FORM HD-32(67) APPLICATION FOR PERMIT
TO CONSTRUCT INDIVIDUAL SEWAGE
DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 172

DATE: 10/19/70

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 Lincoln City Ordinance No. 9150, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N; Range 6E; Section 5;
Block _____; Lot _____; Addition _____;
Street Address PIONEER GOLF COURSE

2. Property Use: Residential _____ ☐; Commercial _____ ☐
No. of Bed Rooms _____ Describe: _____

Other Use _____ ☑
Describe: GOLF MAINTENANCE BUILDING

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

4. Plans and Specifications of Proposed System. (See FORM HD-32a(67) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT, attached hereto.)

Bee-Jay Plumbing & Heating Inc.
Signature of Applicant (owner or lessee)

510 Washington St. Lincoln Nebr
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ No fee

2. Date Site Clearance _____

3. Site Visits:
Date: 10/21/70 by: J.C.H. & L.W.
Date: 10/22/70 by: L.W.
Date: _____ by: _____

4. Date: Approved ☒; Disapproved ☐: 10/21/70
by: Jerrold E. Hood

5. BUREAU OF LICENSES & PERMITS
Date Notified: _____
Date Issued: _____ Serial _____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/22/70 by: Jerrold E. Hood

FORM HD-30(67) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 172

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

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described herein:

1. Legal description of property: Twp. 9N; Range 6E; Section 5;
Block ____; Lot ____; Addition ____;
Street Address PIONEER GOLF COURSE

2. Property Use: Residential ____ ☐; Commercial ____ ☐
No. of Bedrooms ____. Describe: ____

Other Use ____ ☒
Describe: GOLF MAINTENANCE BLDG

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

4. Distance to public sewer: ____ ft.

FOR CITY OF LINCOLN
BEE-JAY PLUMBING & HEATING INC.
Signature of Applicant (owner or lessee)

510 WASHINGTON ST.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/19/70. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 10/21/70. Signature: Gerrald C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 10-21-70. ACTION: Approved ☐ Disapproved ☒
Date Frwd. 10-21-70. Signature: Chas Seals By Bob Skinner

3. City Engineer: Date Rec'd. ____. ACTION: Approved ☐ Disapproved ☐
Date Frwd. 10-21-70. Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL ____

FINAL ACTION ON SITE CLEARANCE: Approved ☐ Disapproved ☐

Date Applicant Notified: ____ Signature ____

FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 172

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

Owner: City of Lincoln
Address Pioneer Golf course

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

Dates of Tests: Oct 15, 1970 to Oct 16, 1970. Weather: Precip. 720 Temp. 60° 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	36"	10/15	2 PM	10/16	2PM	10/16	2PM	6"	2:30PM	3"	30	3	30min 3"
2	36"	〃	〃	〃	〃	〃	〃	〃	〃	1"	〃	5	30min 5"
3	36"	〃	〃	〃	〃	〃	〃	〃	〃	0	〃	6	30min 6"
4	36"	〃	〃	〃	〃	〃	〃	〃	〃	1	〃	5	30min 5"
5	36"	〃	〃	〃	〃	〃	〃	〃	〃	0	〃	6	30min 6"
6	36"	〃	〃	〃	〃	〃	〃	〃	〃	0	〃	6	30min 6"

Bee-Jay Plbg & Htg INC.
Signature of Person Conducting Test

Address 510 Washington St.
Phone: 435-6141

Sum of Percolation Rates 30min 31"
Average of Rates: 5
Mean of Rates:

(Do not write below this line)

REVIEWING ACTION

REMARKS: Seems rather fast for Silty Clay Loam. However, system is sized considerably above load of 30 persons per day.

DATE: October 20, 1970

Approved Percolation Rate(s)
A. 6.0 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 172

SPECIFICATIONS

DATE: 10/19/70

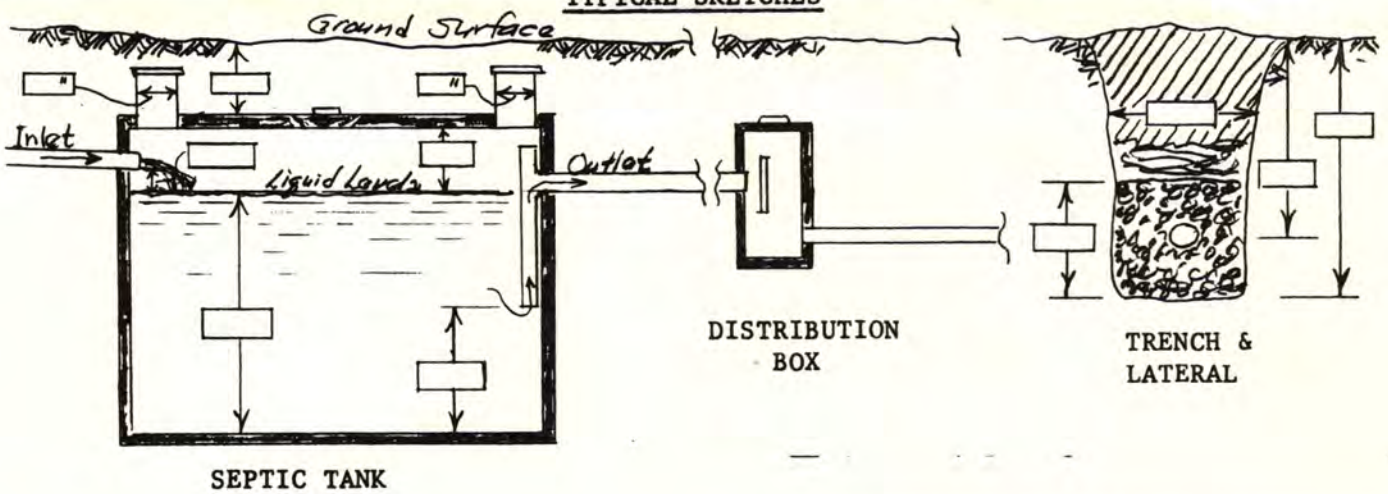
A. BUILDING SEWER:
1. Material C.I.; Diameter 4" in.
2. Distance above basement floor ___ in.; or below basement floor ___ in. (2' Below Slab)
3. Distance between dwelling and septic tank 10 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line — ft.;
Stream — ft.; Pressure Line ___ ft.;
Property Line — ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material PRECast; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 47 in.
3. Factory Built: Yes [X] (Company PRE-Cast Step)
No [ ]
4. Manholes: Over Inlet; diam. 24 in.
Over Outlet; diam. ___ in.
Below Grade 0 in.
5. Inlet: Baffle [ ]; or Tee [ ]
6. Outlet: Baffle [ ]; or Tee [X]
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 18" in.
8. Distances To:
Well or Suction Line — ft.;
Stream — ft.; Pressure Line ___ ft.;
Property Line — ft.

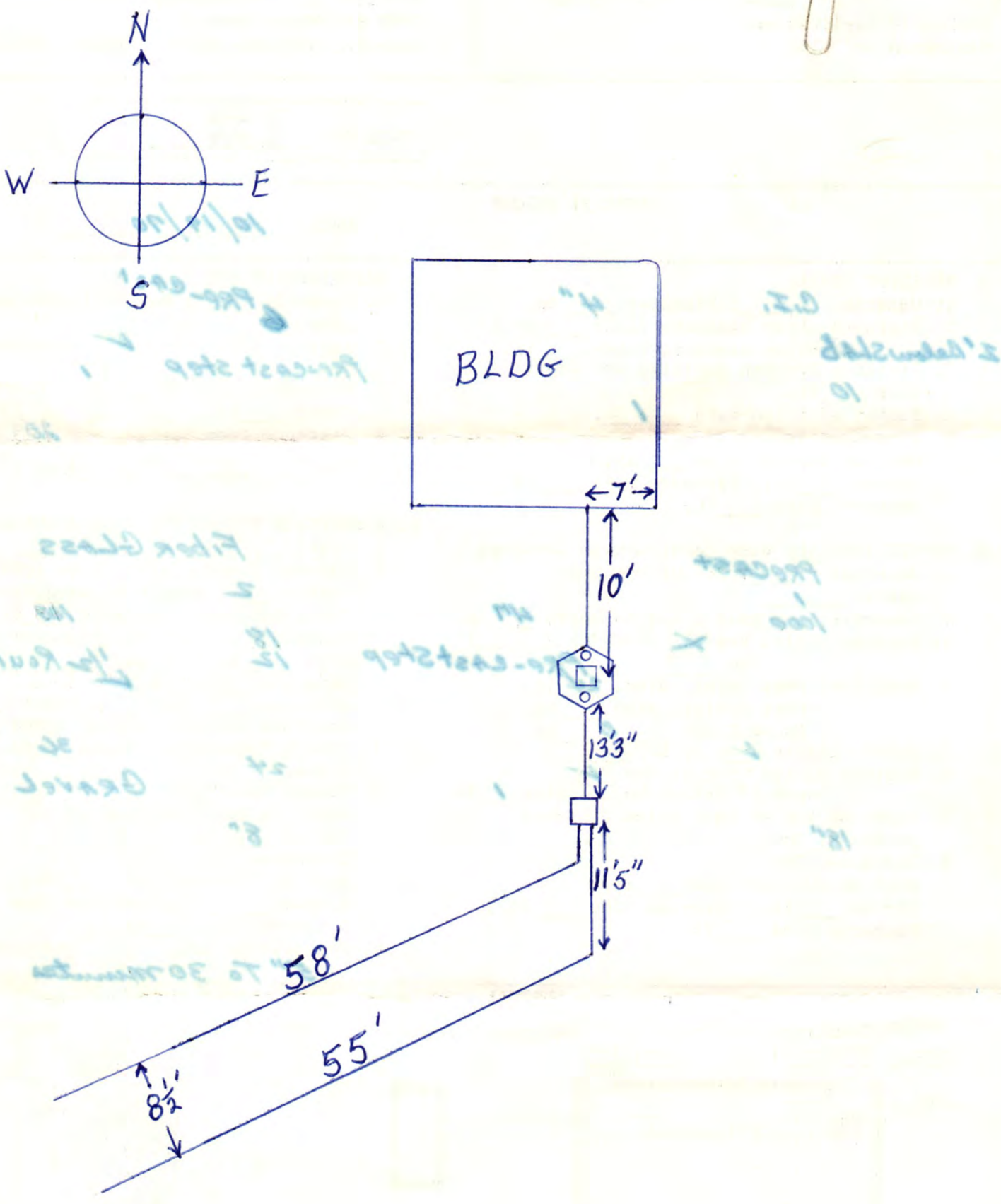
C. DISTRIBUTION BOX
1. Material PRE-Cast; No. available outlets 6.
2. Factory Built: Yes [X], (Company PRE-Cast Step) No [ ]
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 13'11" ft.
5. Serial Distribution: Yes [ ], No [X] (If yes, show detailed plans.)

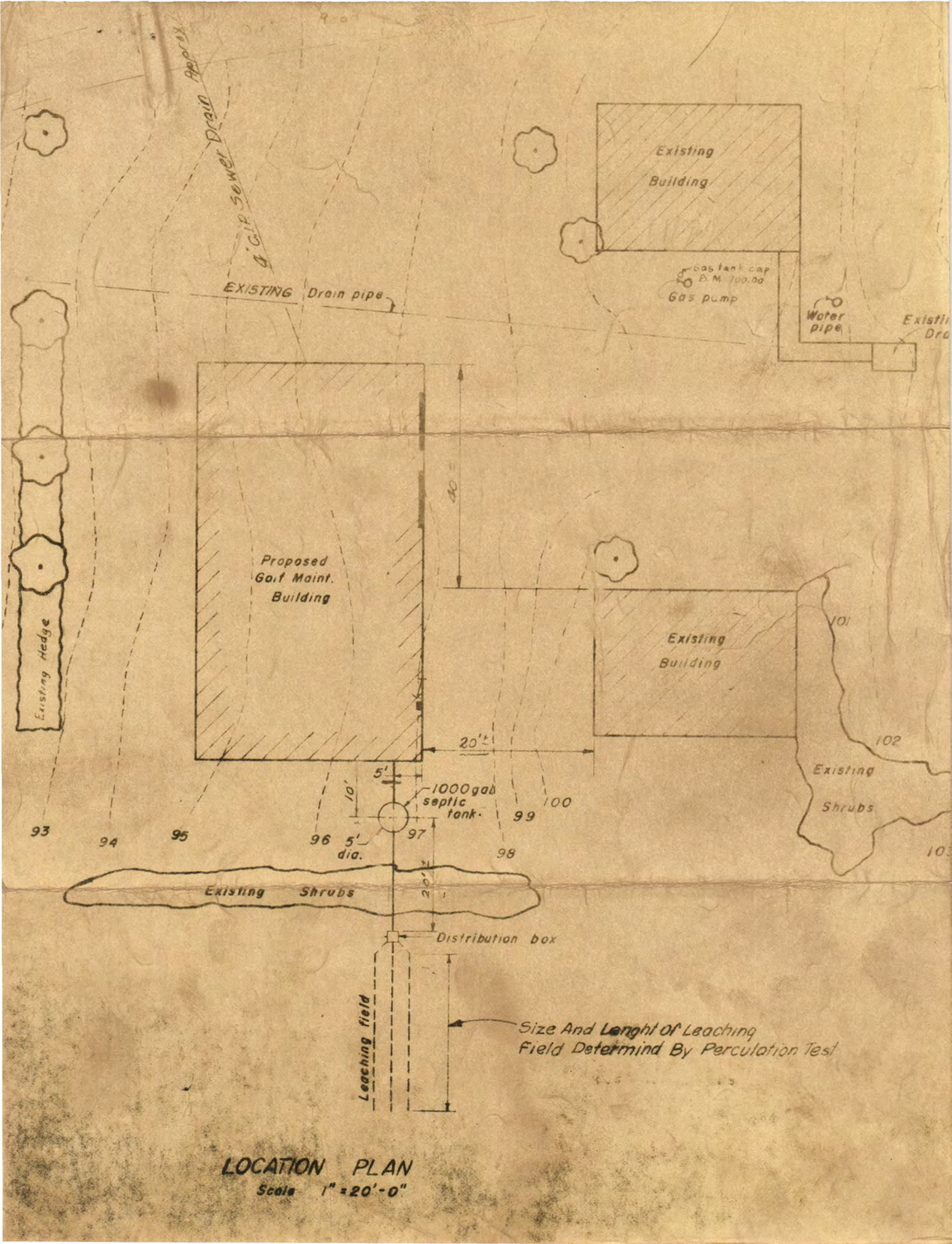
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Fiber GLASS
2. Lateral Lines: Depth below grade 36 in. Number 2; Length of each line 50 ft Total length of Laterals 100 ft.; +55 Slope 4 in/100 ft. Diameter of pipe 12 in.; Shape 1/2 Round Material: concrete [X]; fiber asbestos [ ]; clay [ ]; other ___ Distance between lateral lines 10 ft.
3. Trench Dimensions: Depth 36 in.; Width 24 in.
4. Filter Material: GRAVEL. Depth of material from trench bottom 8" in.
5. Distances To:
Well or Suction Line — ft.;
Stream — ft.; Pressure Line ___ ft.
Property Line — ft.
6. Percolation Rate: ___ minutes/inch
5" To 30 Minutes

TYPICAL SKETCHES



Signature of Applicant


N
W
E
S
BLDG
7'
10'
13'3"
11'5"
58'
55'
8½'



LOCATION PLAN

Scale 1" = 20'-0"