LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1218-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

MAY 8, 1978 — THIS PERMIT EXPIRES

Loren Schwaninger — ISSUED TO

Hallam, NE — ADDRESS

T8N, R6E, Section 18 N½ SE¼ — 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

20109-0977

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. 1218-C

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

DATE: 10-14-77

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. 8N; Range 6E; Section 18
   Block _____; Lot _____; Addition _____
   Street Address _____ N½ of SE¼

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

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

4. Distance to public sewer: Rural ft.

Loren Schwaninger
by Edward Douglass
Signature of Applicant (Owner or Lessee)

Hallam, Nebr.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 11/8/77. Date Frwd. 11/9/77. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____. Date Frwd. 11-9-77. ACTION: Approved ☐ Disapproved ☐ Signature: Gary M. Sherwood

3. City or County Engineer: Date Rec'd. 11-9-77. Date Frwd. 11-9-77. 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- 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. 1218-C

PROPERTY WHERE SOIL TESTED:
Location: Township _____; Range _____
Section & ¼ Sect. _____
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: Loren Schwaninger
Address Hallam, Ne.

Dates of Tests: 10-13-77 to 10-14-77. Weather: Precip. Clear Temp. 60°

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	40"	10-13-77	3:30 PM	10-14-77	11:10 AM	10-14-77	11:10 AM	14 7/8	30	16 1/4	30	1 3/8	
2								12 3/16		13 1/4		1 1/16	
3								9 1/8		11 1/4		2 1/8	
4								11 1/2		12		1/2	
5								9 1/8		9 5/8		1/2	
6								8 5/8		9 7/8		1 1/4	
7								9		10		1	
8								4 1/8		4 3/4		3/8	

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

Ed Douglass
Signature of Person Conducting Test

Address Cortland, Ne. 6833
Phone: 798-7680 798-7329 H.P.

(Do not write below this line)

REVIEWING ACTION

REMARKS: Map indicates possibility of either Wymore Silty Clay Loam or Pawnee Clay Loam. Some drainageway in area.

DATE: November 4, 1977

Approved Percolation Rate(s)
A. 30 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

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. 1218-C

SPECIFICATIONS

DATE: 10-14-77

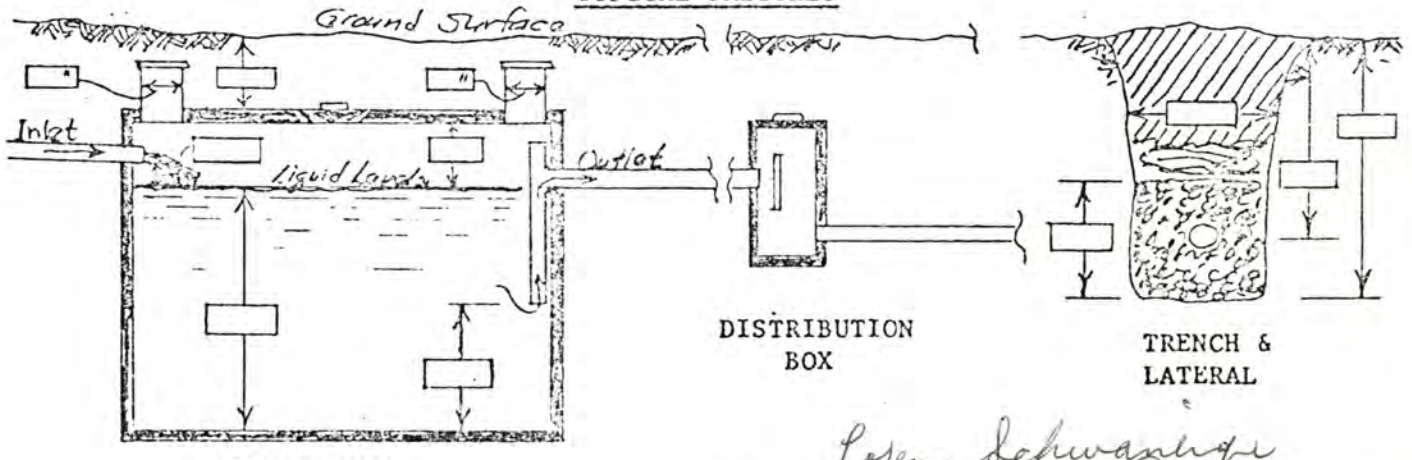
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank 80 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 130 ft.;
Stream — ft.; Pressure Line 100 ft.;
Property Line 100 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Cement; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☒ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade _____in.
5. Inlet: Baffle ☒; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 18" in.
8. Distances To:
Well or Suction Line 130 ft.;
Stream — ft.; Pressure Line 100 ft.;
Property Line 100 ft.

C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes ☒, (Company Precast Step) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank 5 ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half moon Cement.
2. Lateral Lines: Depth below grade ___in. Number ____; Length of each line ___ft Total length of Laterals 125 ft.; Slope 4 in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth 36 in.; Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 20 in.
5. Distances To:
Well or Suction Line 130 ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Loren Schwanhope
by Edward Douglass
Signature of Applicant

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)

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FILE NO. 1218-C

DATE: 10-14-77

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.

1. Legal description of property: Twp. N½ of SE ¼ of ~~10~~ 8N; Range 6E; Section 18 ; 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).

Signature of Applicant (owner or lessee)

Address

(Do not write below double line)

REVIEWING ACTION

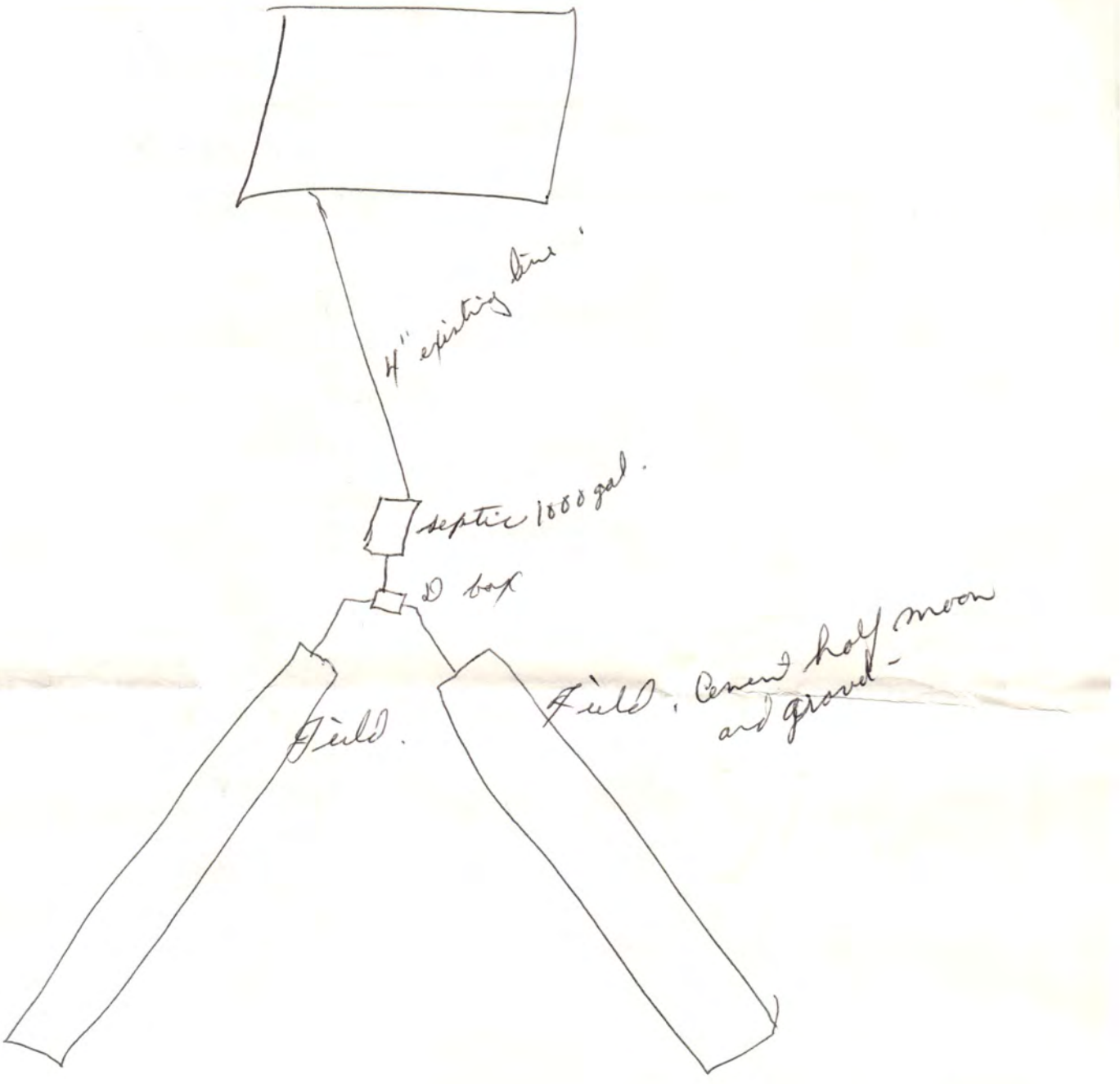
1. Date Rec'd;
   Filing Fee: $30.00

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

3. Date: Approved ☒; Disapproved ☐ 11/8/77
   by: Jerrold C. Hoop

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: by:

O Well


4" existing line
septic 1000 gal.
D box
Field.
Field. Cement half moon and gravel -