FILE NO. 445

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

November 14, 1974 — THIS LICENSE OR PERMIT EXPIRES

Billy Bruce — LICENSEE OR PERMITTEE

Rt. #2, Box 119, Shatluck Oklahoma — ADDRESS

T9N; R6E; Sec. 4; Lot 22 & 23 I.T.

NAME OF ESTABLISHMENT, IF ANY — LEGAL DESCRIPTION — ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-110.15	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

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

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._____

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: The west 198' of Lot 22 + the East 10' of Lot 23 Stockwell, located upon the N½ SE¼ + SE¼ of the SE¼ of Section 4, Twn 9 north Rng 6

1. Legal description of property: Twp. 9N ; Range 6E; Section 4
Block_____; Lot 22 + 23 ; Addition_____
Street Address_____

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: unknown ft.

Billy J Brown
Signature of Applicant (Owner or Lessee)

Rt 2 Box 119 Shattuck, Okla 73858
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/14/74. Date Frwd. 5/14/74. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 5/14/74. Date Frwd. 5/14/74. ACTION: Approved ☒ Disapproved ☐ Signature: Chas Safely Bld Insp

3. City or County Engineer: Date Rec'd. 5/14/74. Date Frwd._____. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible] Smith

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 [X]
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._____

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. 9N; Range E; Section 4
; Block ; Lot 7 & 23; Addition .
Street Address .

2. Property Use: Residential [X]; Commercial [ ]
No. of Bedrooms 2
Describe:

Other Use
Describe:

3. Type of Individual Sewage Disposal System: Septic Tank [X]; 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).

Billy R Bowers
Signature of Applicant (owner or lessee)

Rt 2 Box 119 S Hattuck, Okla
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 10-16-78 by: JW
Date: by:
Date: by:

3. Date: Approved [X]; Disapproved [ ] 5/14/74
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: by:

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. _____

PROPERTY WHERE SOIL TESTED:
Location: Township _____; Range _____
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: _____
Address _____

Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: _____ to _____. Weather: Precip. _____ Temp. ___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	5/12	3:00	5/12	8:00	5/13	2:30	7	3:00	5	30	2	
2	24	5/12	3:00	5/12	8:00	5/13	2:30	7	3:00	5	30	2	
3	24	5/12	3:00	5/12	8:00	5/13	2:30	7	3:00	5	30	2	
4	24	5/12	3:00	5/12	8:00	5/13	2:30	7	3:00	5	30	2	
5	24	5/12	3:00	5/12	8:00	5/13	2:30	7	3:00	4¼	30	1¾	
6	24	5/12	3:00	5/12	8:00	5/13	2:30	7	3:00	5	30	2	

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

_____
Signature of Person Conducting Test

Address _____
Phone: _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 15 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: May 14, 1974

Gerrold C. Hood
Signature of Reviewing Official

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. _____

SPECIFICATIONS

DATE: _____

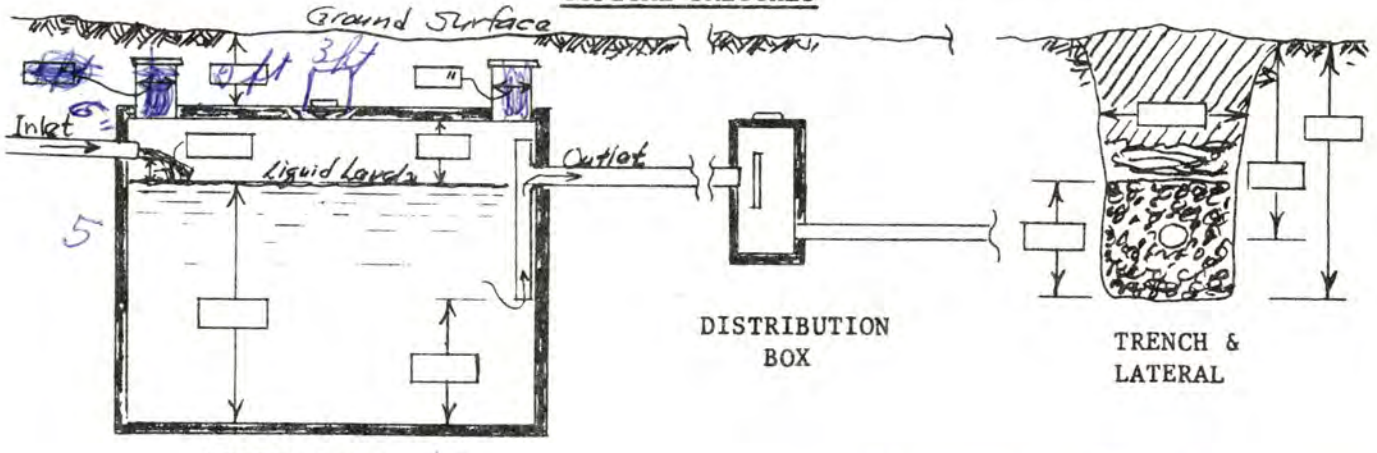
A. BUILDING SEWER:
1. Material Block sewer pipe; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 6 in.
3. Distance between dwelling and septic tank 100 ft.
4. Number of clean-outs 2.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 110 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Block; No. of compartments 1.
2. Capacity 750 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☐ (Company _____)
No ☒
4. Manholes: Over Inlet; diam. 16 in.
1 center 3 ft Over Outlet; diam. 6 in.
Below Grade ___ in.
5. Inlet: Baffle ☐; or Tee ☒ straight
6. Outlet: Baffle ☐; or Tee ☒
Depth of outlet below inlet ___ in.
7. Depth of top of tank below finished grade 2 ft in.
8. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

C. DISTRICTION 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 15 ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ORANGEBURG
2. Lateral Lines: Depth below grade 24 in.
Number 2; Length of each line ___ ft
Total length of Laterals 127 ft.;
Slope 4 in/100 ft. Diameter of pipe 4 in.; Shape ROUND
Material: concrete ☐; fiber asbestos ☒; clay ☐; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth 24 in.;
Width 36 in.
4. Filter Material: GRAVEL.
Depth of material from trench bottom 6 in.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line ___ ft.
6. Percolation Rate: _____ minutes/inch

TYPICAL SKETCHES



SEPTIC TANK 10

Billy P Bruce
Signature of Applicant