LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 839-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

November 27, 1976 — THIS PERMIT EXPIRES

Gary Culpepper — ISSUED TO

4710 Lonewood Circle, Lincoln — ADDRESS

T8N; R7E;of 6 PM; Section 5; — 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 DEPARTMENT

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. 839-C

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

DATE: 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. 8 N; Range 7 E 6PM; Section 5
Block ____; Lot ____; Addition ____
Street Address N 284' E. 628' NE¼ except ROW Parcel 1 Subd Permit # 291

2. Property Use: Residential ☒; Commercial ☐
No. of Bedrooms 3. Describe: See attached

Other Use ☐
Describe: ____

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

4. Distance to public sewer: ¾ mile ft.

Gary Culpepper
Signature of Applicant (Owner or Lessee)

4710 Lonewood Circle
Address Ph. 488-7839

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/28/76. Date Frwd. 5/28/76.
ACTION: Approved ☒ Disapproved ☐
Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. ____. Date Frwd. ____.
ACTION: Approved ☐ Disapproved ☐
Signature: ____

3. City or County Engineer: Date Rec'd. 6/1/76. Date Frwd. 6/1/76.
ACTION: Approved ☐ Disapproved ☒
Signature: Lenny Krafka Rudd 6/11/76 for LKK.

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. 839-C

DATE: 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. 8 N ; Range 7E 6PM; Section 5 ; Block ; Lot ; Addition .
Street Address N 284' E 628' NE ¼ .

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).

Gary Carlson
Signature of Applicant (owner or lessee)

4710 Lone Wood Circle
Address Ph-488-7839

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 10-8-76 by: pw
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 5/28/76
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10-8-76 by: James Weverka

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. 839-C

SPECIFICATIONS

DATE: 5-27-76

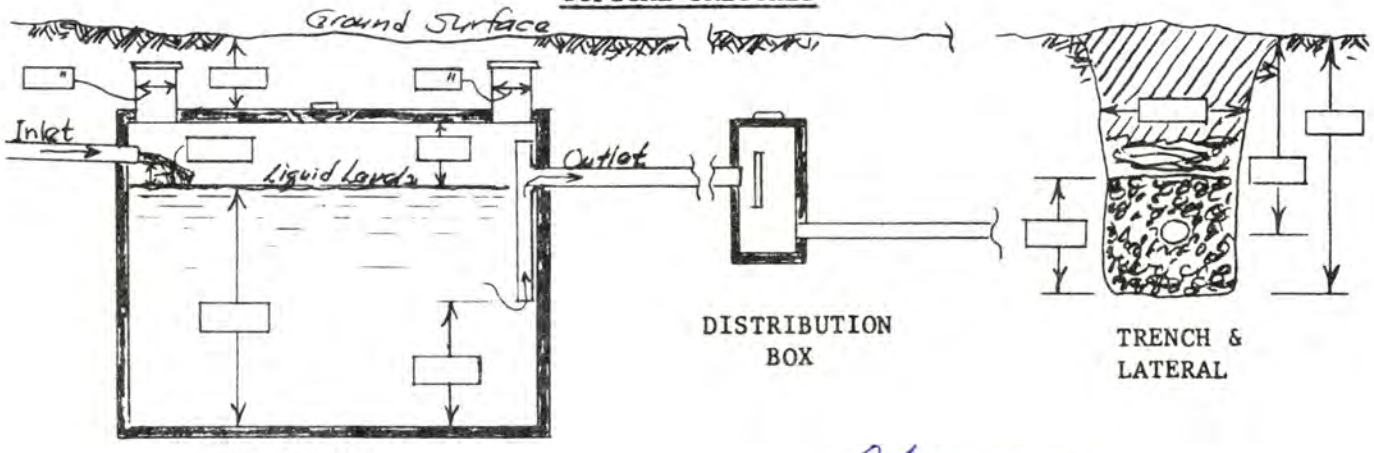
A. BUILDING SEWER:
1. Material Plo; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 18 in.
3. Distance between dwelling and septic tank 70 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 50 ft.;
Stream ___ ft.; Pressure Line 50 ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Conn; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☐ (Company Pre)
No ☐
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade 4 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 8 in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

C. DISTRIBUTION BOX
1. Material Conn; No. available outlets 4.
2. Factory Built: Yes ☒, (Company Pre)
No ☐
3. Dimension: Length 18 in.; Width 12 in.
Depth 12 in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☒, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Preforated
2. Lateral Lines: Depth below grade 32 in.
Number ___; Length of each line ___ ft
Total length of Laterals 287 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 36 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



Gary Carbenter
Signature of Applicant
488-7839

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. 839-C

PROPERTY WHERE SOIL TESTED:
Location: Township 8 N ; Range 7 E
Section & ¼ Sect. 5 NE ¼
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: Gary Carlgren
Address 4210 Lone Wood Circle
488-7839

Dates of Tests: 9-75 to 9-75. Weather: Precip. no Temp. 65°

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	32"	9-75	8 AM	9-75	12 AM	9-75	8 AM	6"	8:30	5¼	30 min	¾	
2													
3													
4													
5													
6													

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

Signature of Person Conducting Test

Address 2425 Se
Phone: 475-1486

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 40 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: May 28, 1976

Jerrold C. Hoal
Signature of Reviewing Official

EXHIBIT "A"

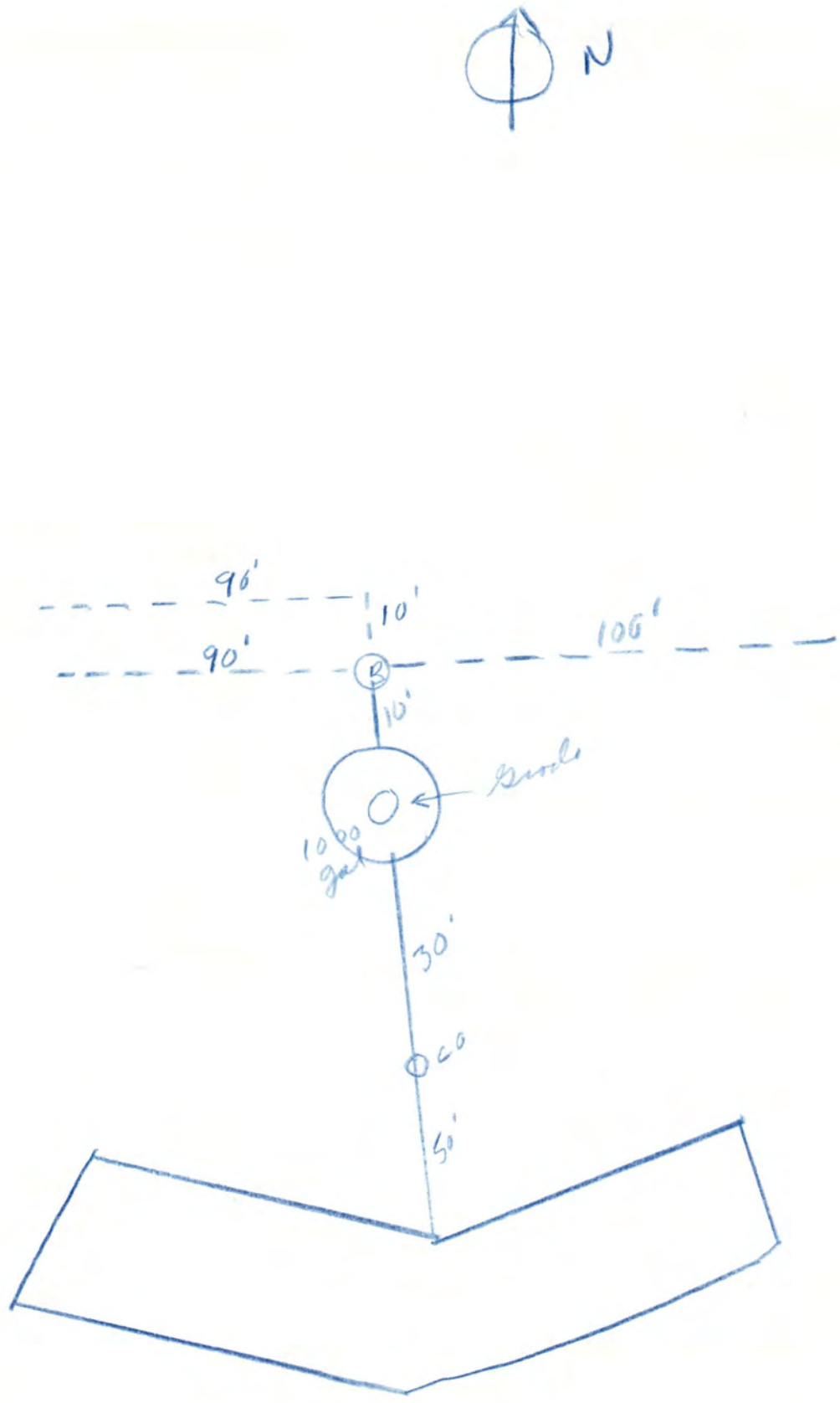
Legal Description of Property:

The North 728.5 feet of the East 628 feet of the NE 1/4 of Section 5, T8N, R7E of the 6th P.M., Lancaster County, Nebraska, except therefrom the part described as beginning at the NE corner of the said NE 1/4; thence West on the North line of the said NE 1/4 a distance of 628 feet; thence south parallel to the east line of the said NE 1/4 a distance of 40 feet; thence east on a line parallel to the North line of the said NE 1/4 a distance of 443.3 feet more or less to a point 40 feet south of and 2499.3 feet east of the NW corner of the said NE 1/4; thence southeasterly, along a straight line to a point 50 feet southerly of the North line and 33 feet westerly of the east line of the said NE 1/4; thence easterly, parallel with and 50 feet southerly of the north line of the said NE 1/4, a distance of 33 feet to a point on the east line of the Said NE 1/4; thence northerly on the east line of the said NE 1/4 a distance of 50 feet to the point of beginning.

Description of Parcels Created:

Parcel 1:

The north 284 feet of the East 628 feet of the NE 1/4 of Section 5, T8N, R7E of the 6th P.M., Lancaster County, Nebraska except therefrom that part described as beginning at the Northeast corner of the said NE 1/4; thence west on the North line of the Said NE 1/4 a distance of 628 feet; thence south parallel to the east line of the said NE 1/4 a distance of 40 feet; thence east on a line parallel to the North line of the said NE 1/4 a distance of 443.3 feet more or less to a point 40 feet south of and 2499.3 feet east of the NW corner of the said NE 1/4; thence southeasterly, along a straight line to a point 50 feet southerly of the North line and 33 feet westerly of the east line of the said NE 1/4; thence easterly, parallel with and 50 feet southerly of the north line of the said NE 1/4, a distance of 33 feet to a point on the east line of the said NE 1/4; thence northerly on the east line of the said NE 1/4, a distance of 50 feet to the point of beginning, and except the east 40 feet therefrom.


N
90'
10'
90'
100'
B
10'
Grade
10 00 gal
30'
CO
50'

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 839-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

November 27, 1976 — THIS PERMIT EXPIRES

Gary Culpepper — ISSUED TO

4710 Lonewood Circle, Lincoln — ADDRESS

T8N; R7E;of 6 PM; Section 5; — 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 DEPARTMENT

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. 839-C

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

DATE: 5-76

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1. Legal description of property: Twp. 8 N; Range 7 E 6PM; Section 5
Block ____; Lot ____; Addition ____
Street Address N 284' E. 628' NE¼ except ROW Parcel 1 Subd Permit # 291

2. Property Use: Residential ☒; Commercial ☐
No. of Bedrooms 3. Describe: See attached

Other Use ☐
Describe: ____

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

4. Distance to public sewer: ¾ mile ft.

Gary Culpepper
Signature of Applicant (Owner or Lessee)

4710 Lonewood Circle
Address Ph. 488-7839

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/28/76. Date Frwd. 5/28/76.
ACTION: Approved ☒ Disapproved ☐
Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. ____. Date Frwd. ____.
ACTION: Approved ☐ Disapproved ☐
Signature: ____

3. City or County Engineer: Date Rec'd. 6/1/76. Date Frwd. 6/1/76.
ACTION: Approved ☐ Disapproved ☒
Signature: Lenny Krafka Rudd 6/11/76 for LKK.

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

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FILE NO. 839-C

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Signature of Applicant (owner or lessee)

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Address Ph-488-7839

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 10-8-76 by: pw
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 5/28/76
by: Jerrold C. Hood

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Date: 10-8-76 by: James Weverka

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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. 839-C

SPECIFICATIONS

DATE: 5-27-76

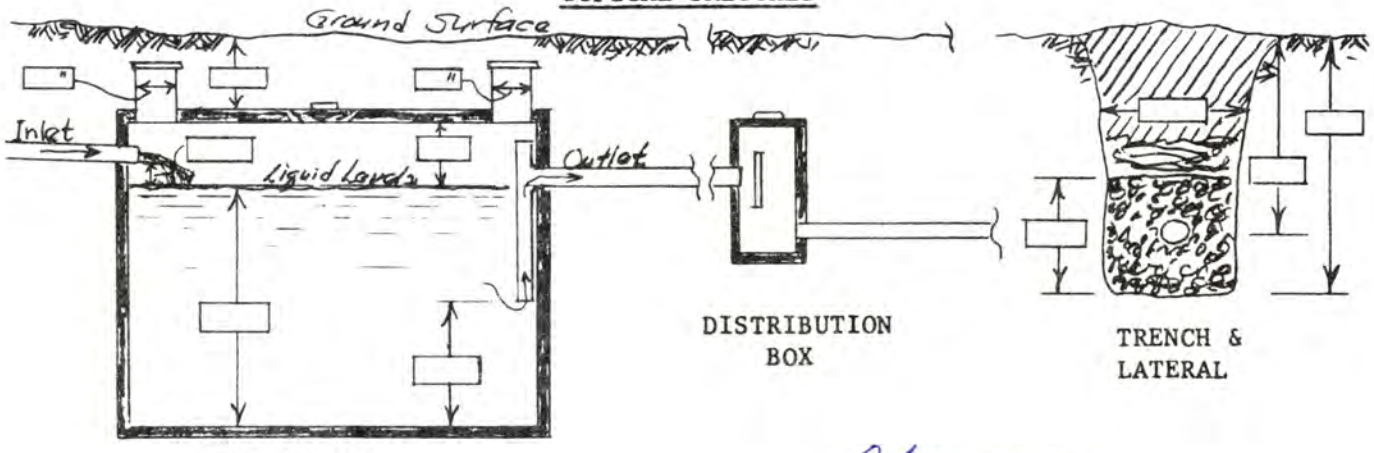
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4. Manholes: Over Inlet; diam. 6 in.
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Below Grade 4 in.
5. Inlet: Baffle ☐; or Tee ☐
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Depth of outlet below inlet ___ in.
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4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☒, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Preforated
2. Lateral Lines: Depth below grade 32 in.
Number ___; Length of each line ___ ft
Total length of Laterals 287 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 36 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



Gary Carbenter
Signature of Applicant
488-7839

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. 839-C

PROPERTY WHERE SOIL TESTED:
Location: Township 8 N ; Range 7 E
Section & ¼ Sect. 5 NE ¼
Property Dimensions: ____ft. x ____ ft.
Area: _____ acres. (Attach sketch of property showing hole location).
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Owner: Gary Carlgren
Address 4210 Lone Wood Circle
488-7839

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		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	32"	9-75	8 AM	9-75	12 AM	9-75	8 AM	6"	8:30	5¼	30 min	¾	
2													
3													
4													
5													
6													

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

Signature of Person Conducting Test

Address 2425 Se
Phone: 475-1486

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 40 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: May 28, 1976

Jerrold C. Hoal
Signature of Reviewing Official

EXHIBIT "A"

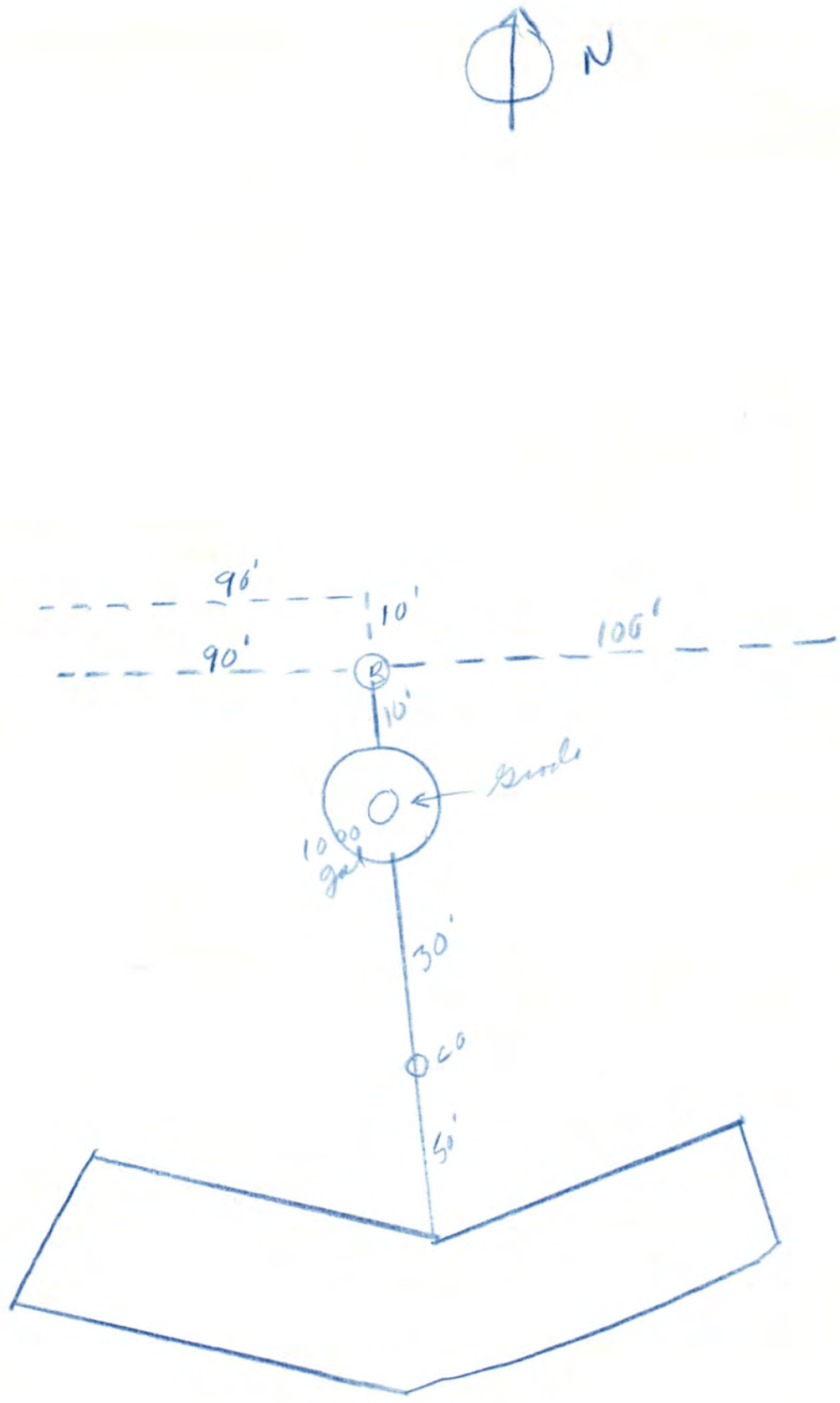
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Description of Parcels Created:

Parcel 1:

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N
90'
10'
90'
100'
B
10'
Grade
10 00 gal
30'
CO
50'