LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1676-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JANUARY 17, 1981 — THIS PERMIT EXPIRES

THEODORE OEHLERT — ISSUED TO

4301 ANTELOPE CREEK ROAD, LINCOLN NE — ADDRESS

T8N, R8E, Section 17 NE¼ NW¼

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
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

ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

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: 474-1541

A

FILING FEE: $ 60.00

FILE NO. 167C-C

DATE: 7-15-80

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 NE 1/4 NW 1/4; 17
   Block _____ : Lot _____ : Addition _____
   Street Address _____

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

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

4. Distance to public sewer: N.A. ft.

Theodore W. E. Oehlert
Signature of Applicant (Owner or Lessee)

4301 ANTELOPE CRK. RD.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/15/80. Date Frwd. 7/17/80. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 7/17/80 Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Gary M. Sherwood

3. City or County Engineer: Date Rec'd. 7-17-80. Date Frwd. 7-17-80. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 8-25-80 by: DM
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL*
Date: 8-25-80 By: Ron Maynard

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

* Note: Because of the drive way location in the front of the house, a clean out was not put at the 75' interval

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
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

B

FILE NO. 1676-C

PROPERTY WHERE SOIL TESTED:

Location: Township 8 ; Range 8 ; Section & ¼ Section 17 NE¼ NW¼
Property Dimensions: 1320 ft. x 1320 ft. Area: 40 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 7-11-80 to 7-12-80 . Weather: Precip. TRACE 7-12 AM Temp. 90s-100.

OWNER: THEODORE H. E. OEHLERT

Address: 4301 ANTELOPE CREEK ROAD

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	30	7-11	11:39 AM	7-12	11:10 AM	7-12	11:10 AM	12	11:40 AM	12 7/8	30	7/8	34.3
2	30	7-11	11:41 AM	7-12	11:12 AM	7-12	11:12 AM	11 1/8	11:42 AM	12	30	7/8	34.3
3	30	7-11	11:43 AM	7-12	7:33 AM	7-12	7:33 AM	11 5/8	8:03	12 1/8	30	1/2	60
4	30	7-11	11:45 AM	7-12	7:36 AM	7-12	7:36 AM	11 3/4	8:06	12	30	1/4	120
5	30	7-11	11:47 AM	7-12	7:38 AM	7-12	7:38 AM	11 7/8	8:08	12 1/4	30	3/8	80
6	30	7-11	11:49 AM	7-12	7:40 AM	7-12	7:40 AM	11 3/4	8:10	12 1/4	30	1/2	60

Sum of Percolation Rates: 388.6
Average of Rates: 64.8
Mean of Rates: 77.2

Theodore H.E. Oehlert
Signature of Person Conducting Test

Address 4301 ANTELOPE CREEK ROAD LINCOLN Phone 489-8373

(Do not write below this line)

REVIEWING ACTION

Remarks:
Soil Type (SCS): Wymore Silty Clay Loam
Date: July 15, 1980

Approved Percolation Rate (a)
A. 53 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hoop
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 ☐

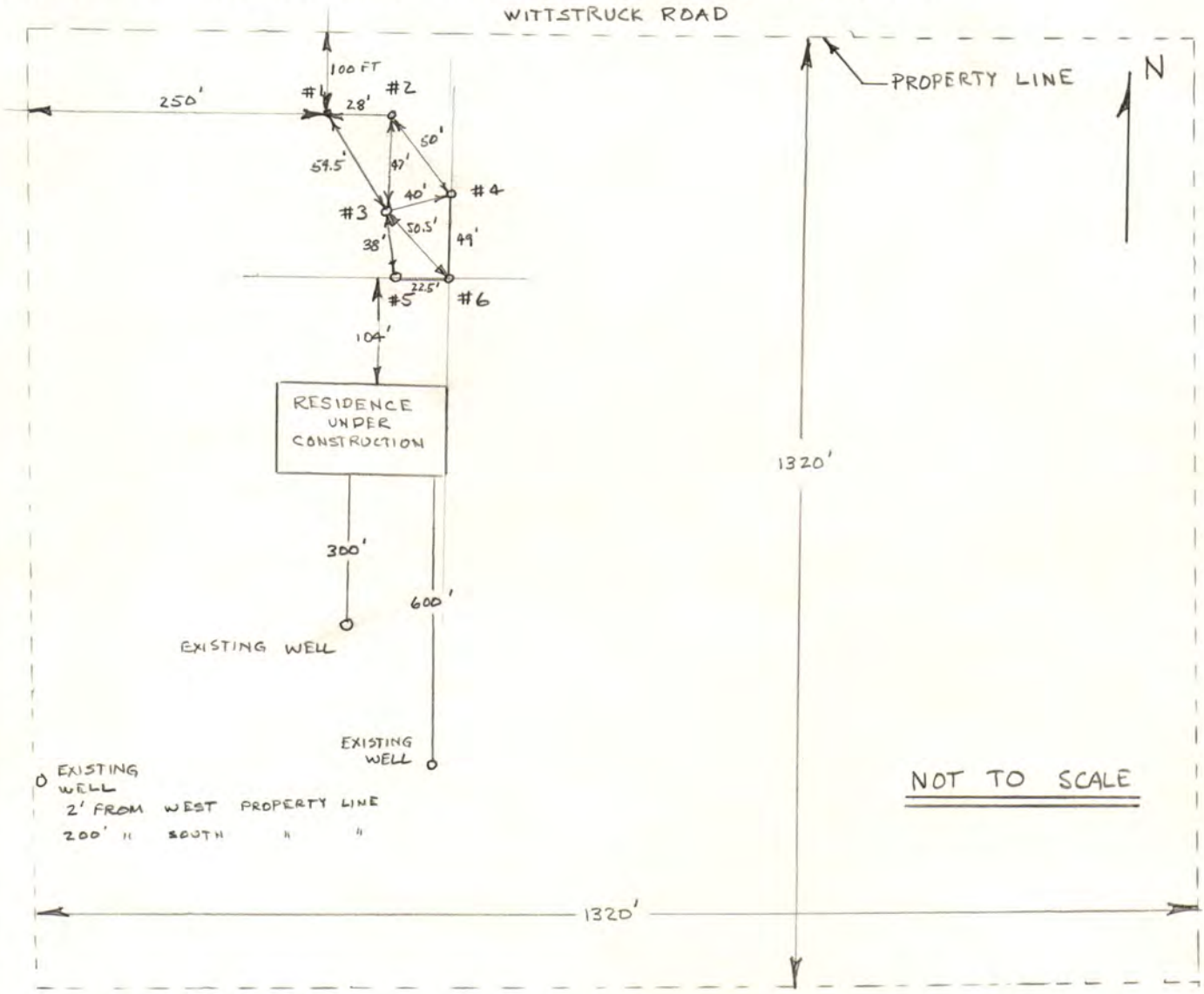
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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2200 St. Marys Avenue
Lincoln, Nebraska 68502
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C

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

FILE NO. 1676-C

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



REVIEWING ACTION

Remarks: _____

_____

Date: _____

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 938 sq.ft.

4 | 938 = 234

_____
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: _____

FILE NO. _____

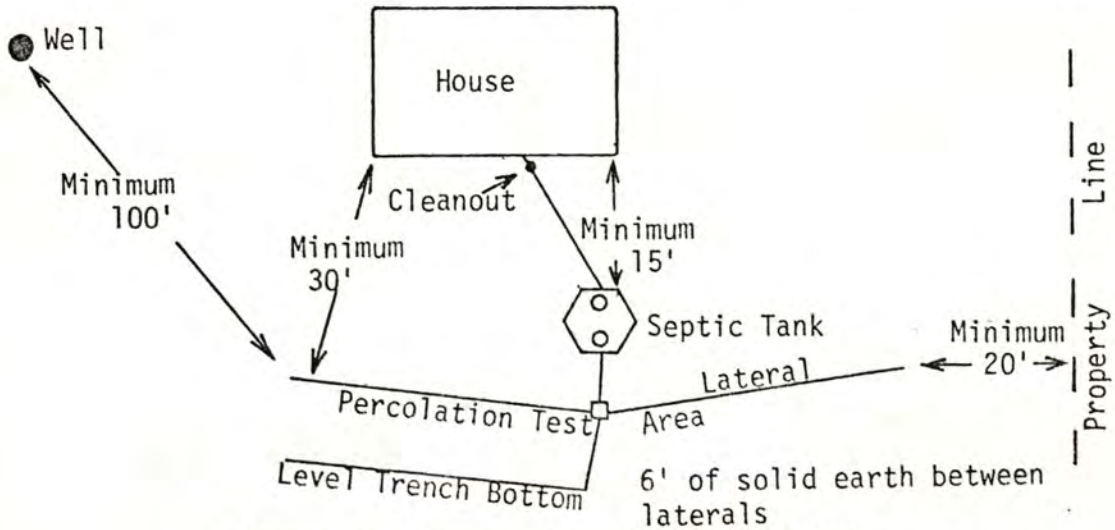
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 36 in.
3. Distance between dwelling and septic tank 100 ft.
4. Number of clean-outs _____.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Pre 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 12 in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Concrete ; Number - available outlets 5 .
2. Factory Built: Yes ☑ No ☐
(Company Pre Cast)
3. Distance from Septic Tank 2½ ft.

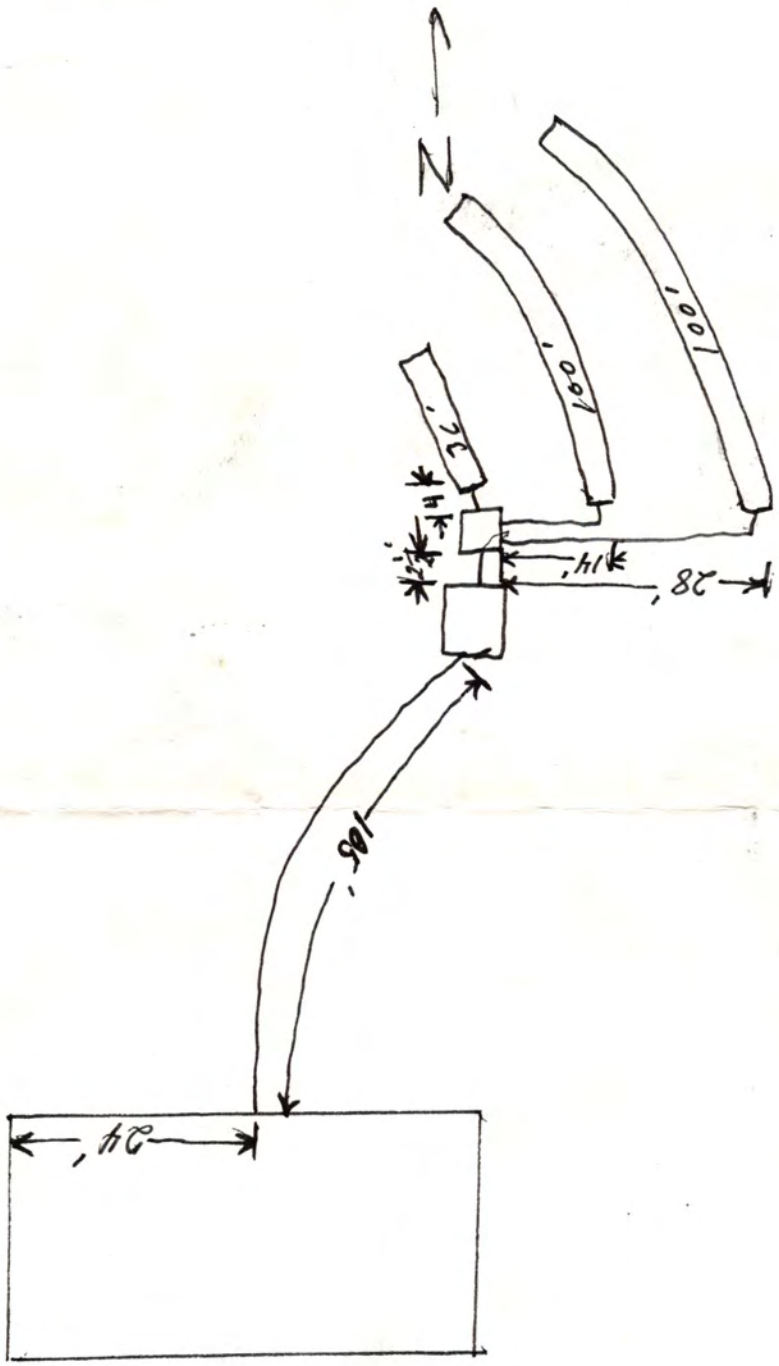
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☑ Perforated Pipe ☐
Diameter of Half Round 22 or Perforated Pipe _____.
Material: fiberglass ☐ ;plastic ☐ ; concrete ☑ ; other _____.
2. Lateral Lines:
Number 3 ;Length of each line 100 , 100 , 36 , _____ , _____ ft.;
Total length of laterals 236 ft.;
Distance between lateral lines 14 ft.
3. Trench dimensions: Width 40 ft.;
Slope _____ in/100 ft.; Average Depth 36 in.
4. Filter Material: Gravel
Depth of Material 24 in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE _____ INSTALLER _____



Capital City Trenching
8-25-80