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. 499C

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

DATE: 8-2-74

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 7E ; Section NE 1/4 Sec 4
   Block ____ ; Lot X 1 ; 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: ____ ft.

Mrs M. R. Griffin
Signature of Applicant (Owner or Lessee)

6127 Huntington, Lincoln 68507
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8-2-74 . ACTION: Approved ___ ☒ Disapproved ☐
   Date Frwd. 8-2-74 . Signature: James A Wedeking

2. Supt. Bldg. Insp.: Date Rec'd. 8-7-74 . ACTION: Approved ___ ☐ Disapproved ☐
   Date Frwd. 8-7-74 . Signature: W W

3. City or County Engineer : Date Rec'd. ____ . ACTION: Approved ___ ☑ Disapproved ☐
   Date Frwd. 8-7-74 . Signature: Walter Hoppe

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. 499-C

PROPERTY WHERE SOIL TESTED:
Location: Township 8N ; Range 7E
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: Mickey R Griffin
Address _____

Dates of Tests: 7-30-74 to 7-31-74. Weather: Precip. 0 Temp. 85 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	30"	7-30	2:30	7-30	6:30	7-31	11:30	24"	12:30	21 7/8"	30	2 1/8	
2	30"	7-30	2:30	7-30	6:30	7-31	11:30	24"	12:30	22 1/4"	30	1 3/4	
3	30"	7-30	2:30	7-30	6:30	7-31	11:30	24"	12:30	22"	30	2	
4	30"	7-30	2:30	7-30	6:30	7-31	11:30	24"	12:30	21 3/4	30	2 1/4	
5	30"	7-30	2:30	7-30	6:30	7-31	11:30	24"	12:30	21 7/8	30	2 1/8	
6	30"	7-30	2:30	7-30	6:30	7-31	11:30	24"	12:30	21 3/4	30	2 1/4	

Sum of Percolation Rates
Average of Rates:
Mean of Rates: 2.083/30

Signature of Person Conducting Test

Address _____
Phone: _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 15 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: 8-1-74

James Weverka
Signature of Reviewing Official

M 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. 499-C

SPECIFICATIONS

DATE: 4-

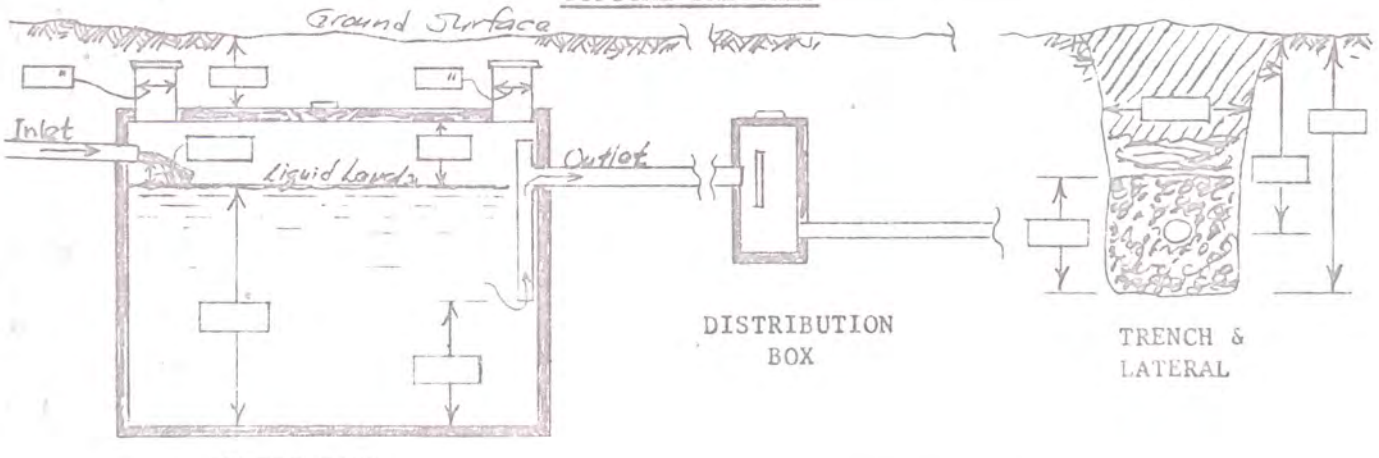
A. BUILDING SEWER:
1. Material Concrete; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank 8 ft.
4. Number of clean-outs 0.
5. Distances To: Rural Water Well or Suction Line ____ft.; Stream 60 ft.; Pressure Line 70 ft.; Property Line 8 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☒ (Company Precast) 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 18 in.
8. Distances To: Rural Water Well or Suction Line ____ft.; Stream 100 ft.; Pressure Line 30 ft.; Property Line 40 ft.

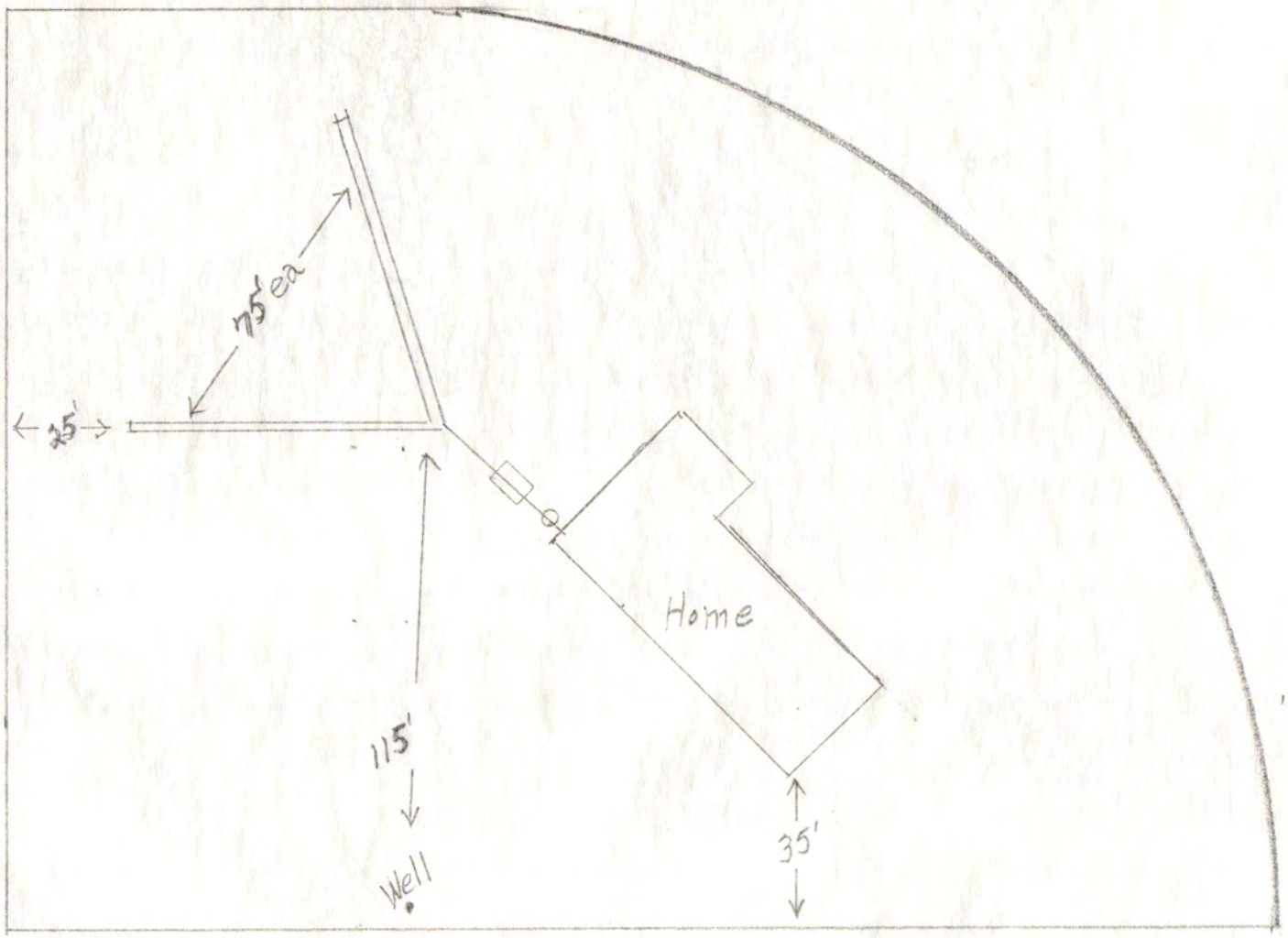
C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 2.
2. Factory Built: Yes ☒, (Company Precast) No ☐
3. Dimension: Length ____in.; Width ____in. Depth ____in.
4. Distance from Septic Tank 3' ft.
5. Serial Distribution: Yes ☒, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: half moon
2. Lateral Lines: Depth below grade ____in. Number 2; Length of each line ____ft Total length of Laterals 143 ft.; Slope ____in/100 ft. Diameter of pipe ____ in.; Shape ____ Material: concrete ☒; fiber asbestos ☐; clay ☐; other ____ Distance between lateral lines 10 ft.
3. Trench Dimension Depth ____in.; Width 48 in.
4. Filter Material: gravel. 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



Sewer Layout
For: Mr & Mrs Mickey Griffin
by: Riensches' Inc. / Burr. NE
Scale ¼" to 10'

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. 499-C

DATE: 4-22-74

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 7E ; Section NE¼ Sec 4 ; Block ; Lot #1 ; 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).

James C Rueschy - contractor
Signature of Applicant (owner or lessee)

Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; 8-1-74
Filing Fee: $ 30.00

2. Site Visits:
Date: 6-24-75 by: jw drm
Date: 6-25-75 by: jw
Date: by:

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-25-75 by: James Wierzba

INTER-DEPARTMENT COMMUNICATION

TO Charles Seale

DEPARTMENT Building Inspections

ATTENTION

CARBONS TO

DATE **August 5, 1974**

FROM Jerrold C. Hood

DEPARTMENT Health

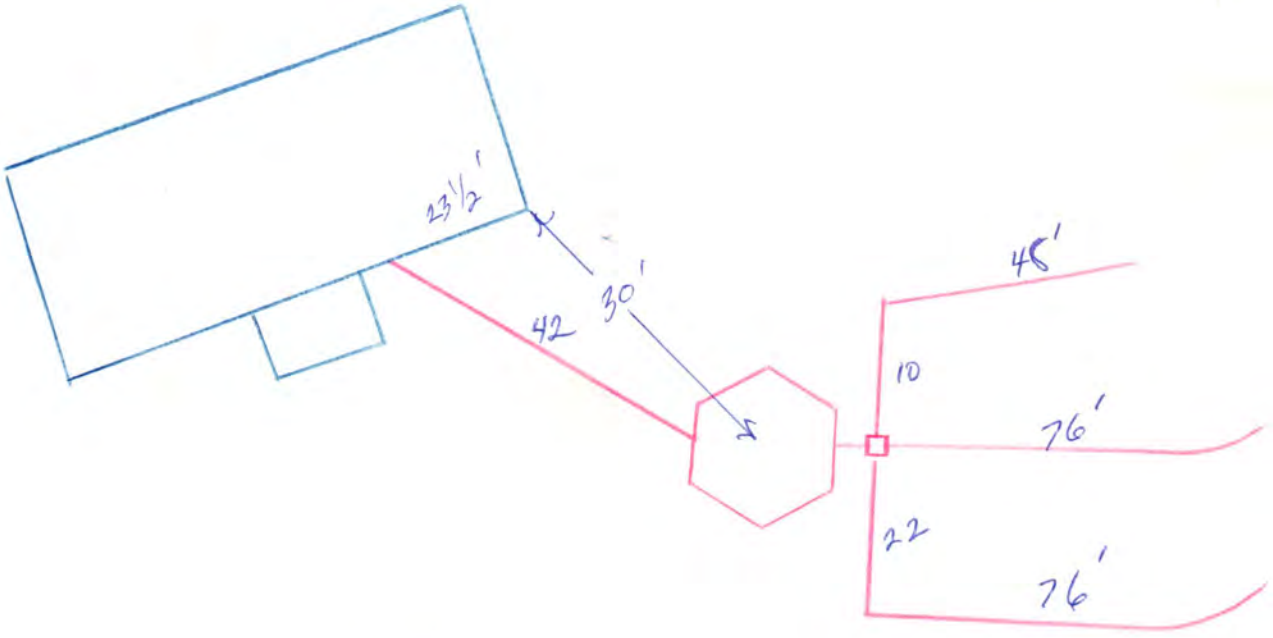
SUBJECT Individual Sewage System Construction
File No. **499-C**
M. R. Griffin
6127 Huntington

The Application and plans have been reviewed and approved for the construction of an individual sewage disposal system on property legally described as:

T8N; R7E; NE 1/4 of Sec. 4; Lot 1

Jerrold C. Hood, R. S., Supervisor
County Sanitation Section
Division of Environmental Health

JCH: **sjf**



H - 2' deep

4' wide

Concrete half moons

Lateral laid level

N

JW

system not placed in area where percolation test was run

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. 499C

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

DATE: 8-2-74

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 7E ; Section NE 1/4 Sec 4
   Block ____ ; Lot X 1 ; 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: ____ ft.

Mrs M. R. Griffin
Signature of Applicant (Owner or Lessee)

6127 Huntington, Lincoln 68507
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8-2-74 . ACTION: Approved ___ ☒ Disapproved ☐
   Date Frwd. 8-2-74 . Signature: James A Wedeking

2. Supt. Bldg. Insp.: Date Rec'd. 8-7-74 . ACTION: Approved ___ ☐ Disapproved ☐
   Date Frwd. 8-7-74 . Signature: W W

3. City or County Engineer : Date Rec'd. ____ . ACTION: Approved ___ ☑ Disapproved ☐
   Date Frwd. 8-7-74 . Signature: Walter Hoppe

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. 499-C

PROPERTY WHERE SOIL TESTED:
Location: Township 8N ; Range 7E
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: Mickey R Griffin
Address _____

Dates of Tests: 7-30-74 to 7-31-74. Weather: Precip. 0 Temp. 85 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)
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Sum of Percolation Rates
Average of Rates:
Mean of Rates: 2.083/30

Signature of Person Conducting Test

Address _____
Phone: _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 15 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: 8-1-74

James Weverka
Signature of Reviewing Official

M HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

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FILE NO. 499-C

SPECIFICATIONS

DATE: 4-

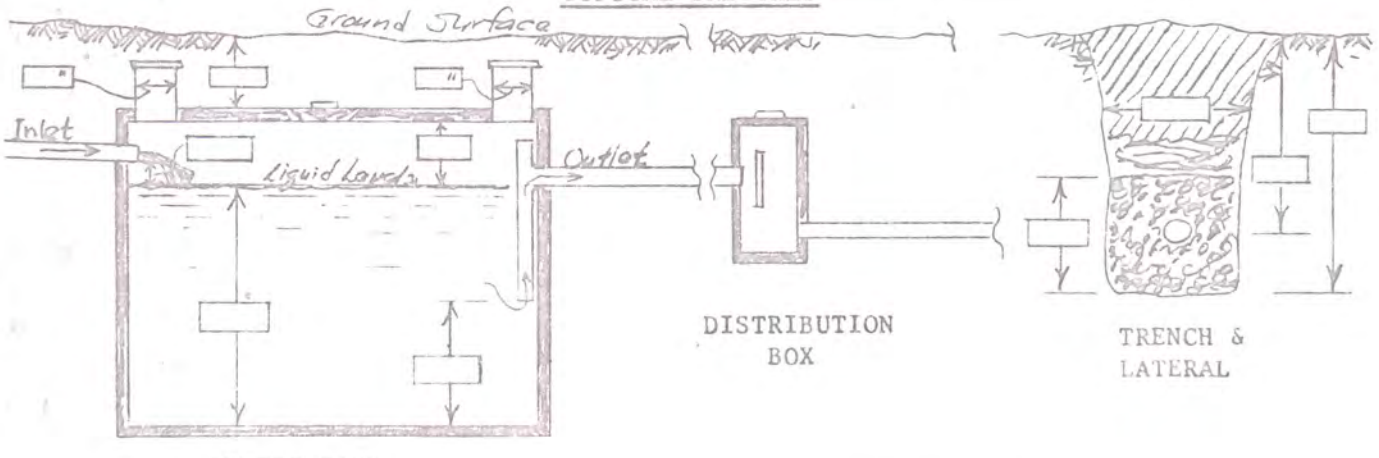
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3. Distance between dwelling and septic tank 8 ft.
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B. SEPTIC TANK (Provide construction drawings.)
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2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☒ (Company Precast) 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.
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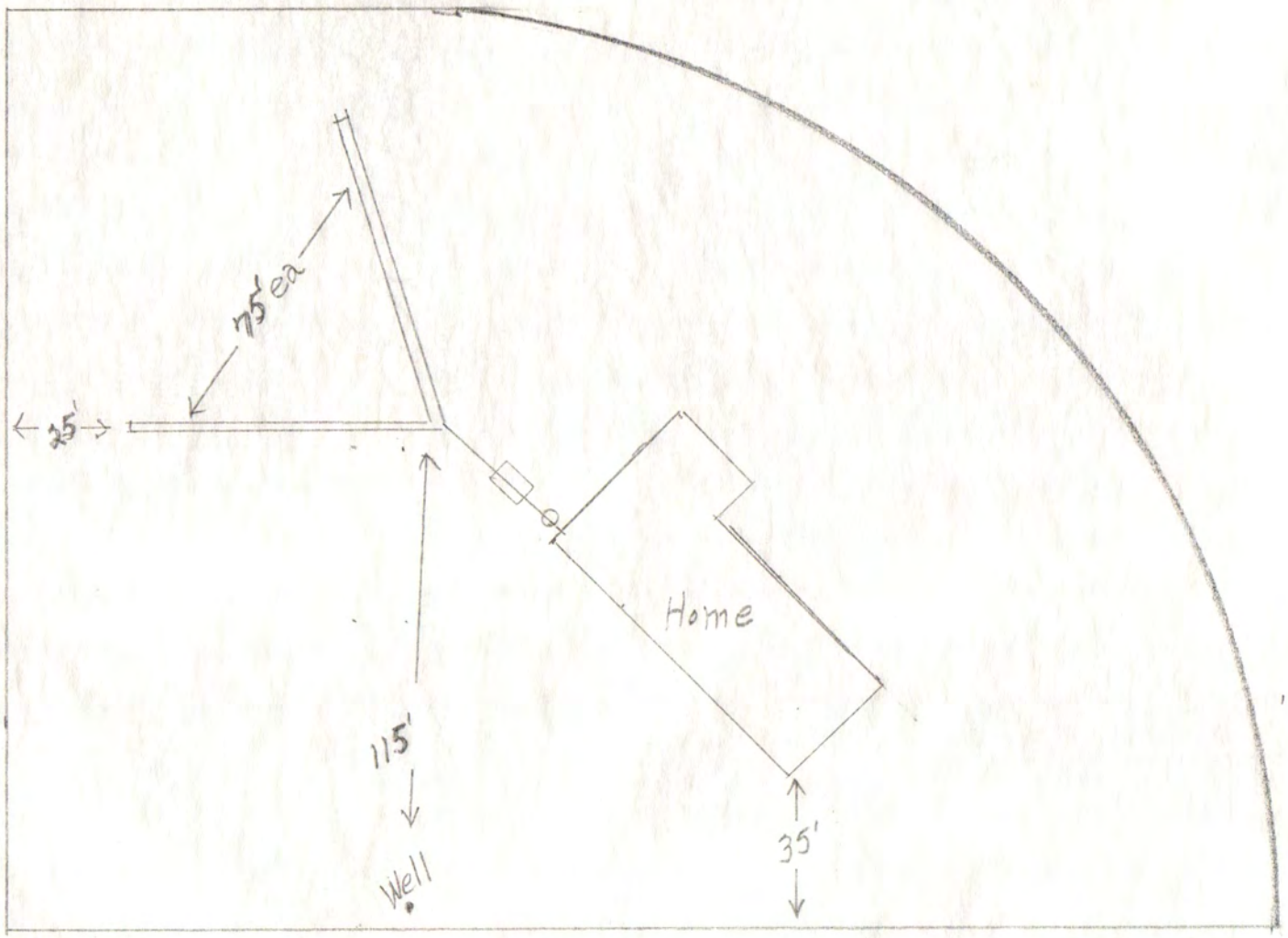
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4. Distance from Septic Tank 3' ft.
5. Serial Distribution: Yes ☒, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: half moon
2. Lateral Lines: Depth below grade ____in. Number 2; Length of each line ____ft Total length of Laterals 143 ft.; Slope ____in/100 ft. Diameter of pipe ____ in.; Shape ____ Material: concrete ☒; fiber asbestos ☐; clay ☐; other ____ Distance between lateral lines 10 ft.
3. Trench Dimension Depth ____in.; Width 48 in.
4. Filter Material: gravel. 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



Sewer Layout
For: Mr & Mrs Mickey Griffin
by: Riensches' Inc. / Burr. NE
Scale ¼" to 10'

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. 499-C

DATE: 4-22-74

TO: Director of Health
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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).

James C Rueschy - contractor
Signature of Applicant (owner or lessee)

Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; 8-1-74
Filing Fee: $ 30.00

2. Site Visits:
Date: 6-24-75 by: jw drm
Date: 6-25-75 by: jw
Date: by:

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-25-75 by: James Wierzba

INTER-DEPARTMENT COMMUNICATION

TO Charles Seale

DEPARTMENT Building Inspections

ATTENTION

CARBONS TO

DATE **August 5, 1974**

FROM Jerrold C. Hood

DEPARTMENT Health

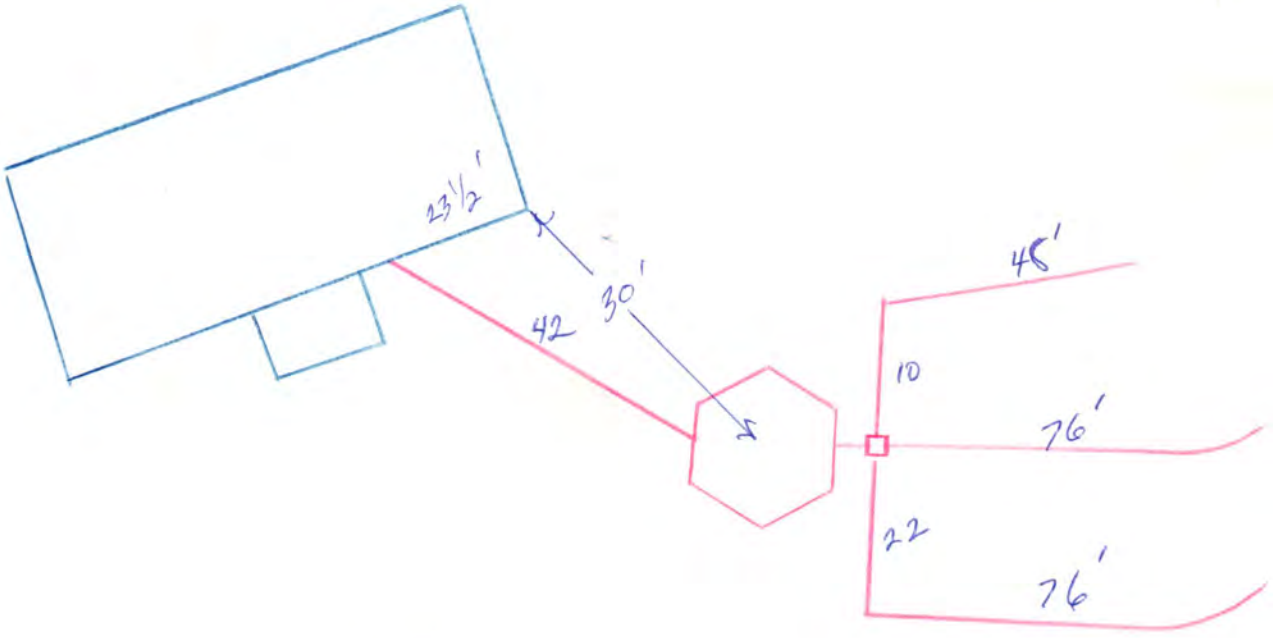
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File No. **499-C**
M. R. Griffin
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Jerrold C. Hood, R. S., Supervisor
County Sanitation Section
Division of Environmental Health

JCH: **sjf**



H - 2' deep

4' wide

Concrete half moons

Lateral laid level

N

JW

system not placed in area where percolation test was run