LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 617-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

November 14, 1975 — THIS PERMIT EXPIRES

John D. Morris — ISSUED TO

1535 North 58th — ADDRESS

T8N; R7E; Section 30; — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	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. 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. 617-C

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

DATE: 6 May 1975

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 North Range 7 East Section 30 Part of NW 4
Block ____; Lot ____; Addition ____ See attached Lot 19, I.T. 5.21± ac.
Street Address ____

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

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

4. Distance to public sewer: No Sewer ft.

John D Morris
Signature of Applicant (Owner or Lessee)

1535 No 58 Lincoln NE 68505
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/14/75. Date Frwd. 5/14/75. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood

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

3. City or County Engineer: Date Rec'd. 5-14-75. Date Frwd. 5-14-75. ACTION: Approved ☐ ☒ Disapproved ☐ Signature: Henry Graf Deputy

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._____

DATE: 6 May 1975

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 North; Range 7 East; Section 30 _____; Block _____; Lot _____; Addition _____.
Street Address _____.

2. Property Use: Residential 2 ☒; Commercial _____ ☐
No. of Bedrooms 2 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).

John D Mann
Signature of Applicant (owner or lessee)

1535 No 58 Lincoln NE 68505
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: June 27-75 by: mm + jw
Date:_____ by:_____
Date:_____ by:_____

3. Date: Approved ☒; Disapproved ☐ 5/14/75
by: Jerrold E. Hoop

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: June-27-75 by: Ron Morgenant

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. _____

PROPERTY WHERE SOIL TESTED:
Location: Township 8 North; Range 7 East
Section & ¼ Sect. 30
Property Dimensions: 330 ft. x 660 ft.
Area: 5.0 acres. (Attach sketch of property showing hole location).

Owner: John D & Kathryn L Morris
Address 1535 No 58

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

Dates of Tests: May 5-75 to May 6-75. Weather: Precip. I Temp. 75 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	18"	5-5	4:00PM	5-6	4:00	5-6	4:30	6"	8:30	4	30	2	30/2
2	18"	5-5	4:00	5-6	4:00	5-6	4:30	6"	8:30	5	30	1	30/1
3	18"	5-5	4:00	5-6	4:00	5-6	4:30	6"	8:30	5½	30	½	30/½
4	18"	5-5	4:00	5-6	4:00	5-6	4:30	6"	8:30	5½	30	½	30/½
5	18"	5-5	4:00	5-6	4:00	5-6	4:30	6"	8:30	6½	30	1½	30/1½
6	18"	5-5	4:00	5-6	4:00	5-6	4:30	6"	8:30	5	30	1	30/1

Sum of Percolation Rates 1¼
Average of Rates: 1.08
Mean of Rates:

John D Morris
Signature of Person Conducting Test

Address 1535 No 58
Phone: 464-3364

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 28 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: May 14, 1975

Jerrold C. Wood
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. _____

SPECIFICATIONS

DATE: 6 May 1975

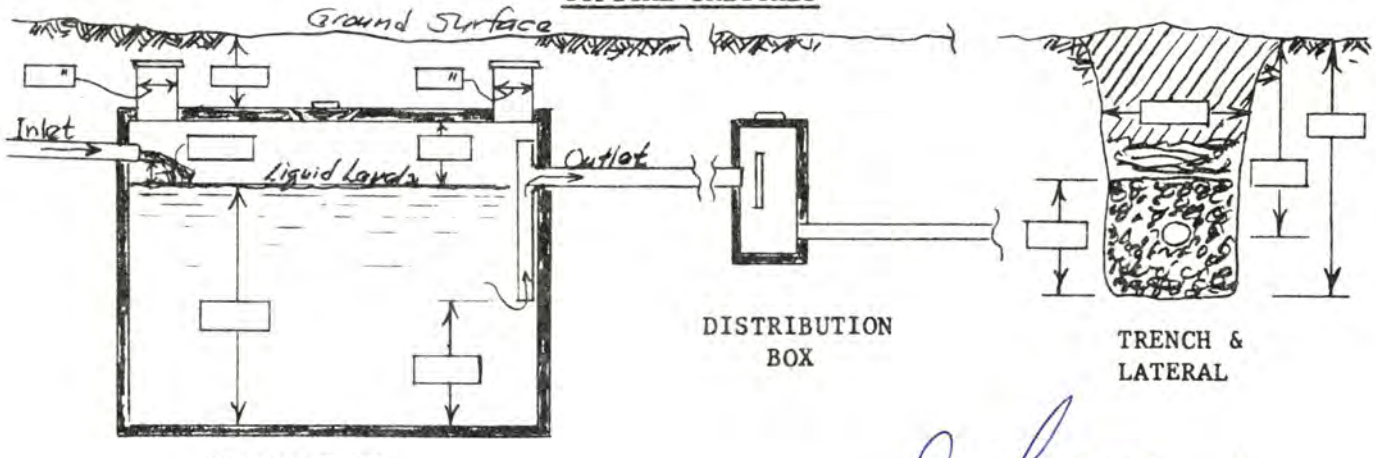
A. BUILDING SEWER
1. Material Plastic Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 18 in.
3. Distance between dwelling and septic tank 40 ft.
4. Number of clean-outs 0.
5. Distances To:
Well or Suction Line 300 ft.;
Stream 0 ft.; Pressure Line 200 ft.;
Property Line 250 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete No. of compartments 2.
2. Capacity 1000 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☒ (Company Pre-Cast)
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:
Well or Suction Line 300 ft.;
Stream 0 ft.; Pressure Line 200 ft.;
Property Line 250 ft.

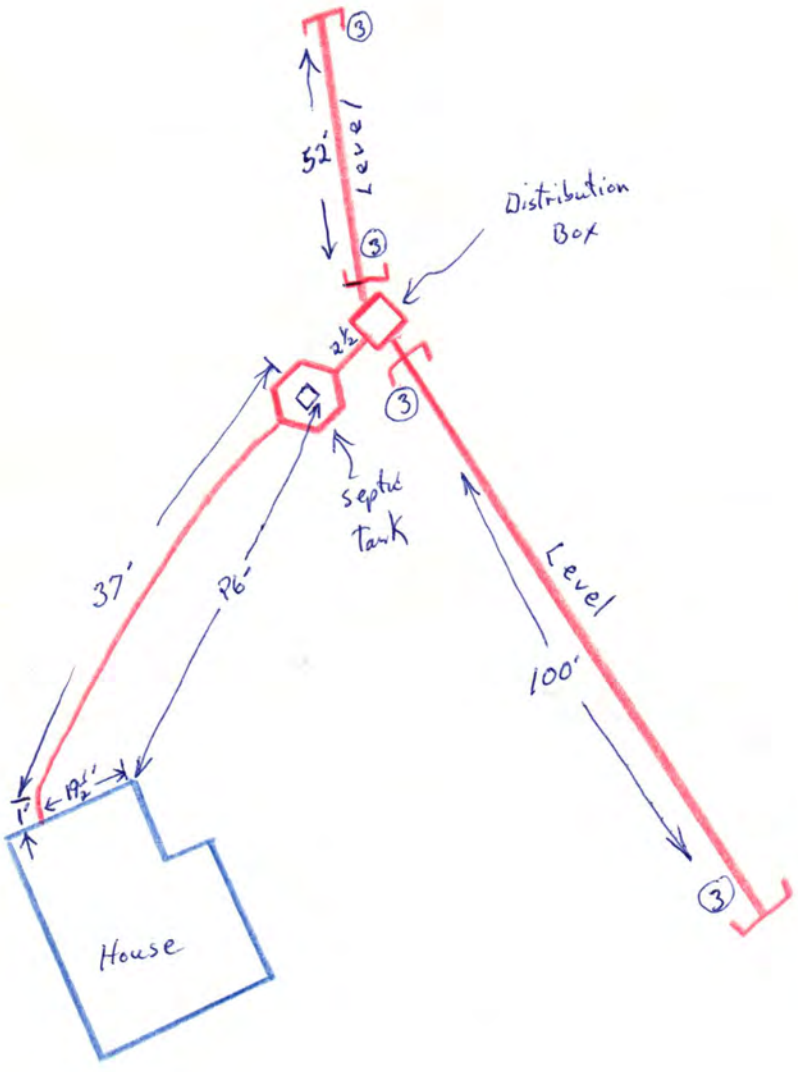
C. DISTRIBUTION BOX
1. Material Concrete No. available outlets 5.
2. Factory Built: Yes ☒, (Company Pre-Cast) No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 8 ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade 24 in.
Number 2; Length of each line 100 ft
Total length of Laterals 121 ft.; 52
Slope 6 in/100 ft. Diameter of pipe ___ in.; Shape 0
Material: concrete ☐; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth ___ in.; Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 24 in.
5. Distances To:
Well or Suction Line 300 ft.;
Stream 0 ft.; Pressure Line 200 ft.
Property Line 250 ft.
6. Percolation Rate: 30/24 minutes/inch

TYPICAL SKETCHES



John Moore
Signature of Applicant


N
3
52'
Level
3
Distribution Box
2½
3
Septic Tank
37'
26'
Level
100'
1'
2½'
House
3

June-27-75
rm