FILE NO. 1519

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — October 22, 1979

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

Roger Buman — 2401 South 19 Street, Lincoln, NE

LICENSEE OR PERMITTEE — ADDRESS

T9N, R6E, Section 9

NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 60.00	$	$	$	$ 60.00

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

SERIAL NO.	DATE	AMOUNT
018754		

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

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: 474-1541

FILING FEE: $ 60.00

FILE NO. _____

DATE: 4-23-79

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: SEE ATTACHED

1. Legal description of property: Twp. 9 N ; Range 6 E ; Section 9 ;
   Block _____ : Lot _____ : Addition 5.023 acres
   Street Address _____

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: — ft.

Roger L Burson
Signature of Applicant (Owner or Lessee)

2401 S. 19
Address

435-4184

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/23/79. Date Frwd. 4/24/79. ACTION: Approved ☒ Disapproved ☐ Signature: Gerald C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 4-24-79 Date Frwd. 4-24-79. ACTION: Approved ☐ Disapproved ☐ Signature: _____

3. City ~~or County~~ Engineer : Date Rec'd. 4-24-79. Date Frwd. 4-24-79. ACTION: Approved ☒ Disapproved ☐ Signature: Al Long

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7/26/79 by: L. C. H.
Date: 7/27/79 by: L. C. H.
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8/1/79 By: Gerald C. Hood *

* See perc. test.

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: 474-1541

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 6E ; Section & ¼ Section 9.
Property Dimensions: 302.73 ft. x 726 ft. Area: 5.023 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 4-19-79 to 4-20-79. Weather: Precip. .30 Temp. 53.

OWNER: ROGER BUMAN
Address: 2401 S. 19 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"	4/19/79	5:15	4-20-79	7:15	4-20-79	10:45	6	11:15	4 1/8	30	1 7/8	30/1 7/8
2	36"	4/19/79	5:15	4-2079	7:15	4-20-79	10:45	6	11:15	4 1/8	30	1 7/8	30/1 7/8
3	36"	4/19/79	5:25	4-20-79	7:15	4-20-79	10:50	6	11:20	4 3/4	30	1 1/4	30/1 1/4
4	36"	4-19-79	5:25	4-20-79	7:15	4-20-79	10:50	6	11:20	4 1/4	30	1 3/4	30/1 3/4
5	36"	4-19-79	5:20	4-20-79	7:15	4-20-79	10:55	6	11:25	4	30	2"	30/2
6	36"	4-19-79	5:15	4-20-79	7:15	4-20-79	10:55	6	11:25	4 5/8	30	1 3/8"	30/1 3/8
						LAST ½ HR. OF 4 HR INTERVAL							

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

Roger L. Buman
Signature of Person Conducting Test

Address 2401 S. 19 Phone 435-4184

(Do not write below this line)

REVIEWING ACTION

Remarks: Stay out of Kennebec
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: April 23, 1979 next to Kennebec flooded phase

Approved Percolation Rate (a)
A. 18 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

7/27/79 Installation just touched Kennebec however two impoundments have been constructed upstream from the installation.

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

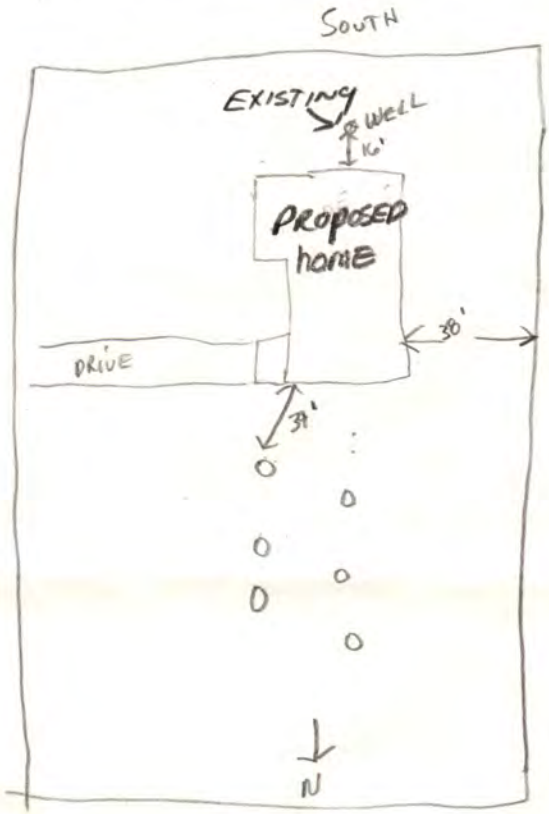
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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Lincoln, Nebraska 68502
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C

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: See remarks in Perc test results.

Date: April 23, 1979

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 202 ft.
3. With a Trench Width of 36 in.
4. Total Area of Lateral needed 606 sq.ft.

Jerrold C. Hood
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: 474-1541

D

DATE: 7-31-79

FILE NO. _____

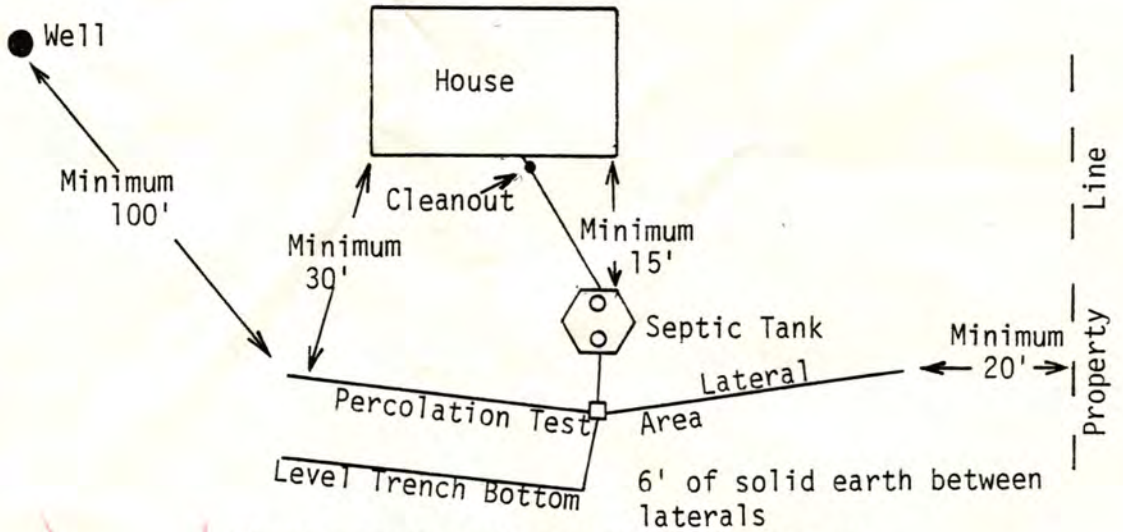
SPECIFICATIONS AS BUILT Roger Baman

A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 11 in.
3. Distance between dwelling and septic tank 71 ft.
4. Number of clean-outs 1.
5. Distances to: Well or Suction Line 50 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Fiberglass; No. of compartments one.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐ (Company Carr-A-Glas)
4. Manholes: Over Inlet; diam. 18 in. Over Outlet; diam. 12 in. Riser Above ☐ Below ☐ Grade ___ in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☒
7. Depth of top of tank below finished grade 24 in.
8. Distances to: Well or Suction Line 230 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Plastic; Number - available outlets seven.
2. Factory Built: Yes ☒ No ☐ (Company _____)
3. Distance from Septic Tank 4 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐ Diameter of Half Round 12 or Perforated Pipe _____. Material: fiberglass ☒; plastic ☐; concrete ☐ ; other _____.
2. Lateral Lines: Number 2; Length of each line 100, 50, _____, _____, _____ ft.; Total length of laterals 150 ft.; Distance between lateral lines 13 ft.
3. Trench dimensions: Width 4 ft.; Slope 1 3/4 in/100 ft.; Average Depth 36 in.
4. Filter Material: Road Gravel Depth of Material 16 in.
5. Distances to: Well or Suction Line 236 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 7-31-79 INSTALLER Pat Son Gillum

Tele 467-4792

