# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 785-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

October 6, 1976 — THIS PERMIT EXPIRES

Elmer E. Snow — ISSUED TO

1003 South 34, Lincoln — ADDRESS

T8N; R8E; Sec. 27; — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

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

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. 785-C

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

DATE: _____

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PRE-EXISTING HOUSE

1. Legal description of property: Twp. 8N ; Range 8E ; Section 27
Block _____; Lot _____; Addition _____
Street Address Bennet 4½ 14th NSR See attached

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

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

4. Distance to public sewer: 4mi ~~ft.~~

Elmer E Snow
Signature of Applicant (Owner or Lessee)

1003 As 34 Lin
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 3/24/76. Date Frwd. 4/8/76. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood

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

3. City or County Engineer: Date Rec'd. 4/8/76. Date Frwd. 4/8/76. ACTION: Approved ☒ Disapproved ☐ Signature: Henry Graff

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. 785-C

DATE: _____

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. 8N ; Range 8E ; Section 27 ; Block _____ ; Lot _____ ; Addition _____.
Street Address Bennet 4So. ¼ W.

2. Property Use: Residential _____ ☒ ; 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).

Elmer E Lowe
Signature of Applicant (owner or lessee)

1003 Ln 37
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: March 25 76 by: _____
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒ ; Disapproved ☐ 3/24/76
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date March-25-76 by: Les Mayfield

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. 785-C

PROPERTY WHERE SOIL TESTED:
Location: Township 7 8N; Range 8E
Section & ¼ Sect. 27
Property Dimensions: 415 ft. x 562 ft.
Area: 5 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Elmer E Inman
Address 1003 So 34 Lincoln

Dates of Tests: 3-22-76 to 3-23-76. Weather: Precip. .75 Temp. 70 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 | 24 | 3-22 | 4:00 | 3-23 | 1200 | 3-23 | 1200 | 6" | 1230 | 5¼ | 30 | ¾ | |
| 2 | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | |

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

Signature of Person Conducting Test: Soil Service Co. 475-1486

Address 2425 So
Phone: 475-1486

(Do not write below this line)

REVIEWING ACTION

REMARKS:

Approved Percolation Rate(s)
A. 40 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: March 24, 1976

Signature of Reviewing Official: Jerrold C. Hood

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. 785-C

## SPECIFICATIONS

DATE: _____

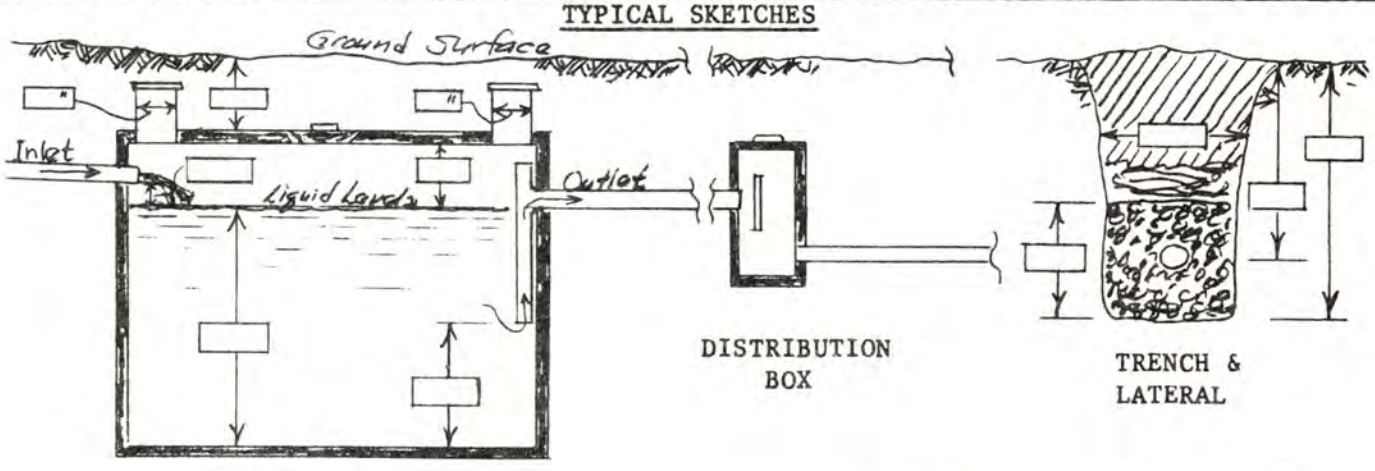
A. BUILDING SEWER:
1. Material Dia; Diameter 4 in.
2. Distance above basement floor NO in.; or below basement floor 17 in.
3. Distance between dwelling and septic tank 15 ft.
4. Number of clean-outs 1at House
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line 50 ft.;
Property Line 100 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Conc; No. of compartments 1.
2. Capacity 600 gals.; Liquid depth 51 in.
3. Factory Built: Yes ☒ (Company Pac) cast
No ☐
4. Manholes: Over Inlet; diam. 4 in.
Over Outlet; diam. 4 in.
Below Grade 8 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 8 in.
8. Distances To:
Well or Suction Line 50 ft.;
Stream NO ft.; Pressure Line 50 ft.;
Property Line 90 ft.

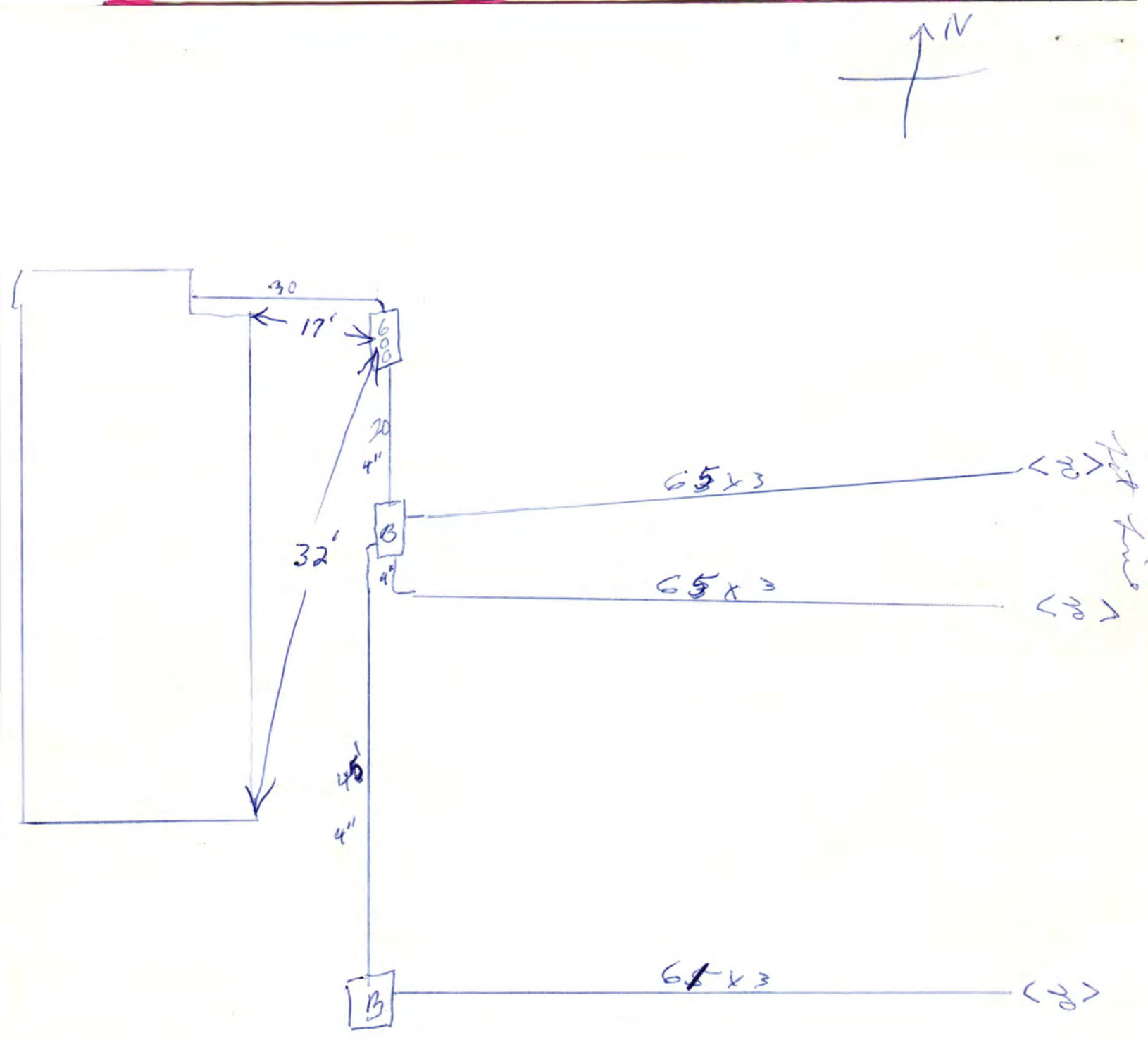
C. DISTRIBUTION BOX
1. Material ___; No. available outlets ___.
2. Factory Built: Yes ☒, (Company _____ No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 20 ft. 60 ?
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

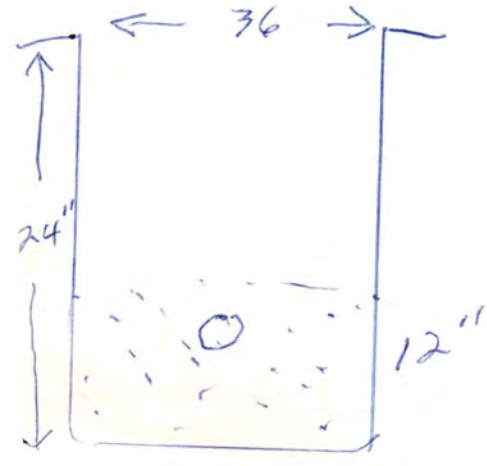
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___ in. Number 3; Length of each line ___ ft Total length of Laterals 191 ft.; Slope ___ in/100 ft. Diameter of pipe ___ in.; Shape _____ Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____ Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth ___ in.; Width 36 in.
4. Filter Material: GRAVEL. Depth of material from trench bottom ___ in.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line 100 ft.
Property Line 20 ft.
6. Percolation Rate: 40 minutes/inch

## TYPICAL SKETCHES




Elmer E Jones
Signature of Applicant


N
30
17'
600
20
4"
32'
65 x 3
<2>
B
4"
65 x 3
<2>
45'
4"
B
65 x 3
<2>


36
24"
12"

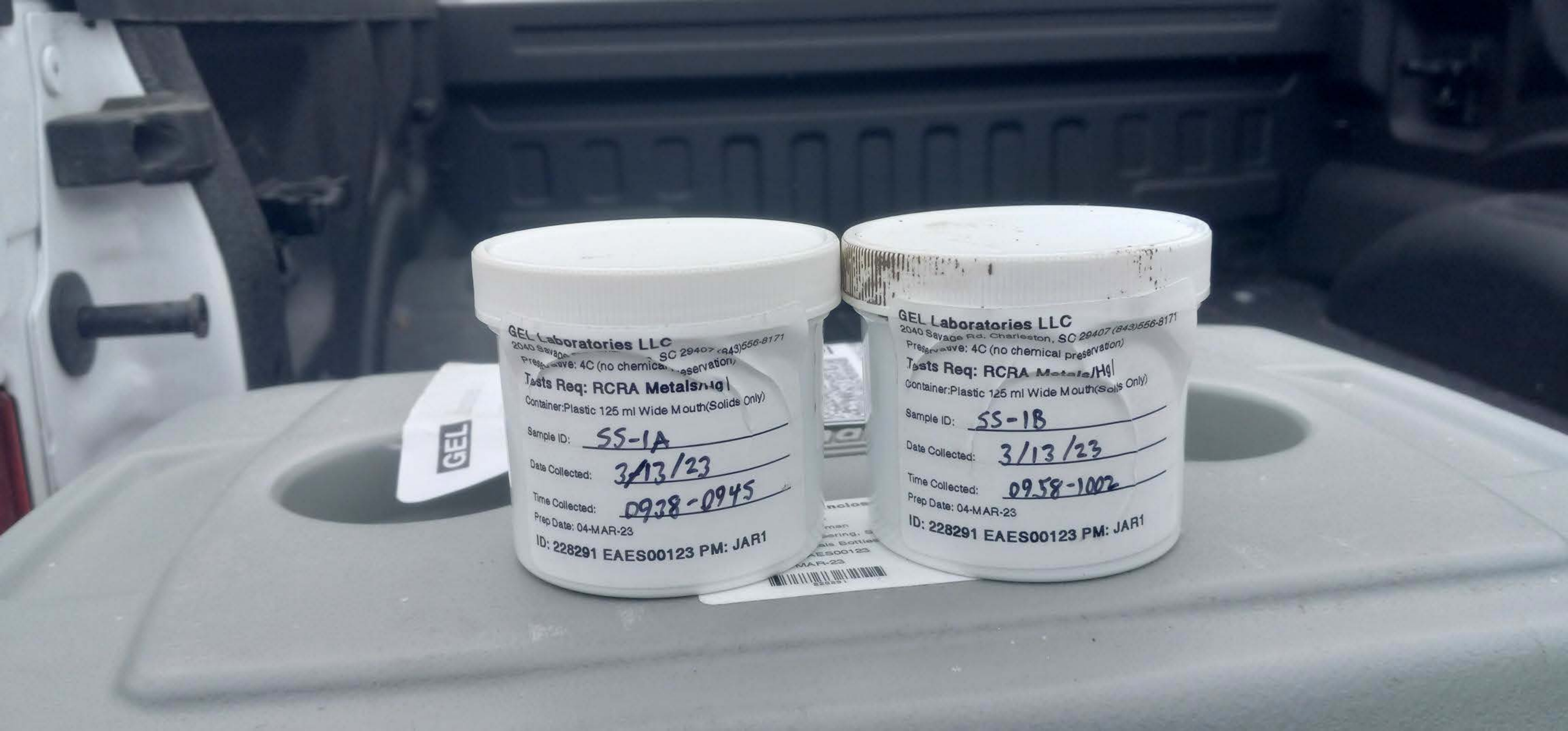



WARNING: TO AVOID DANGER OF SUFFOCATION,
KEEP THIS PLASTIC BAG AWAY FROM BABIES AND
CHILDREN. DO NOT USE THIS BAG IN CRIBS, BEDS,
CARRIAGES, OR PLAYPENS. THIS BAG IS NOT A TOY.




Coleman
Coleman
USA
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PERSONAL COOLER | HIELERA | GLACIÈRE
3
DAYS | DÍAS | JOURS
KEEPS THE ICE
48
CANS
CANETTES
20
QT
L
CUSTODY SEAL




GEL Laboratories LLC
2040 Savage Rd. Charleston, SC 29407 (843)556-8171
Preservative: 4C (no chemical preservation)
Tests Req: RCRA Metals/Hg
Container:Plastic 125 ml Wide Mouth(Solids Only)
Sample ID: SS-1A
Date Collected: 3/13/23
Time Collected: 0938-0945
Prep Date: 04-MAR-23
ID: 228291 EAES00123 PM: JAR1
GEL Laboratories LLC
2040 Savage Rd. Charleston, SC 29407 (843)556-8171
Preservative: 4C (no chemical preservation)
Tests Req: RCRA Metals/Hg
Container:Plastic 125 ml Wide Mouth(Solids Only)
Sample ID: SS-1B
Date Collected: 3/13/23
Time Collected: 0958-1002
Prep Date: 04-MAR-23
ID: 228291 EAES00123 PM: JAR1

