LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1164-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

March 14, 1978 — THIS PERMIT EXPIRES

Frank Eskey — ISSUED TO

Holland, NE 68373 — ADDRESS

T7N, R7E, Section 22 E½ of NE¼

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. 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. 1164-C

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

DATE: 9-12-77

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. 7 N. ; Range 7 E 6 pm ; Section 22 N702.58' of E360' of N½ E½ of NE¼ 5.81 acres more or less
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.

Frank Esky
Signature of Applicant (Owner or Lessee)

Holland Nebr.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 9/14/77 . Date Frwd. 9/14/77 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 9-14-77 EP Date Frwd. ____ . ACTION: Approved ☐ Disapproved ☐ Signature: ____

3. City or County Engineer: Date Rec'd. 9/14/77 . Date Frwd. 9-14-77 . ACTION: Approved ☐ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL ____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT 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. 1164-C

DATE: 9-12-77

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

N 702.58' of E 360' of N ½ E ½ of NE ¼ 5.81 acres more or less

1. Legal description of property: Twp. 7N ; Range 7E 6PM ; Section 22 ; 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. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Frank Eskey
Signature of Applicant (owner or lessee)

Holland Nebr.
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;
Filing Fee: $ 30.00

2. Site Visits:
Date: 10-20-77 by: jw
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 9/14/77
by: Jerrold C. Hoob

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10-20-77 by: James Wevelsa

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. 1164-C

SPECIFICATIONS

DATE: _____

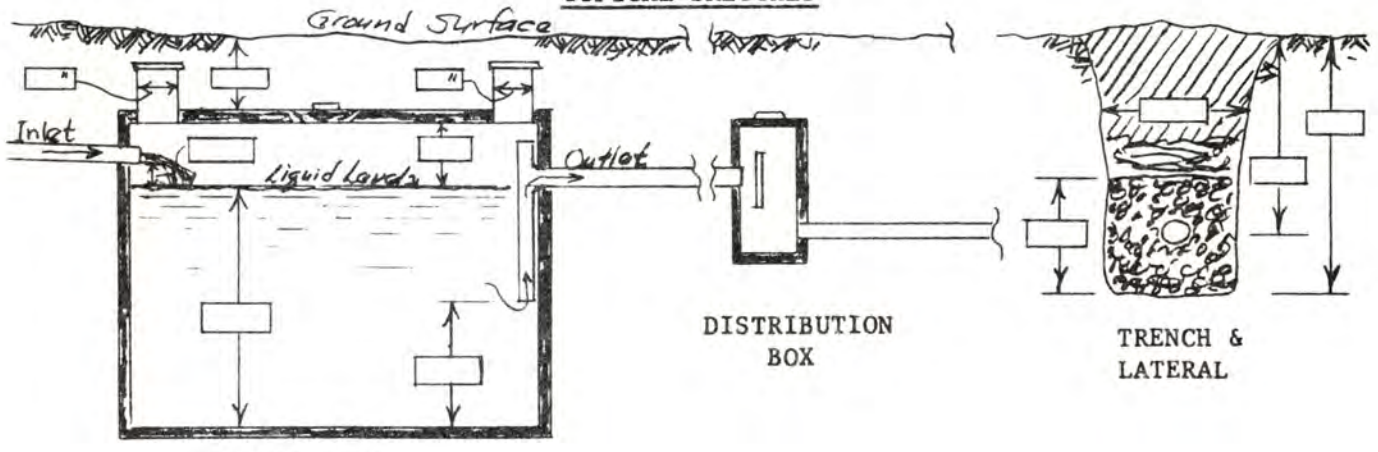
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 1000 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: _____
2. Lateral Lines: Depth below grade ___in. Number 2; Length of each line ___ft Total length of Laterals 169 ft.; Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: _____.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant

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. 1164-C

PROPERTY WHERE SOIL TESTED:

Owner: Frank Esbey

Location: Township 7N ; Range 7E of 6 pm
Section & ¼ Sect. 1702.58' S & 360' E of NW corner N½ E½ of NE¼ Sec 22 5.81 acres more or less

Address Holland Nebr.

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 ☐

Dates of Tests: 9-11 to 9-12. Weather: Precip. 2.5 inches Temp. 79°

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	9-12	10:00	9-13	1:00	9-13	1:10	6	1:40	4½	30	1½	30/1½
2	36	9-12	10:00	9-13	1:00	9-13	1:10	6	1:40	4	30	2	30/2
3	36	9-12	10:00	9-13	1:00	9-13	1:10	6	1:40	5¾	30	¾	30/¾
4	36	9-12	10:00	9-13	1:00	9-13	1:10	6	1:40	5¾	30	¾	30/¾
5	36	9-12	10:00	9-13	1:00	9-13	1:10	6	1:40	4½	30	1½	30/1½
6	36	9-12	10:00	9-13	1:00	9-13	1:10	6	1:40	5	30	1	30/1

Sum of Percolation Rates 7.5 inches
Average of Rates: 1¼ inches
Mean of Rates: 30 min./1¼ inches

Terry Bauma
Signature of Person Conducting Test

Address Firth Nebr.
Phone: 791-5730 - 791-5760

(Do not write below this line)

REVIEWING ACTION

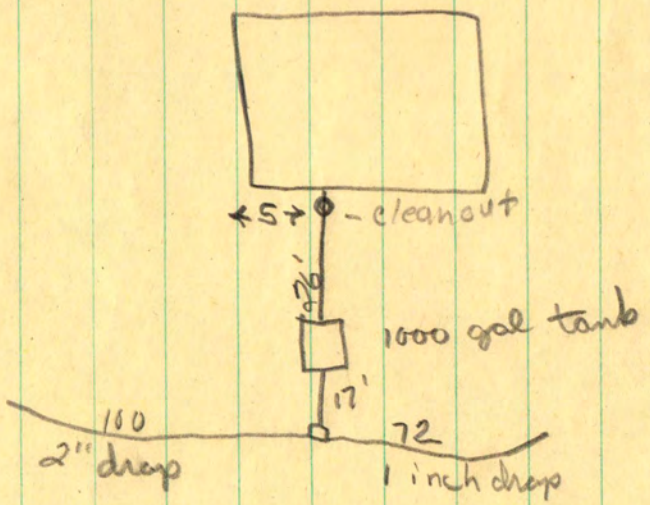
REMARKS: Kennebec Silty Loam. S.C.S.

Approved Percolation Rate(s)
A. 24 min./inch
B. ____ min./inch
C. ____ min./inch

DATE: September 14, 1977

Gerald C. Hoab
Signature of Reviewing Official

well ⊙ excess of 100 ft

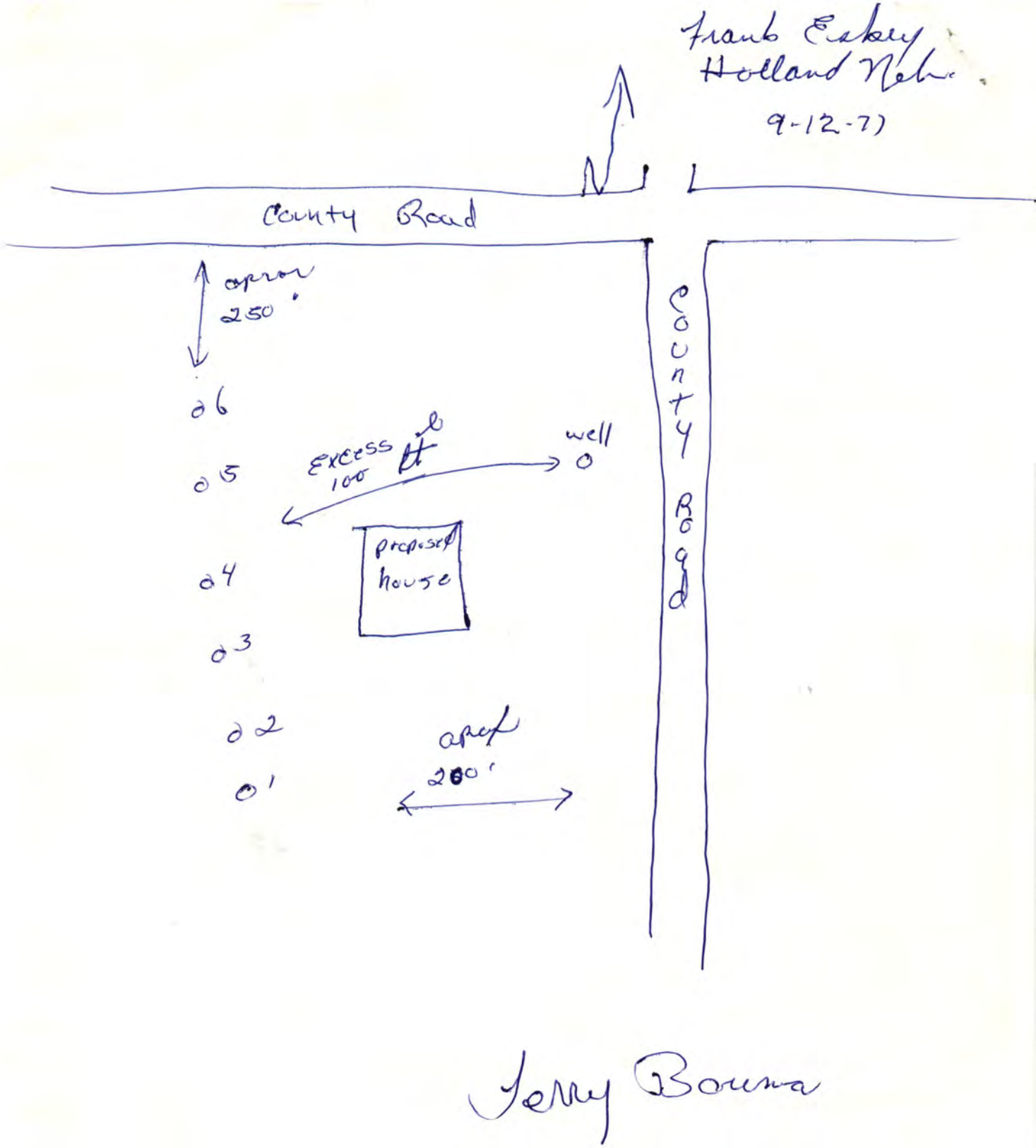


Concrete half moons

4' wide

Tank 12" below ground level

Frank Eskey
Bonna Trenching
791-5780 - 791-5230
Jerry Bonna


Frank Eskey
Holland Nebr.
9-12-71
N
County Road
approx
250'
County Road
06
05
excess fill
100
well
04
proposed
house
03
02
01
apron
200'

Jerry Bouma