LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 93380106701

Issued 09/22/93
Expires 03/22/94
Revenue Code 108754

Establishment
LEROY MEINTS
T9N R6E SEC 3
PARK RIDGE HEIGHTS BLK 2 LOT 1

FEES: $150.00

TOTAL $150.00

Permittee
LEROY MEINTS
1201 W BURNHAM ST
LINCOLN NE 68522

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

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: Sept. 21-1993

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. 9N ; Range 6E ; Section 3 ;
   Block 2 : Lot 1 : Addition Park Ridge Heights 1st add
   Street Address ~~535 Tower Road~~ 4220 So. Folsom

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.

LeRoy Meints
Signature of Applicant (Owner or Lessee)

1201 W. Burnham
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/21/93. Date Frwd. 9/22/93. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd._____. Date Frwd._____. ACTION: Approved ☒ Disapproved ☐ Signature: Norm
3. City or County Engineer: Date Rec'd. 9-22-93. Date Frwd. 9-22-93. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 12-7-93 by: PD Need drawing Received 1-20-94
Date:_____ by:_____
Date:_____ by:_____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 1-20-94 By: Paul Bowman

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

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: Folsom & Tower Road

Location: Township _____; Range _____; Section & ¼ Section _____.
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: Sept. 3-93 to Sept. 4-93. Weather: Precip. 0 Temp. 70.

OWNER: LeRoy Meints

Address: 1201 W. Burnham

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"	9-3	5:00	9-4	5:00	9-4	8:30	6"	9:00	4 3/8	30	1 5/8	
2	36"	9-3	5:00	9-4	5:00	9-4	8:30	6"	9:00	5	30	1	
3	36"	9-3	5:00	9-4	5:00	9-4	8:30	6"	9:00	5 1/8	30	7/8	
4	36"	9-3	5:00	9-4	5:00	9-4	8:30	6"	9:00	4 1/2	30	1 1/2	
5	36"	9-3	5:00	9-4	5:00	9-4	8:30	6"	9:00	5 1/4	30	3/4	
6	36"	9-3	5:00	9-4	5:00	9-4	8:30	6"	9:00	5 1/2	30	1/2	

LeRoy Meints
Signature of Person Conducting Test

Address 1201 W. Burnham Phone 423-5294

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: SEPTEMBER 10, 1993

Approved Percolation Rate (a)
A. 28 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold 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 ☐

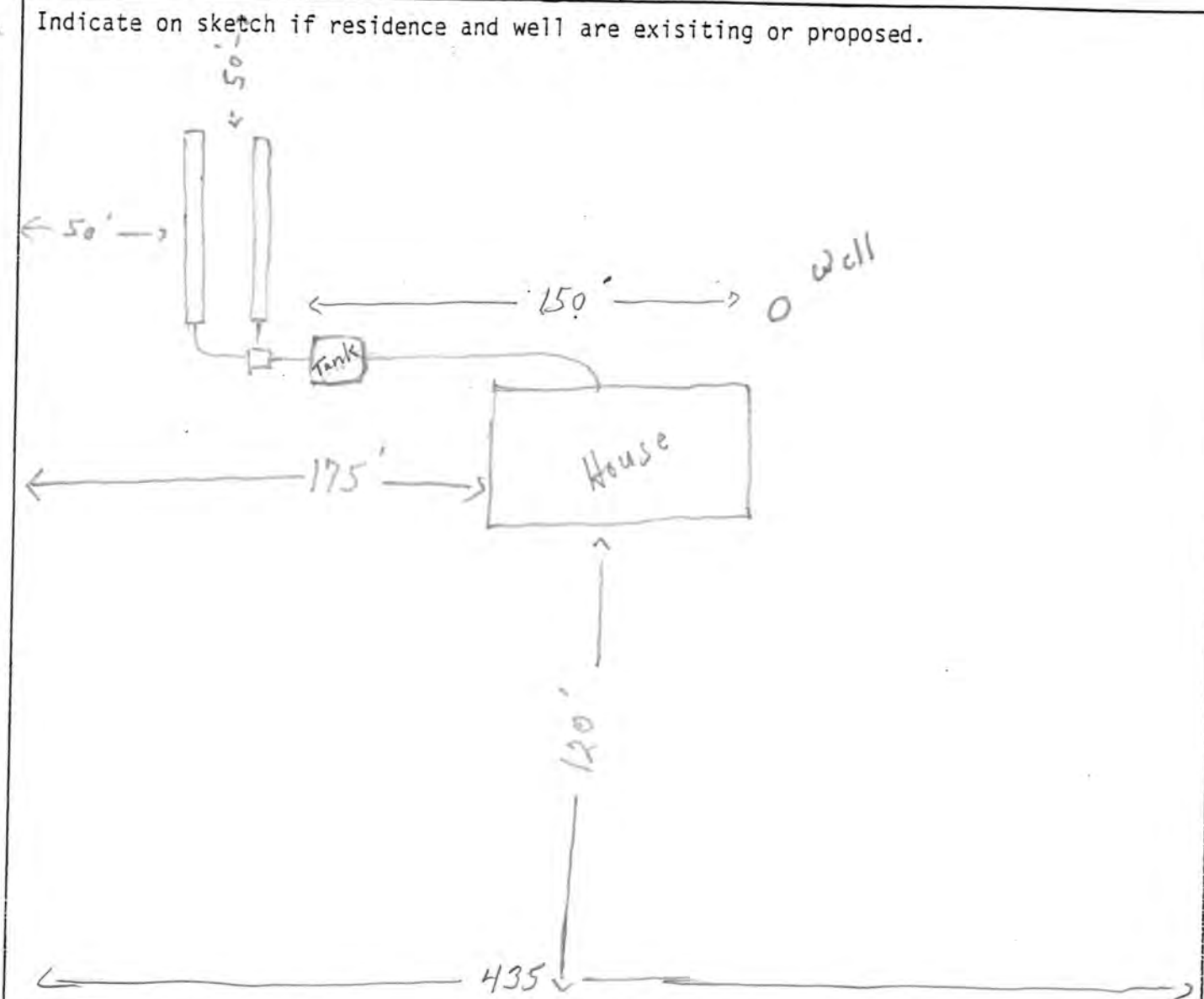
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Lincoln, Nebraska 68502
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C

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

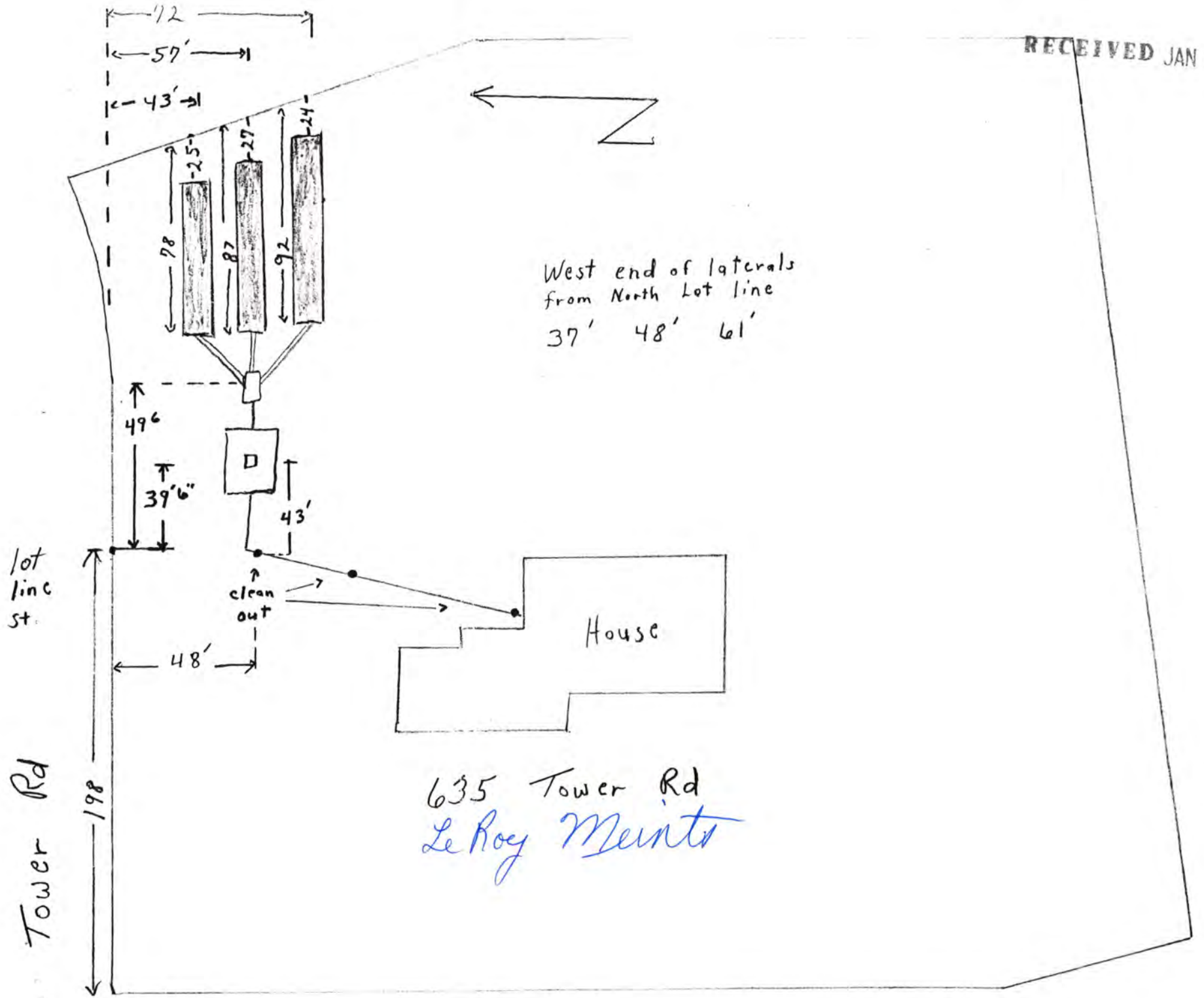
Remarks: _____

Date: SEPTEMBER 10, 1993

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 181 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 725 sq.ft.

Jerrold C. Wood
Signature of Reviewing Official

RECEIVED JAN 2 0 1994



635 Tower Rd

LeRoy Meints

Folsom