐
   Describe: _____

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

4. Distance to public sewer: None ft.

Alvin Vandergriend
Signature of Applicant (Owner or Lessee)

Faith Nebr.
Address

(Do not write below this double line)

REVIEWING ACTION

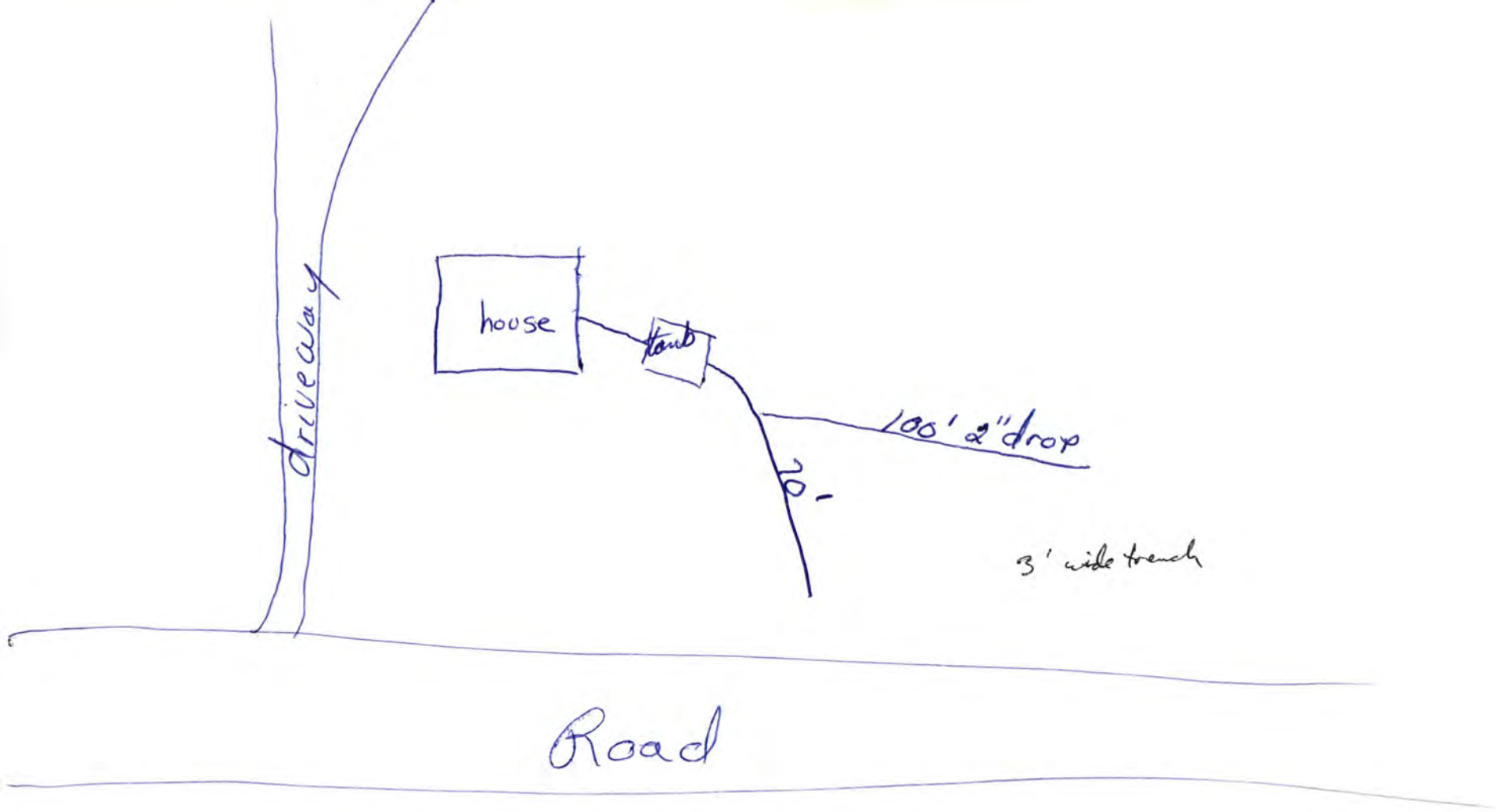
1. Health Department: Date Rec'd. _____. ACTION: Approved ☐ Disapproved ☐
   Date Frwd. _____. Signature: _____

2. Supt. Bldg. Insp.: Date Rec'd. _____. ACTION: Approved ☐ Disapproved ☐
   Date Frwd. _____. Signature: _____

3. City or County Engineer: Date Rec'd. _____. ACTION: Approved ☐ Disapproved ☐
   Date Frwd. _____. Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

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



7-22-76

Alvin Vandergund

Bouma Trenching

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 813-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: _____

The undersigned hereby applies for a permit to ALTER ☐, EXTEND ☐, or REPAIR ☐ an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: SP Twp. 7 ; Range 7 ; Section 29 S.E. 1/4 ;
Block _____; Lot _____; Addition _____
Street Address _____

2. Property Use: Residential _____ ☒; Commercial _____ ☐
No. Bedrooms 3
Describe _____
Other Use ☐
Describe _____

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

4. Description of proposed alteration, extension or repair: alteration of lateral from perforated pipe

5. Work to be done by: Owner ☐ ; or Contractor ☒, Terry Bouma
Contractor's Name

6. Estimated cost of project:

a. Materials	$ ~~1300~~	00
b. Labor	$	1265.00
c. Other	$	
TOTAL	$ [redacted]	1265.00

100 550 90 50 630

230 550 000 1150 1150.00 1265.00

alvin Vandergrind
Signature of Applicant (owner or lessee)

Firth, Nebraska
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: 5-12-76
Filing Fee: $ 15.00

2. Site Visits:
Date: 8-5-76 by: jw
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐
by: James Weverka

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-5-76 by: James Weverka

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)

FILE NO. 813-C

PROPERTY WHERE SOIL TESTED:
Location: Township 7 ; Range 7
Section & ¼ Sect. S.E. 1/4 of Sec. 9
Property Dimensions: ____ ft. x ____ ft.
Area: _____ acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☒; Clay Loam ☐; Sandy Clay ☐

Owner: Alvin Vandergrient
Address Firth Neb. 68358

Dates of Tests: 4-28 to 4-29. Weather: Precip. ____ Temp. ____ 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	36"	4-28	8:00	4-29	9:00	4-29	10:00	12	10:30	11	30 min	1	30/1
2								10		9 1/4	30 min	3/4	30/3/4
3								13		11		2	30/2
4								10		9 1/2		1/2	30/1/2
5								10		9		1	30/1
6	36'	4-28	8:10	4/29	9:45	4-29	10:10	11	10:40	9	30 min	2	30/2

Sum of Percolation Rates _____
Average of Rates: 1.2, 12
Mean of Rates: 30 min / 1.2, 12

Terry Bouma
Signature of Person Conducting Test

Address Terry Bouma Firth
Phone: 791-5760 - 791-5230

3 bedroom
230 Sq ft 3' wide

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

DATE: _____

Approved Percolation Rate(s)
A. 25 min./inch
B. _____ min./inch
C. _____ min./inch

James Wevelka
Signature of Reviewing Official

2/10 1/5

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. _____

SPECIFICATIONS

DATE: 8-25-76

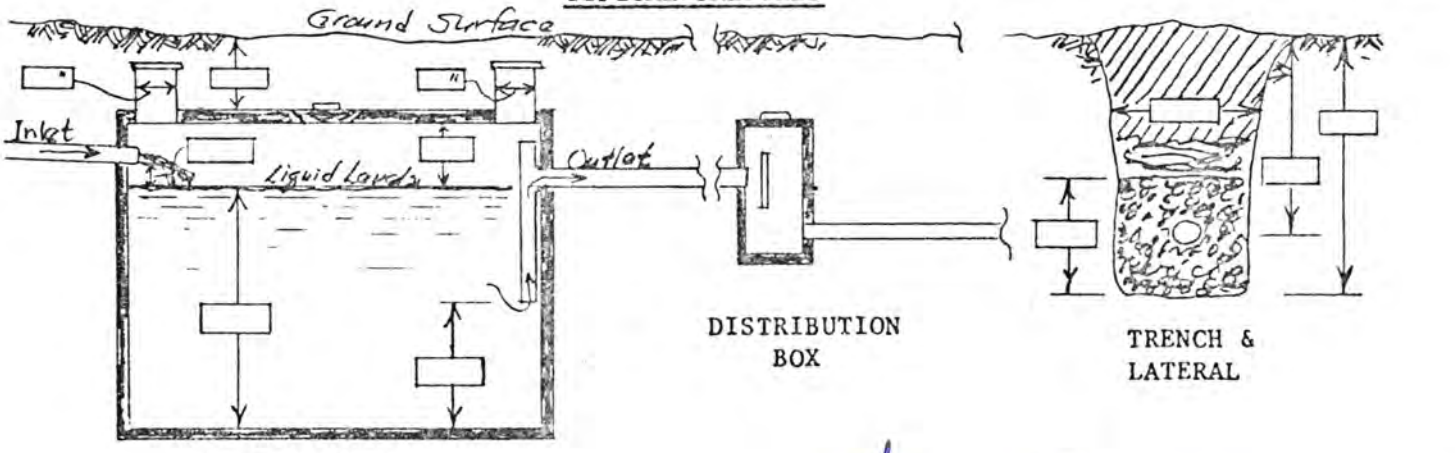
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity _____gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
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 _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Concret
2. Lateral Lines: Depth below grade 36 in. Number 1; Length of each line 100 ft Total length of Laterals 100 ft.; Slope 2 in/100 ft. Diameter of pipe ____ in.; Shape half moon Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____ Distance between lateral lines ____ft.
3. Trench Dimensions: Depth 36 in.; Width 36 in.
4. Filter Material: gravel. Depth of material from trench bottom 20 in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Terry Bouma
Signature of Applicant