LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 983-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

April 7, 1977 — THIS PERMIT EXPIRES

Loyal Doeschat — ISSUED TO

R.F.D., Hickman, NE 68372 — ADDRESS

T7N; R8E; Sec. 16 W½ of NW¼ — 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. 933-C

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

DATE: 10-5-76

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 8 E ; Section 16 W½ of NW¼
   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 ☒ Lagone

4. Distance to public sewer: None ft.

Loyal Doeschat
Signature of Applicant (Owner or Lessee)

R.F.D. Hickman
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/7/76 . Date Frwd. 10/7/76 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 10-8-76 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: Tom Baasch

3. City or County Engineer: Date Rec'd. 10/7/76 . Date Frwd. 10/7/76 . ACTION: Approved ☒ Disapproved ☐ Signature: Marvin L. Krueger

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._____

DATE: 10-5-76

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.

1. Legal description of property: Twp. 7 N ; Range 8 E ; Section 16 W½ NW¼ ; 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 ☒ Lagone

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).

Loyal Doeschot
Signature of Applicant (owner or lessee)

R.F.D Firth Nebr.
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 10-19-76 by: _____
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐ 10/7/76
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10-19-76 by: Ron Maynard

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. _____

PROPERTY WHERE SOIL TESTED:
Location: Township 7 ; Range 8
Section & ¼ Sect. 16 W½ of NW¼
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: Loyal Doeshot
Address RFD - Hickman

Dates of Tests: 9-22- to 9-23. Weather: Precip. ____ Temp. ____

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
Hole No.	Hole Depth (in.)	Pre-Saturation Period Start Date (Mo. Day)	Pre-Saturation Period Start Time (Hr. Min.)	Pre-Saturation Period End Date (Mo. Day)	Pre-Saturation Period End Time (Hr. Min.)	Percolation Readings Start Date (Mo. Day)	Percolation Readings Start Time (Hr. Min.)	Percolation Readings Start Water Level (in.)	Percolation Readings End Time (Hr. Min.)	Percolation Readings End Water Level (in.)	Results Elapsed Time (Min.)	Results Water Level Drop (in.)	Results Percolation Rates (Min./inch)
			Am		PM								
1	60"	9-22	8:00	9-23	1:00	9-23	1:10	30	2:10	29¾	60 min	¼	¼" / 60 min
2	60"	9-22	8:00	9-23	1:00	9-23	1:10	30	2:11	29½	60 min	½	½" / 60 min

Sum of Percolation Rates ¾"
Average of Rates: .375
Mean of Rates: .38 in / 60 min

Terry Bouma
Signature of Person Conducting Test

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

(Do not write below this line)

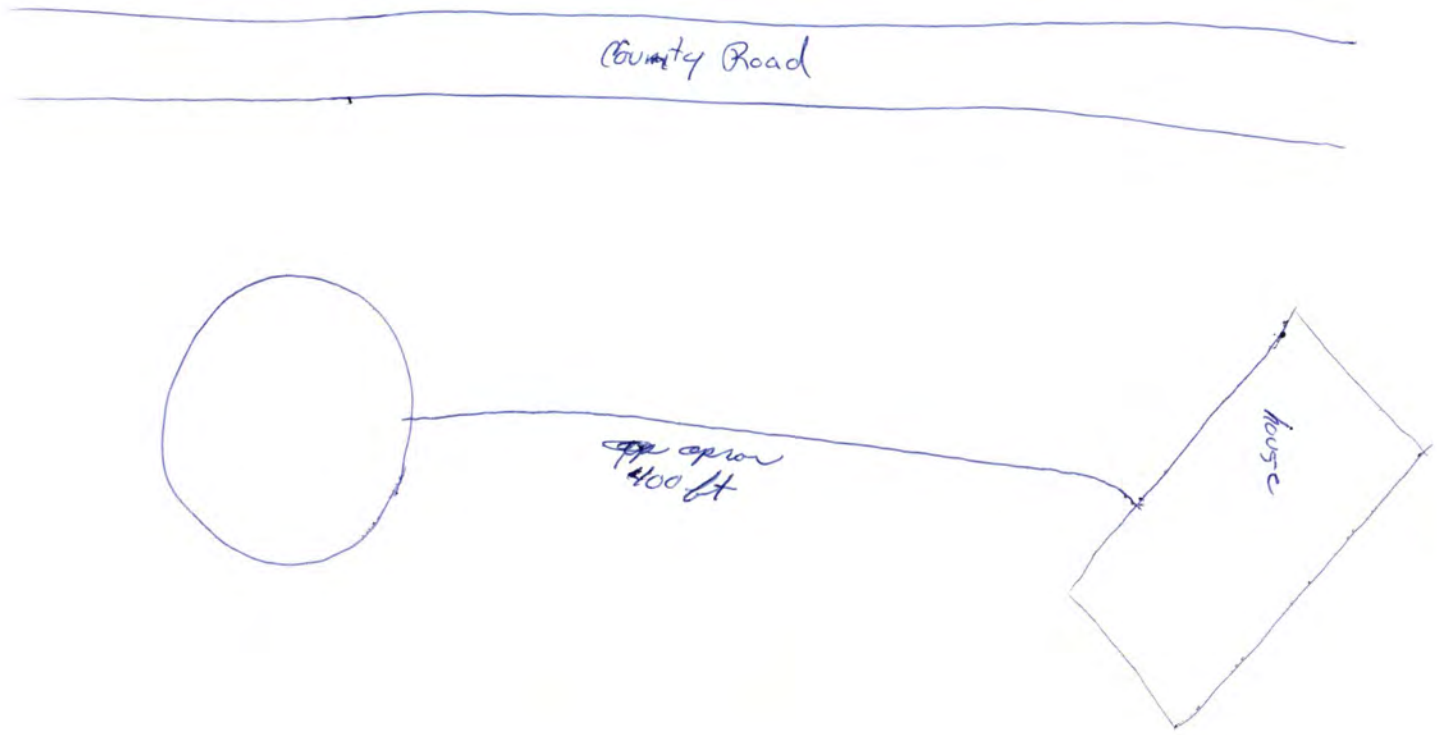
REVIEWING ACTION

REMARKS: _____

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

DATE: October 7, 1976

Ronald Magnuson
Signature of Reviewing Official


County Road
apron
400 ft
House
N

N

Loyal Douschot
10-18-76
Bouma Trenching

T7N, R8E, Sec 16

