LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 923800833301

Issued 05/05/92
Expires 11/05/92

ESTABLISHMENT

MIKE POE
T8N R7E SEC 23
LOT 5

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

MIKE POE
7925 COOPER AV
LINCOLN NE 68506

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
5/8/92	PAID

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

OK

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 471-7800

A

FILING FEE: $_____

FILE NO._____

DATE: 4-14-92

The undersigned hereby requests SITE CLEARANCE and PERMIT 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 23 ;
   Block _____ : Lot S.I.T. : Addition 54 Acres, NW¼,
   Street Address 884 Rock Rd

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4 . Describe _____

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

4. Distance to public sewer: 6 miles ft.

Mike G. Poe, Poe Development Co
Signature of Applicant (Owner or Lessee)

7925 Cooper Ave.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/5/92 . Date Frwd. 5/5/92 . ACTION: Approved ☒ Disapproved ☐ Signature: Gerald C. Wood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 5/5/92 . Date Frwd. 5/5/92 . ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

3. City or County Engineer: Date Rec'd. 05/05/92 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 6-1-92 by: PAUL DOSTERMANN
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-11-92 By: Paul Dostermann

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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Lincoln, Nebraska 68502
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 7E ; Section & ¼ Section 23, NW1/4, Lot 5,
Property Dimensions: 660 ft. x 2620 ft. Area: 54 acres. (Attach Sheet C with sketch of property).

Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐

Dates of Tests: 4-11 to 4-12. Weather: Precip. 0 Temp. 50

OWNER: Poe

Address: 7925 Cooper Ave.

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				
Hold 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./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	18"	4/11	1:30			4/12	12:30	16"	2:00	14 3/4"	30 min	1 1/4"	30 min
2	↓	↓	↓			↓	↓	↓	↓	14 3/8"	↓	1 3/8"	↓
3										12 3/4"		3 1/4"	
4										12 1/2"		3 1/2"	

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

Signature of Person Conducting Test

Address 7925 Cooper Ave. Phone 483-4532

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): _____

Date: _____

Approved Percolation Rate (a)
A. 12 min./inch
B. _____ min./inch
C. _____ min./inch

Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

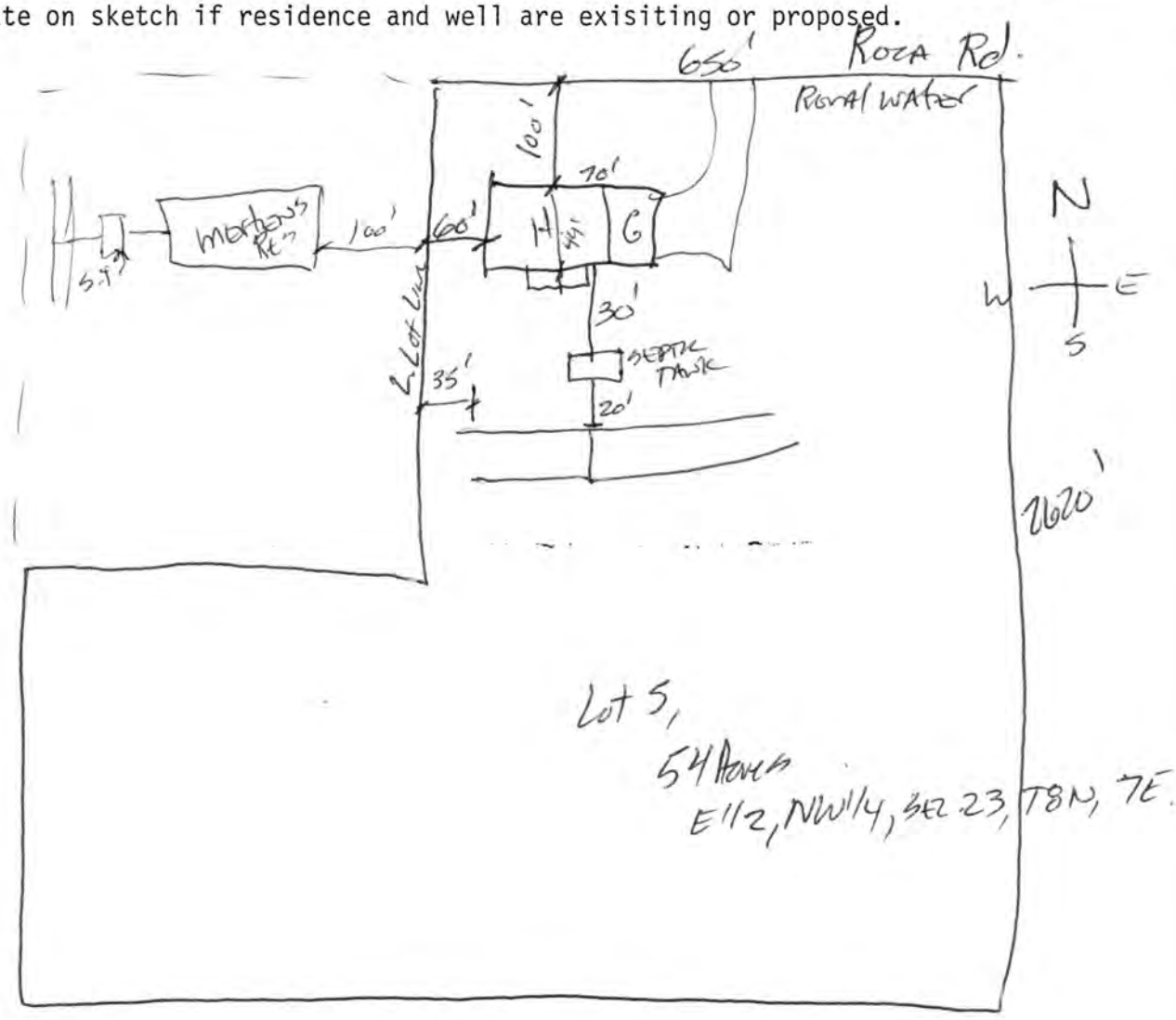
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: May 5, 1992

Minimum Design Requirement
1. Capacity of Septic Tank 1250 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 1000 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

FORM 20104-0477
PLANS & SPECIFICATIONS FOR 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
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D

DATE: 4-14-92

FILE NO: _____

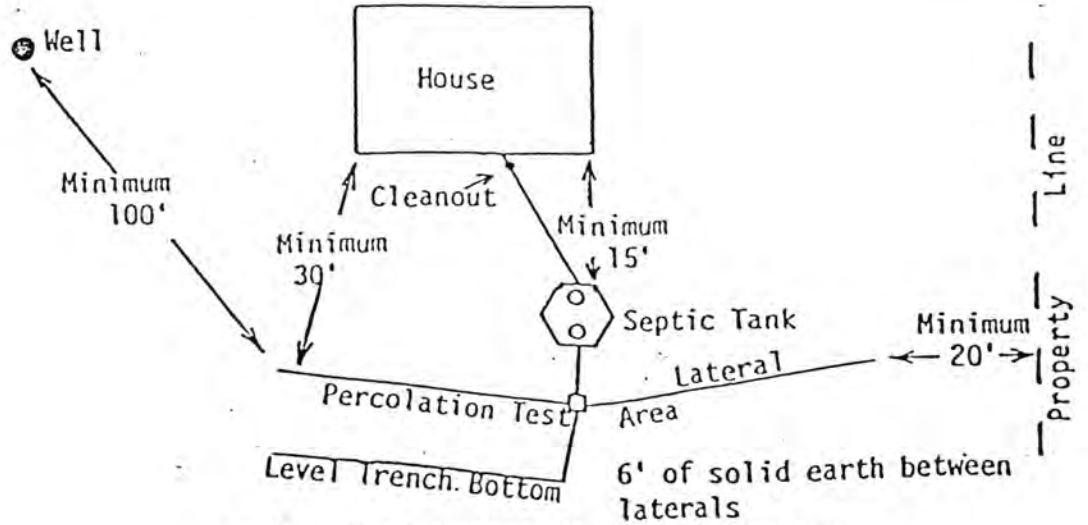
SPECIFICATIONS AS BUILT

A. BUILDING SEWER: Cast Iron
1. Material ~~Concrete~~; Diameter 4" in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 30 ft.
4. Number of clean-outs 0.
5. Distances to:
Well or Suction Line _____ ft.; Stream 1306 ft.; Pressure Line _____ ft.; Property Line 35 ft.

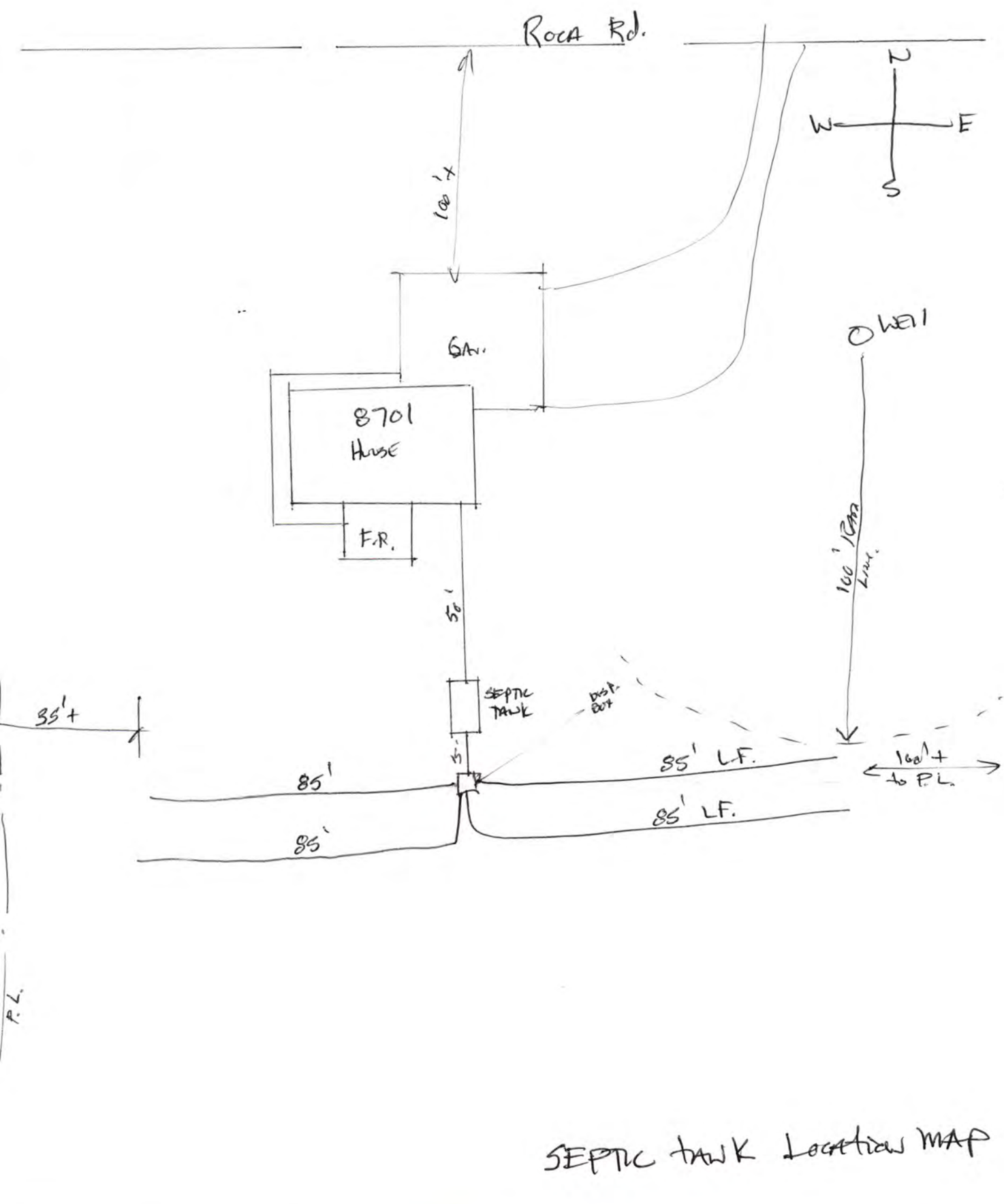
B. SEPTIC TANK:
1. Material Concrete; No. of compartments 1.
2. Capacity 1200 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Re-Cast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade _____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 20" in.
8. Distances to:
Well or Suction Line 100 ft.; Stream 1300 ft.; Pressure Line _____ ft.; Property Line 50 ft.

C. DISTRIBUTION BOX:
1. Material Concrete; Number available outlets 4 6.
2. Factory Built: Yes ☒ No ☐
(Company Re-Cast)
3. Distance from Septic Tank 20 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or Perforated Pipe 4" PVC.
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 4; Length of each line _____, _____, _____, _____, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 36 ft.; Slope 1" in/100 ft.; Average Depth 24"-18" in.
4. Filter Material: Pea Gravel - Straw
Depth of Material 2" in.
5. Distances to:
Well or Suction Line 100 ft.; Stream 1200 ft.; Pressure Line _____ ft.; Property Line 50 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN



SEPTIC TANK Location MAP

Rec'd
6-10-92