LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 559-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

June 2, 1975 — THIS PERMIT EXPIRES

Riensches' Inc. — ISSUED TO

Burr — ADDRESS

T8N; R7E; Sec. 35 — LEGAL DESCRIPTION

REMARKS:

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
6241535	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. 559-C

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

DATE: 22 Nov 1974

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: 5 acre Tract Twp. T8N ; Range R7E ; Section 35
Block _____; Lot _____; Addition See attached
Street Address _____

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

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

4. Distance to public sewer: Non Available ft.

Vernon C Kreische pres
Signature of Applicant (Owner or Lessee)
Kreisches Inc
Burr, Nebr 68324
Address

Dale Strasburg - owner

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 12/2/74. Date Frwd. 12/2/74. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hoak

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

3. City or County Engineer: Date Rec'd. _____. Date Frwd. 12-9-74. ACTION: Approved ☑ Disapproved ☐ Signature: Walter Hoppe

REMARKS OR REASONS FOR DISAPPROVAL _____

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

Dale Strasburg owner

Blue Points Key
Space
Capt

Bob Sedelmeier

Man at
First Federal of Crete
Bob Sedelmeier
Phone 826-4349

19601 Lo 96th

Need a survey when staked out.

Q
tract of land East ½ of NE¼ of Sec 35 ~~SW~~ T8N, R7E of 6PM

Commencing at 33N and 33ft W of east quarter corner of sub section 35 thence north and parrel to east line of sub sec 35 a distance of 310.15 ft thence west on a deflection angle 90° 15 min left from the last dicribed course a distance of 716.77 ft then south and parellel to east line of sub sec 35 a distance 309.74 ft then east and paralel to the east west quarter sec line of said sec 35 distan 716.77 ft to the point of beging.

5.1 ac exclusive of road

quick claim deed.

Ed Albert 5939 Franklin. Albert Neal ty.

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 7N; Range R7E
Section & ¼ Sect. NE¼ Sec 35
Property Dimensions: 310 ft. x 716 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: _____
Address _____

Dates of Tests: 11-21-74 to 11-22-74. Weather: Precip. 0 Temp. 50°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	11-21	9:10	11-22	10:15	11-22	10:30	12	11:30	10 3/4	60	1 1/4	
2	30	11-21	9:10	11-22	10:15	11-22	10:30	12	11:30	10 3/4	60	1 1/4	
3	30	11-21	9-10	11-22	10:15	11-22	10:30	12	11:30	10 1/2	60	1 1/2	
4	30	11-21	9-10	11-22	10:15	11-22	10:30	12	11:30	11	60	1	
5	30	11-21	9-10	11-22	10:15	11-22	10:30	12	11:30	10 1/2	60	1 1/2	
6	30	11-21	9-10	11-22	10:15	11-22	10:30	12	11:30	10 3/4	60	1 1/4	

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

Jerome C Reinsche pres
Signature of Person Conducting Test
Reinsches Inc

Address Burr, Nebr 68324
Phone: 846-2661

Dale Strasburg - owner

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 48 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: December 2, 1974

Gerald C Rood
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: 22 Nov 1974

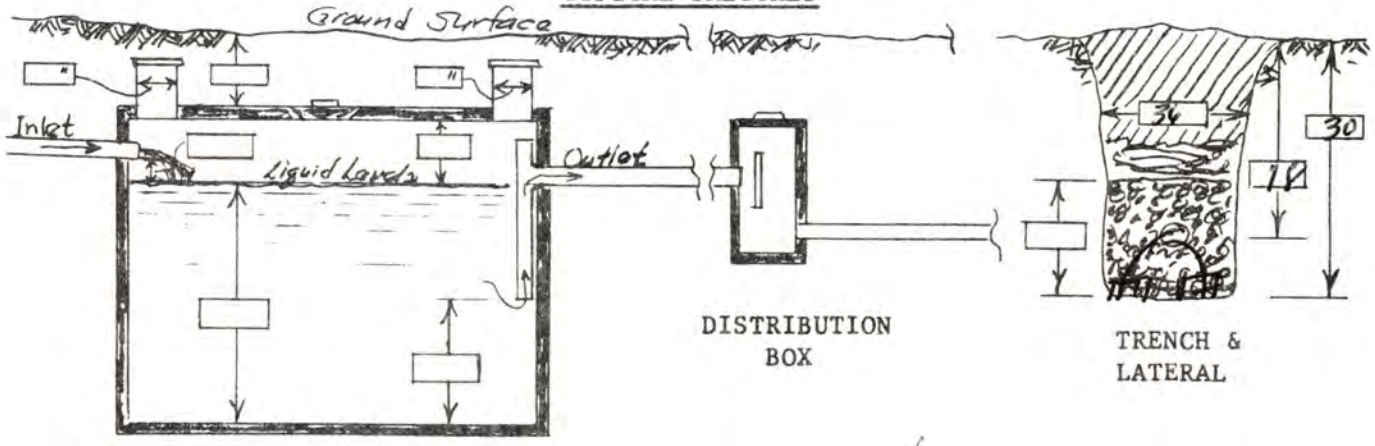
A. BUILDING SEWER:
1. Material PVC; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank 20 ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line 100+ ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete No. of compartments _____.
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:
Well or Suction Line 160 ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line 110 ft.

C. DISTRIBUTION BOX
1. Material Concrete No. available outlets _____.
2. Factory Built: Yes ☒ (Company Precast)
No ☐
3. Dimension: Length ____in.; Width ___in.
Depth ____in.
4. Distance from Septic Tank 20 ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

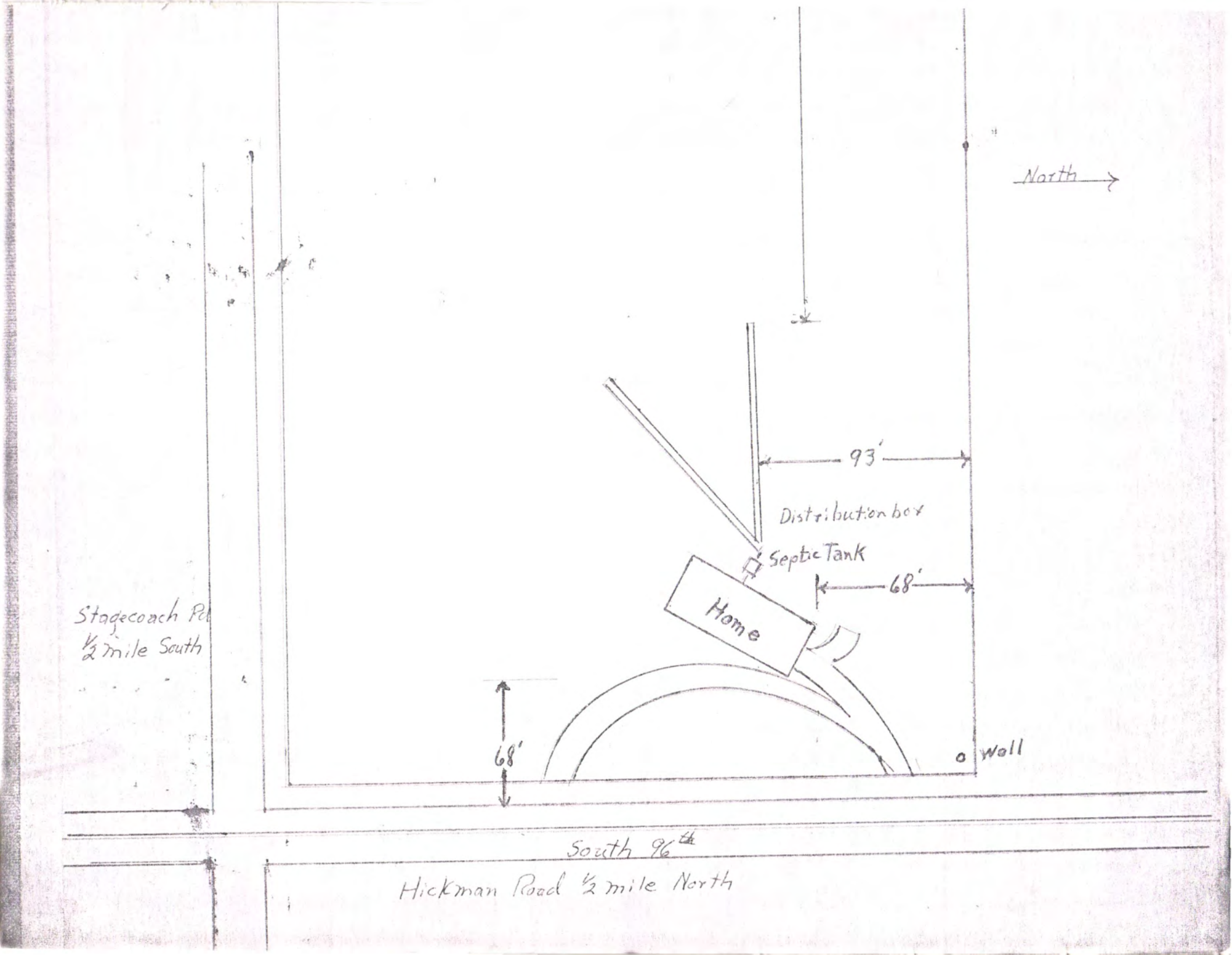
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade 30 in.
Number 3; Length of each line ~~100~~ 97, 84, 49 ft
Total length of Laterals 228 ft.;
Slope 10 in/100 ft. Diameter of pipe 16 in.; Shape Half Moon
Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines 40 ft.
3. Trench Dimensions: Depth 30 in.; Width 36 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 20 in.
5. Distances To:
Well or Suction Line 190 ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Dale Strasburg - owner

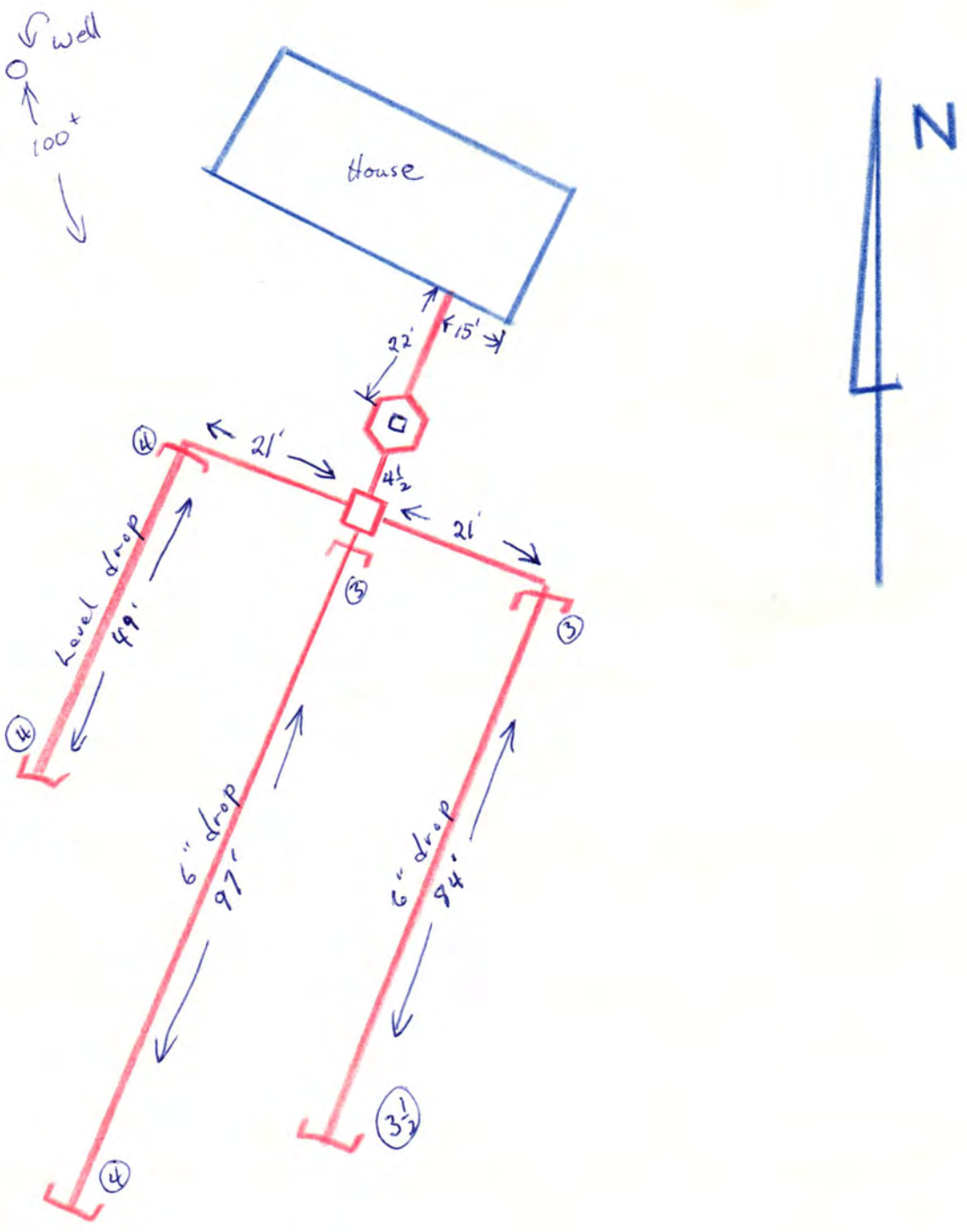
Signature of Applicant
Wiensches, Inc


North
93'
Distribution box
Septic Tank
68'
Home
68'
Wall
Stagecoach Rd
½ mile South
South 96th
Hickman Road ½ mile North

Plot Plan for
Mr + Mrs Dale Strassburg
Drawn by
Lifeinscapes, Inc.
Scale 1" = 50'

Dry Stream

500'


well
100+
House
15'
22'
21'
4½
21'
4
3
3
4
Level drop
49'
6" drop
97'
6" drop
94'
4
3½
N

July - 10 - 75

rm