LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1690-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

FEBRUARY 27, 1981 — THIS PERMIT EXPIRES

Neal Hinz by Biggerstaff Plumbing, — ISSUED TO

3605 North 40th, Lincoln NE 68504 — ADDRESS

T9N, R5E, Section 3 — 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. 1640-C

DATE: _____

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. SEE ATTACHED 9N ; Range 5E ; Section 3 ;
   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: _____ ft.

Douglas Bjorstad for Neal Hintz
Signature of Applicant (Owner or Lessee)

3605 N. 40
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/27/80. Date Frwd. 8/27/80. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: Paul Bouma

3. City or County Engineer: Date Rec'd. 8-27-80. Date Frwd. 8-27-80. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10/13/80 by: L.C.H.
Date: 10/14/80 by: L.C.H.
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 1/19/80 By: Jerrold C. Wood

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
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B

FILE NO. 1690-C

PROPERTY WHERE SOIL TESTED:

Location: Township_____; Range_____; Section & ¼ Section_____.
Property Dimensions: _____ ft. x _____ ft. Area: 5.25 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☒ ; Clay Loam ☒ .
Dates of Tests: 8-18-80 to 8-19-80. Weather: Precip. — Temp. 90°.

OWNER: Neal Hinz

Address: 4320 Edison Circle # 2

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	36"	8-18	2:30	8-19	2:30	8-19	2:30	18"	6:30	14 3/4	4 hrs	3 1/4	
2	36"	"	"	"	"	"	"	"	"	14 3/8	"	3 5/8	
3	36"	"	"	"	"	"	"	"	"	15 3/8	"	2 1/8	
4	36"	"	"	"	"	"	"	"	"	15 5/8	"	2 3/8	
5	36"	"	"	"	"	"	"	"	"	17	"	1"	
6	36"	"	"	"	"	"	"	"	"	12	"	6"	

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

Signature of Person Conducting Test

Address work: 3605 N 40 Phone 466-8118

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): ~~Sharpsburg Silty Clay Loam~~, ~~Shelby Clay Loam~~ Pawnee Clay Loam all in area
Date: August 27, 1980 confirmed

Approved Percolation Rate (a)
A. 40 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 ☐

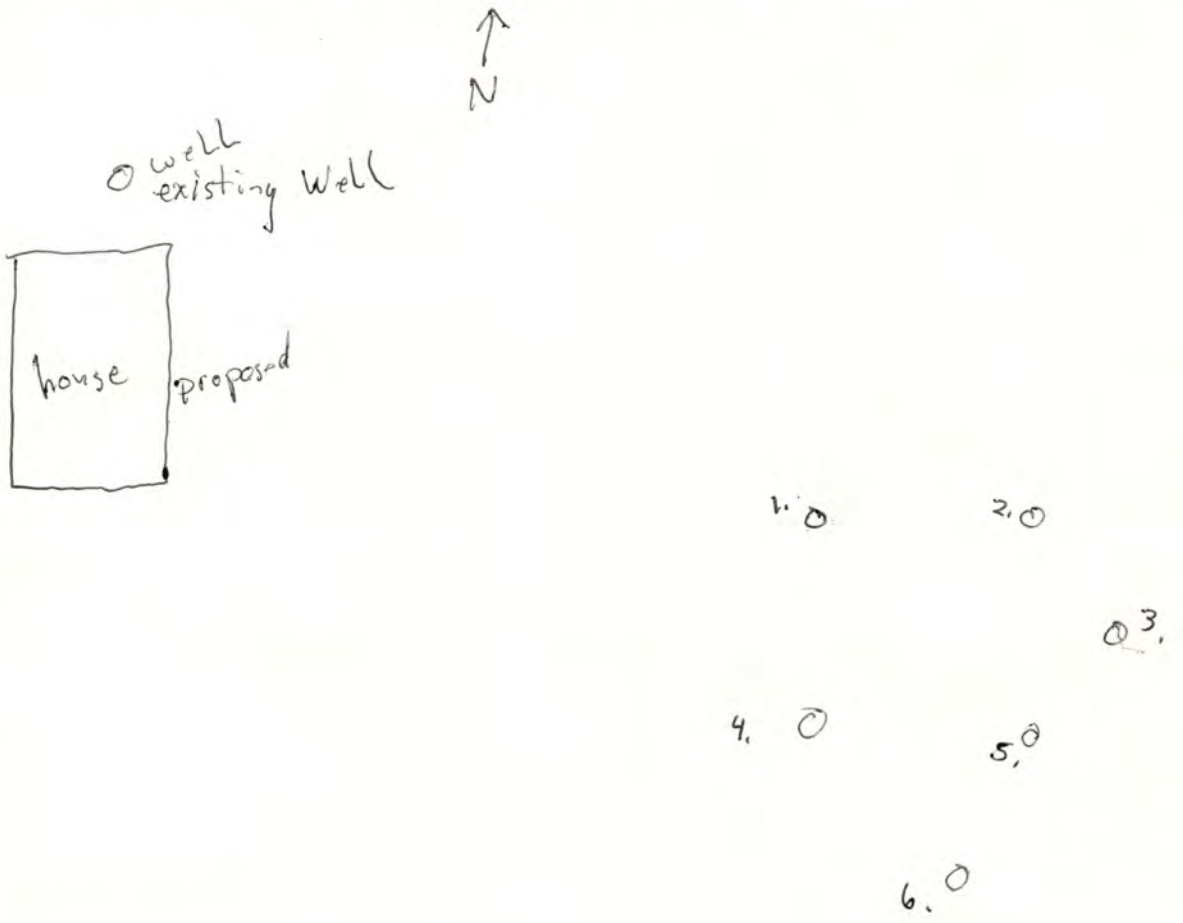
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

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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 ____ sq.ft.

_____
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. _____

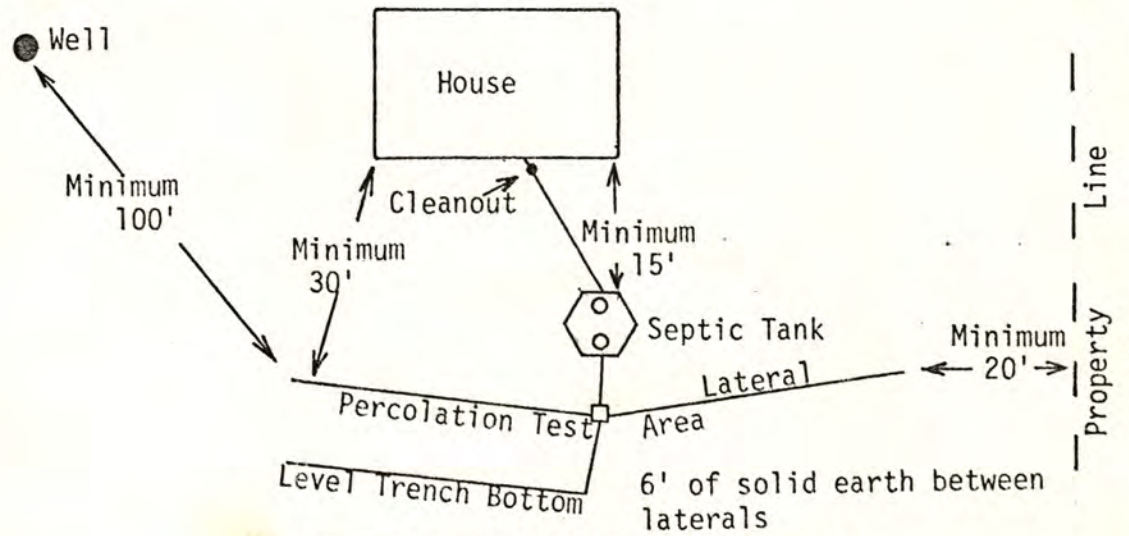
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 12 in.
3. Distance between dwelling and ~~septic~~ Lagoon tank 230 ft.
4. Number of clean-outs 4.
5. Distances to:
Well or Suction Line 250'+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 100'+ ft.

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

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



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Jerry Flood

Description of Survey

A tract of land located in Part of Lot 20, Irregular Tracts in the NE¼ of Section 3-Township 9 North-Range 5 East of the 6th P.M., Lancaster County is described as follows;

Referring to the Northeast corner of the East half, Northeast Quarter; thence So. 0°19' E, a distance of 1313.6 feet, thence No. 89°35'24" W, a distance of 689.64 feet, thence Northwesterly on the arc of a 15,596.30 foot radius curve to the right, an arc length of 30.01 feet to the point of beginning, thence So. 26'32" E, a distance of 378.6 feet, thence N 89°29'04" W, a distance of 601.06 feet, thence No. 0°22'09" W, a distance of 383.0 feet, thence Southeasterly on the arc of 17,704.83 foot radius curve to the right, central angle being 0°38'46", an arc length of 199.65 feet, thence So. 88°51'14" E, a distance of 230.93 feet, thence Easterly on the arc of a 15,596.30 foot radius curve to the left, central angle being ~~0°44'49"~~ 0°37'29.6" an arc length of 170.10 feet to the point of beginning.

Containing 5.25 acres more or less.

Property at 8601 Buckboard.

AS BUILT DRAWING OF SYSTEM

DATE Oct. 14, 80 INSTALLER Larry Schwanck

