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. 89380002901

Issued 08/31/89
Expires 03/03/90

ESTABLISHMENT

JOHN STROHMYER
T8N R8E SEC 10
SW 1/4 OF SW 1/4

FEES: Permit 018754 $60.00

Total $60.00

PERMITTEE

JOHN STROHMYER
4235 NW 57 ST
LINCOLN NE 68524

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT

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

893900029

RECEIVED SEP 15 1989

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: Aug 28, 1989

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 8E ; Section 10 ; SW¼ of SW¼
   Block_____ : Lot_____ : Addition_____
   Street Address Bennett Nebr.

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2 . Describe_____

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

4. Distance to public sewer: _____ft.

John Stuhmyer
Signature of Applicant (Owner or Lessee)

Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/30/89. Date Frwd. 9/5/89. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 9/8/89. Date Frwd. 9/11/89. ACTION: Approved ☒ Disapproved ☐ Signature:
3. City or County Engineer: Date Rec'd. 8/5/89. Date Frwd. 8/5/89. ACTION: Approved ☐ Disapproved ☐ Signature:

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 12-7-89 by: rm
Date: 1-30-90 by: rm installed alternate 100 ft. lateral
Date:_____ by:_____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2-2-90 By: Ron Margrum

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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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 8N ; Range 8E ; Section & ¼ Section SW 1/4 of SW 1/4 of 10.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☑ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 8/27 to 8/28/89. Weather: Precip. _____ Temp. 80°.

OWNER: Dick Kohles

Address: 2610 Colonial Dr. 68502 Lincoln, Nebr

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	24	8/27	12:00	8/28	12:00	8/28	2:30	6	3:00	4½		1½	
2	"	"	"	"	"	"	"	"	"	5½		½	
3	"	"	"	"	"	"	"	"	"	5¾		¼	
4	"	"	"	"	"	"	"	"	"	5½		½	
5	"	"	"	"	"	"	"	"	"	4½		1½	
6	"	"	"	"	"	"	"	"	"	5¼		¾	

John A Stuhmyer
Signature of Person Conducting Test

Address 4235 NW. 57th St. Phone 470-2262

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: AUGUST 30, 1989

Approved Percolation Rate (a)
A. 37 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hood
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
Division of Environmental Health
2200 St. Marys Avenue
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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: August 30, 1989

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 335 sq.ft.

Gerrold C. Hood
Signature of Reviewing Official

RECEIVED FEB 2 1990

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
Phone: 471-7800

D

DATE: 1-30-90

FILE NO. _____

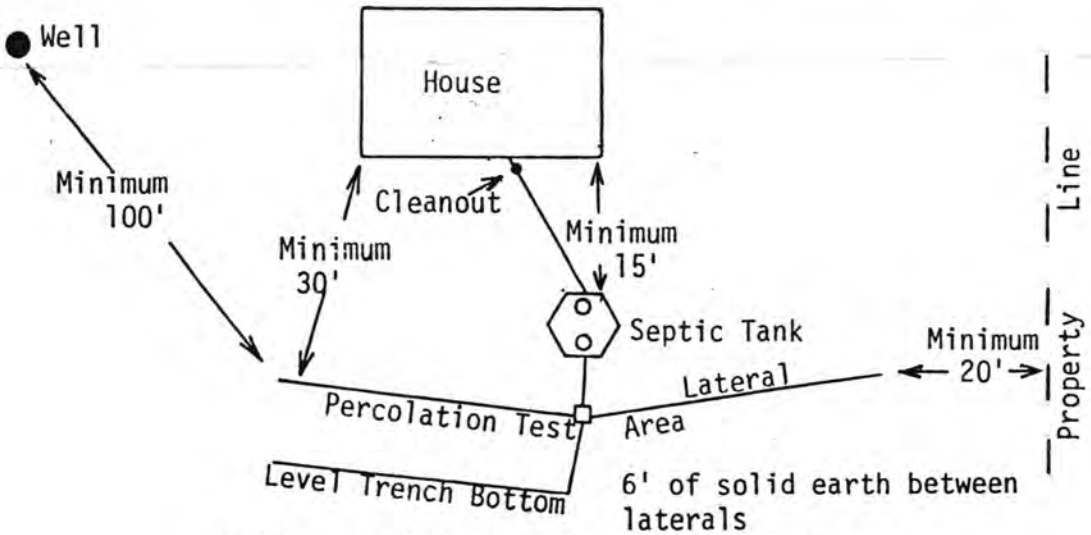
Dick Kohles SPECIFICATIONS AS BUILT Bennet, NE

A. BUILDING SEWER:
1. Material Sch #40; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 4 in.
3. Distance between dwelling and septic tank 47 ft.
4. Number of clean-outs 1.
5. Distances to: Well or Suction Line ~~50~~ — ft.; Stream — ft.; Pressure Line 20 ft.; Property Line 500 ft.

B. SEPTIC TANK:
1. Material Conc.; No. of compartments ____.
2. Capacity 1,000 Gal gals.;
3. Factory Built: Yes ☑ No ☐ (Company Pre-Cast Step)
4. Manholes: Over Inlet; diam. 24 in. Over Outlet; diam. 24 in. Riser Above ☐ Below ☑ Grade 8 in.
5. Inlet: Baffle ☑; or Tee ☐
6. Outlet: Baffle ☑; or Tee ☐
7. Depth of top of tank below finished grade 48 in.
8. Distances to: Well or Suction Line ~~50~~ — ft.; Stream — ft.; Pressure Line 60 ft.; Property Line 500 ft.

C. DISTRIBUTION BOX:
1. Material Conc.; Number - available outlets 5.
2. Factory Built: Yes ☑ No ☐ (Company Precast Step)
3. Distance from Septic Tank 26 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". Material: fiberglass ☐; plastic ☑; concrete ☐; other ____.
2. Lateral Lines: Number 3; Length of each line 100, 100, 100, ____, ____ ft.; Total length of laterals 300 ft.; Distance between lateral lines 14 ft.
3. Trench dimensions: Width 2 ft.; Slope 1 in/100 ft.; Average Depth 36" in.
4. Filter Material: Gravel Depth of Material 12 in.
5. Distances to: Well or Suction Line — ft.; Stream — ft.; Pressure Line 100 ft.; Property Line 400 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Dick Kohles
Property Owner

