LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 669-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF PERMIT

February 11, 1976
THIS PERMIT EXPIRES

Mr. Johnny Lape
ISSUED TO

8230 South
ADDRESS

T8N; R5E; Sec. 36; NE¼ of NE¼
LEGAL DESCRIPTION

REMARKS:

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

ISSUING OFFICER

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

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. 669-C

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

DATE: 8-11-75

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. 8N ; Range 5E ; Section 36 NE¼ OF NE¼
   Block _____; Lot _____; Addition _____
   Street Address _____

2. Property Use: Residential _____ [X] ; Commercial _____ [ ]
   No. of Bedrooms 3 small Describe: _____
   Other Use Cabin [ ]
   Describe: 31 X 34 weekend use

3. Type of Individual Sewage Disposal System: Septic Tank [X] ; Other [ ]

4. Distance to public sewer: _____ ft.

John J. Lape
Signature of Applicant (Owner or Lessee)

8230 South St.
Lincoln Neb.
Address

489 9977

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/11/75. Date Frwd. 8/11/75. ACTION: Approved [X] Disapproved [ ] Signature: Jerrold E. Hood
2. Supt. Bldg. Insp.: Date Rec'd 8-14-75 EO Date Frwd. _____. ACTION: Approved [ ] Disapproved [ ] Signature: _____
3. City or County Engineer: Date Rec'd. 8/12/75. Date Frwd. 8/14/75. ACTION: Approved [X] Disapproved [ ] Signature: Glenn L. Wiltgen

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. 669-C

DATE: 8-11-75

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. 8N ; Range 5E ; Section 36 NE¼ OF NE¼ ; Block ; Lot ; Addition .
Street Address .

2. Property Use: Residential ☒; Commercial ☐
No. of Bedrooms 3 small
Describe:
Other Use Cabin
Describe: small 3 bedroom 31x34 weekend use

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).

John D Lape
Signature of Applicant (owner or lessee)

8230 South St
Address
Lincoln Nebr. 68520

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: by:
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 8/11/75
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: by:

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. 669-C

PROPERTY WHERE SOIL TESTED:
Location: Township 8 ; Range 5
Section & ¼ Sect. NE 74 sec. 36
Property Dimensions: ___ ft. x ___ ft.
Area: 40 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: John J. Laye
Address 8230 So. St Lincoln, Neb.

Dates of Tests: aug 9 75 to aug 10 75. Weather: Precip. I Temp. 90° 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"	8/9	2 PM	8/10	2 PM	8/10	2 PM	12"	4 PM	9 3/4	30"	1/2	
2										8 1/2		1 1/2	
3										9 1/4		1/2	
4										9		1	
5										9 1/2		3/4	
6										9 3/4		1/2	

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

Robert D Johnson
Signature of Person Conducting Test

Address 2618 no 3rd
Phone: 432 3595

(Do not write below this line)

REVIEWING ACTION

REMARKS:

Approved Percolation Rate(s)
A. 48 min./inch
B. ___ min./inch
C. ___ min./inch

DATE: August 11, 1975

Jerrold C. Hood
Signature of Reviewing Official

North

