FILE # 2794

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

6 MONTHS — THIS LICENSE OR PERMIT EXPIRES

JEFFREY K. MILLS 3235 SO. 14TH #1 — LICENSEE OR PERMITTEE

LINCOLN, NE 68502 — ADDRESS

T9N; R6E; Lot 5; Loves Addition — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	018754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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

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: $ 60 00

FILE NO. 2794

DATE: Nov 17th, 1988

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. 9 N ; Range 6 EAST ; Section 3 SE ¼ ;
   Block _____ : Lot 5 : Addition Loves ADDITION
   Street Address SW 2nd

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: ½ mile ft.

Jeffrey H Mills
Signature of Applicant (Owner or Lessee)

3235 So 14th #1 Lincoln 68502
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 1/20/89. Date Frwd. 1/23/89. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Wood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 1/23/89. Date Frwd. 1/23/89 ACTION: Approved ☒ Disapproved ☐ Signature: Mel Goddard
3. City or County Engineer: Date Rec'd. 1-23-89. Date Frwd. 1-23-89. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 5-15-89 by: [signature]
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 5-15-89 By: Ron Morgan

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
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9 ; Range 6 East ; Section & ¼ Section 3 SE ¼.
Property Dimensions: 257.4 ft. x 299 ft. Area: @ 1.78 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: Nov 17, 1988 to Nov. 18, 1988 . Weather: Precip. _____ Temp. 40° .

OWNER: After Nov. 30th Jeff Mills

Address: 3235 So 14th #1 Lincoln 68502

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	11-17	10:15	11-18	10:00	11-18	11:05	6	3:05	4 7/8	30	1 1/8	1.125
2	36	11-17	10:30	11-18	10:00	11-18	11:05	6	3:05	5 1/4	30	3/4	.75
3	36	11-17	10:45	11-18	10:00	11-18	11:05	6	3:05	4 15/16	30	1 1/16	1.0625
~~4~~	~~36~~	~~11-17~~	~~11:00~~	~~11-18~~	~~10:00~~	~~11-18~~	~~11:05~~	~~6~~	~~3:05~~	~~5 3/4~~	~~30~~	~~1/4"~~	~~.25~~ 1.25
5	36	11-17	11:30	11-18	10:00	11-18	11:05	6	3:05	5 5/8	30	3/8"	.3750 1.0
~~6~~	~~36~~	~~11-17~~	~~11:45~~	~~11-18~~	~~10:00~~	~~11-18~~	~~11:05~~	~~6~~	~~3:05~~	~~5 5/8~~	~~30~~	~~3/8"~~	~~.3750~~ 1.125
													.39375
7	36	11-18	4:30	11-19	8:00	11-19	9:00	6	1:00			1 1/4	
8	36	11-18	4:30	11-19	8:00	11-19	9:00	6	1:00				
9	36	11-18	4:30	11-19	8:00	11-19	9:00	6	1:00				

6 | 3.94 (6.6)
3.6
.34

Sum of Percolation Rates: 1.05
Average of Rates: _____
Mean of Rates: _____

Jeff Mills
Signature of Person Conducting Test

Address 3235 So 14th #1 Phone 421-1326

(Do not write below this line)

REVIEWING ACTION

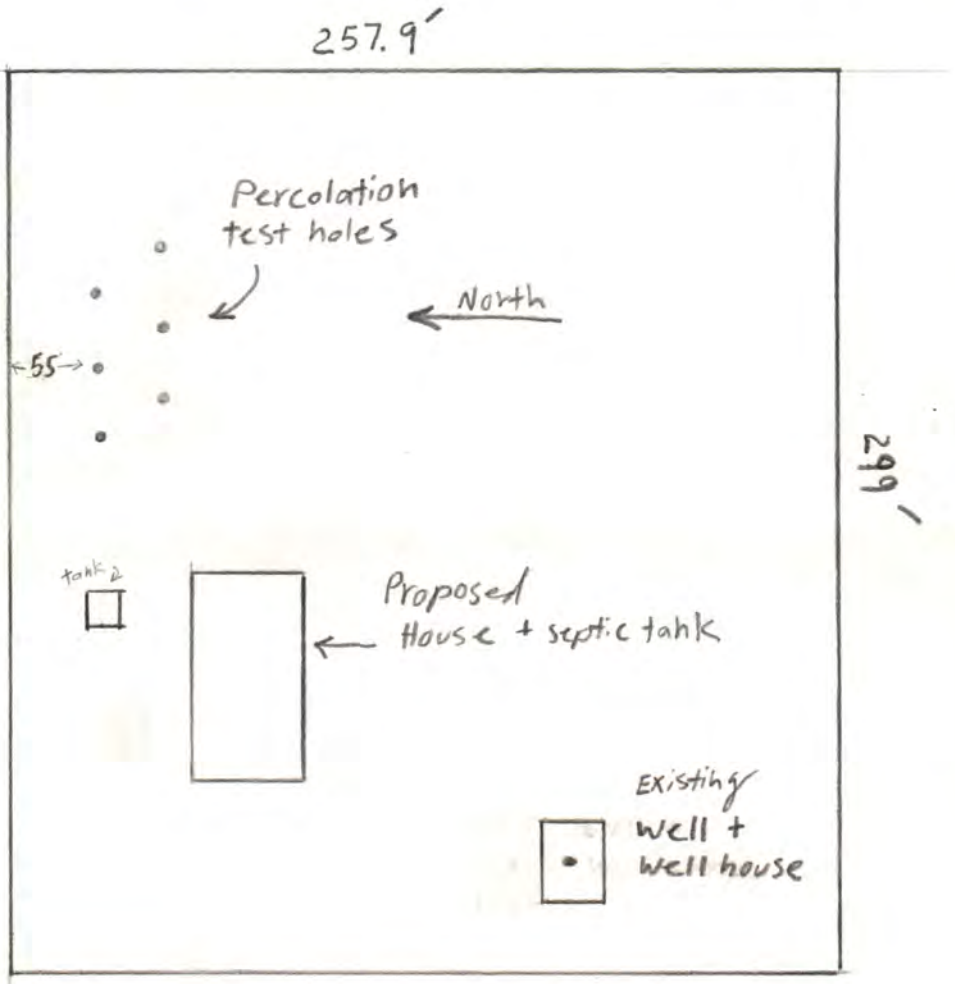
Remarks: _____
Soil Type (SCS): Judson Silt Loam
Date: January 20, 1989

Approved Percolation Rate (a)
A. ~~45~~ 30 min./inch
B. _____ min./inch
C. _____ min./inch

Ron Marquardt
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: 471-7800 **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: _____

Minimum Design Requirement

1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 447 298 ft.
3. With a Trench Width of 24 36 in.
4. Total Area of Lateral needed 893 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
Phone: 471-7800

D

DATE: _____

FILE NO. _____

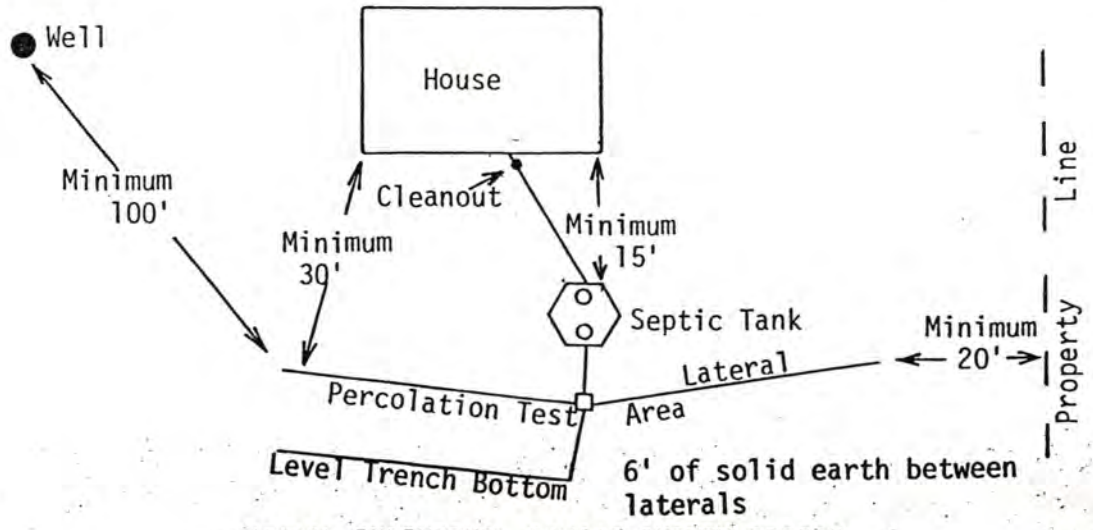
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Sch 40 ; Diameter 4" in.
2. Distance above basement floor _____ in., or below basement floor 8" in.
3. Distance between dwelling and septic tank 28 ft.
4. Number of clean-outs 1 .
5. Distances to:
Well or Suction Line 180 ft.; Stream _____ ft.; Pressure Line 12' ft.; Property Line 30' ft.

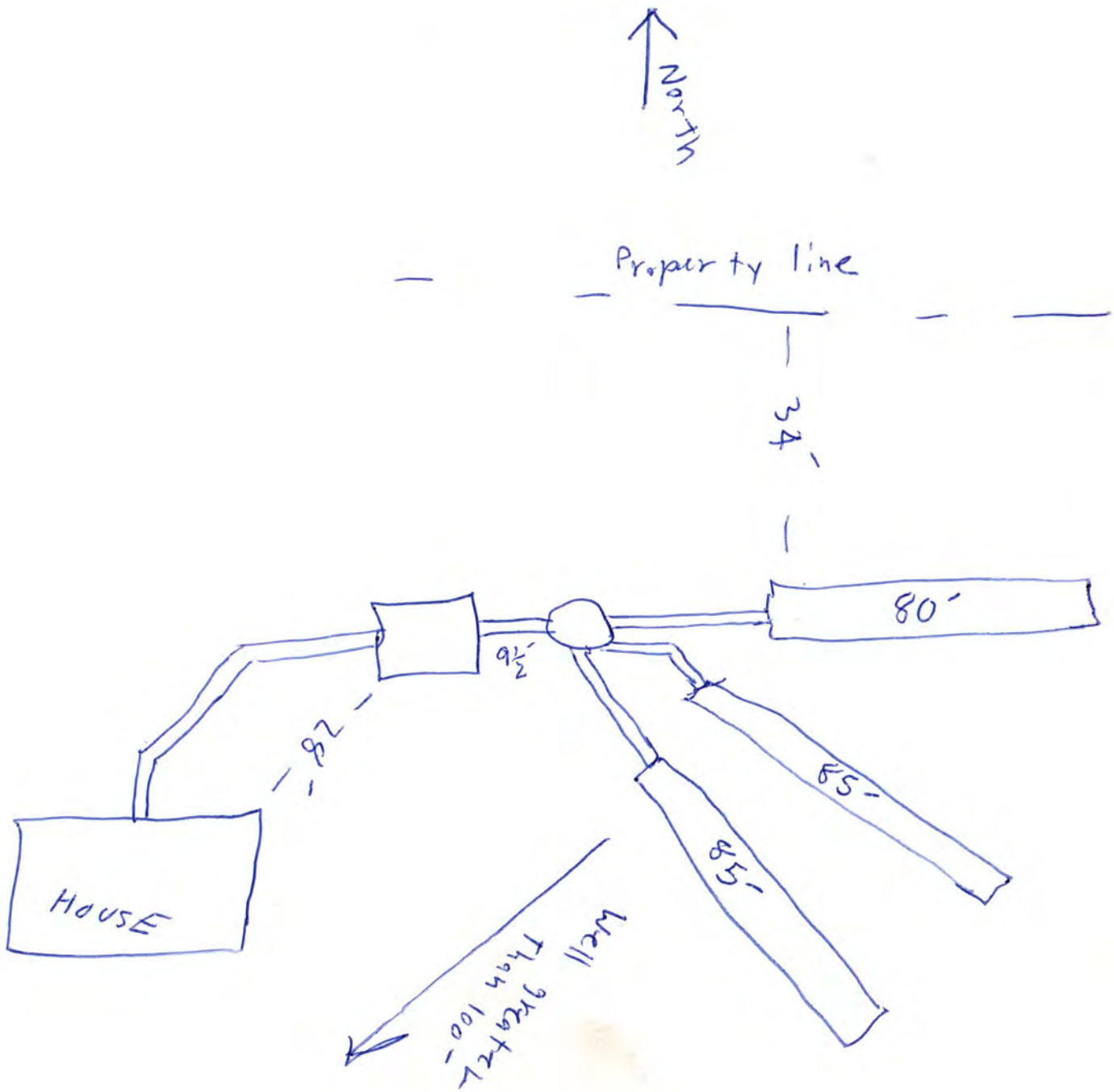
B. SEPTIC TANK:
1. Material Concrete ; No. of compartments 1 .
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Precast Step)
4. Manholes: Over Inlet; diam. 6" in.
Over Outlet; diam. 10" in.
Riser Above ☐ Below ☒ Grade 8" in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 12" in.
8. Distances to:
Well or Suction Line 225 ft.; Stream _____ ft.; Pressure Line 52" ft.; Property Line 34 ft.

C. DISTRIBUTION BOX:
1. Material concrete ; Number - available outlets 3 .
2. Factory Built: Yes ☒ No ☒
(Company _____)
3. Distance from Septic Tank 9½ ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 20" or Perforated Pipe _____ .
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other _____ .
2. Lateral Lines:
Number 3 ; Length of each line 85 , 85 , 80 , _____ , _____ ft.;
Total length of laterals 250' ft.;
Distance between lateral lines 6 ft.
3. Trench dimensions: Width 40" ft.;
Slope 1/16 Pr' in/100 ft.; Average Depth 48" in.
4. Filter Material: Road gravel
Depth of Material 28" in.
5. Distances to:
Well or Suction Line 240' ft.; Stream _____ ft.; Pressure Line 71 ft.; Property Line 32' ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


North
Property line
34'
80'
9½"
28'
HOUSE
85'
85'
Well 9x9x42 Thin 100'