CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 647

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

December 24, 1975 — THIS LICENSE OR PERMIT EXPIRES

Egger Construction — LICENSEE OR PERMITTEE

Hickman, Nebraska — ADDRESS

T9N; R6E; Sec. 10-SW¼; Lot 31 I.T. — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE	
110.15	110.16	148.14	6-2	
SERIAL NO. 624-1535	DATE	AMOUNT		

APPLICATION

37325 W11 75 30.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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. 647

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:

1. Legal description of property: Twp. 9N ; Range 6E ; Section 10 SW 1/4
   Block _____; Lot 3 I.T.; Addition _____
   Street Address 801 WEST PIONEER BLVD

2. Property Use: Residential _____ ☒ ; Commercial _____ ☐
   No. of Bedrooms 3 . Describe: _____
   Other Use _____ ☐
   Describe: _____

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

4. Distance to public sewer: _____ ft.

Egger Construction Inc Harold Egger
Signature of Applicant (Owner or Lessee)

Hickman, Nebr.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 6/24/75. Date Frwd. 6/24/75. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hoob

2. Supt. Bldg. Insp.: Date Rec'd. 6-24-75. Date Frwd. 6-24-75 ACTION: Approved ☒ Disapproved ☐ Signature: Chas Fiske Williamsen

3. City or County Engineer: Date Rec'd. 6-24-75. Date Frwd. 6-24-75. ACTION: Approved ☒ Disapproved ☐ Signature: Joe Brady

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 ☒
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 6E ; Section SW1/4 10 ; Block _____ ; Lot 3 I.T. ; Addition _____.
   Street Address 801 WEST PIONEER BLVD

2. Property Use: Residential _____ ☒ Commercial _____ ☐
   No. of Bedrooms 3 Describe: _____
   Other Use _____ Describe: _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ 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).

Egger Construction Inc. Harold Egger
Signature of Applicant (owner or lessee)

Hickman, Nebr.
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
   Date:_____ by:_____
   Date:_____ by:_____
   Date:_____ by:_____

3. Date: Approved ☒; Disapproved ☐ 6/24/75
   by: Jerrold E. Hoob

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 9-10-75 by: Jim Wevulo

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).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Gary Patrick
Address 801 West Pioneers

Dates of Tests: 6/27/75 to 6/28/75. 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	33	6/27	12:00	6/28	12:10	6/28	12:10	Full	1:10	5" drop	120	10	
							1:40	3"	2:10	2"			
2	34	6/27	12:00	6/28	12	6/28	12:10	Full	1:10	8" drop	120	15½	
							1:40	4½"	2:10	3"			
3	34	6/27	12:00	6/28	"		12:10	Full	1:10	10"	120	17	
							1:40	4"	2:10	3"			
4	33	6/27	12:00	6/28	"		12:10	Full	1:10	10"	120	18	
							1:40	5"	2:10	3"			
5	36	6/27	12:00	6/28	"		12:10	Full	1:10	2"	120	4	
							1:40	1"	2:10	1"			
6	33	6/27	12:00	6/28	"		12:10	Full	1:10	¼"	120	¾"	
							1:40	¼"	2:10	¼"			

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

John Struhmyer
Signature of Person Conducting Test

Address _____
Phone: _____

MT after 24 hrs. except last hole dropped 8"

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 13 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: June 23, 1975

Jerrold 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: _____

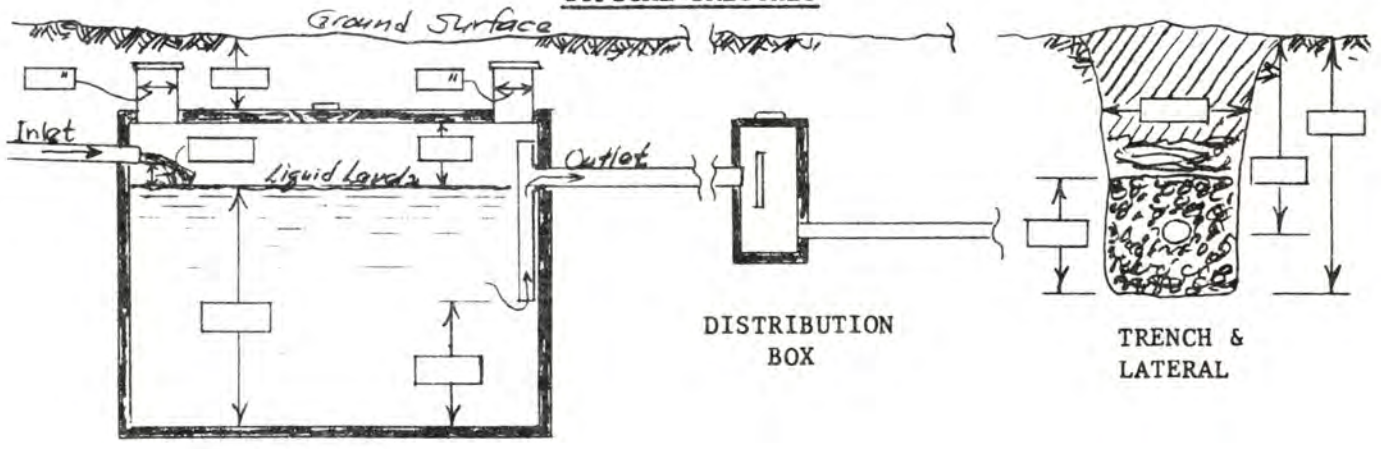
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION 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 ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: HALF ROUND
2. Lateral Lines: Depth below grade __in. Number ____; Length of each line ___ft Total length of Laterals 136 ft.; Slope 4 in/100 ft. Diameter of pipe ____ in.; Shape _____ Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____ Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: _____. Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: 13 minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
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)

Egger Construction
T9N R6E SW1/4
Sec 10 Lot 31 I.T.

FILE NO. 647

SPECIFICATIONS

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DATE: 9-29-75

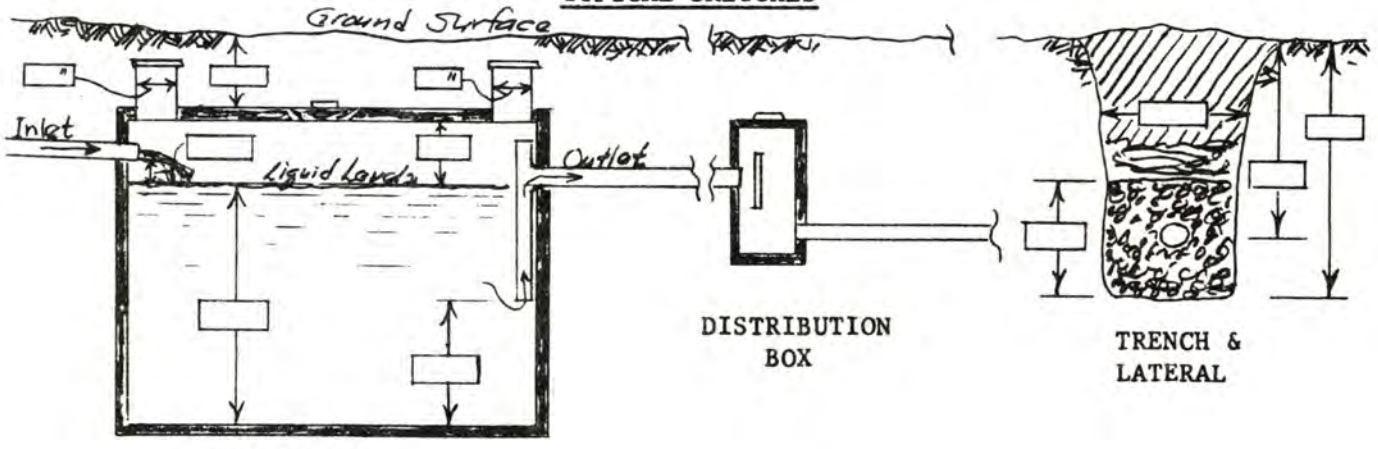
A. BUILDING SEWER:
1. Material plastic; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor 4 in.
3. Distance between dwelling and septic tank 75 ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

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

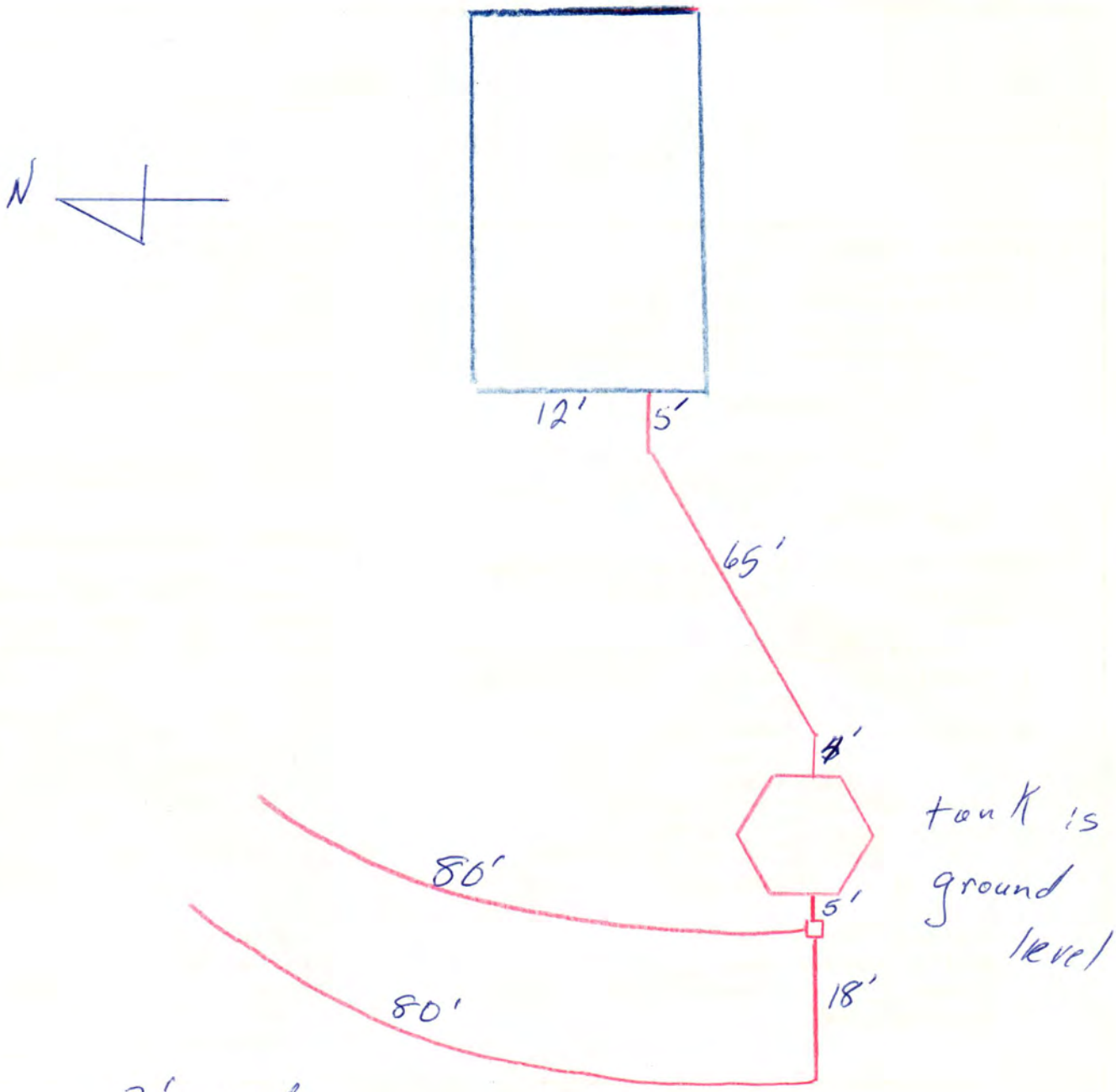
C. DISTRICTION BOX
1. Material Concrete; No. available outlets 6.
2. Factory Built: Yes [X], (Company Pre-Cast) No [ ]
3. Dimension: Length ___in.; Width ___in. Depth ___in.
4. Distance from Septic Tank 5' ft.
5. Serial Distribution: Yes [X], No [ ]
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: perforated pipe
2. Lateral Lines: Depth below grade 12 in.
Number 2; Length of each line 80 ft
Total length of Laterals 160 ft.;
Slope ___in/100 ft. Diameter of pipe 4 in.; Shape O
Material: concrete [ ]; fiber asbestos [ ]; clay [ ]; other plastic
Distance between lateral lines ___ft.
3. Trench Dimensions: Depth 2-4 in.; Width 36 in.
4. Filter Material: gravel.
Depth of material from trench bottom 12 in.
5. Distances To:
Well or Suction Line 100' ft.;
Stream ___ft.; Pressure Line ___ft.
Property Line ___ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Signature of Applicant



3' wide

2'-4' deep level

plastic perforated pipe

801 West Pioneer

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