FILE NO. 284

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

January 14, 1972 — THIS LICENSE OR PERMIT EXPIRES

John VerMaas — LICENSEE OR PERMITTEE

5340 Oldham — ADDRESS

T9N; R6E; Sec. 14; Bl. 2; Lot 2; Lazy Acres Add. — 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
110.15	110.16	148.14	6-2

624-1335

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-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. 284

DATE: July 15, 1972

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 14;
Block 2; Lot 2; Addition LAZY ACRES
Street Address Lazy Acres.

2. Property Use: Residential ____ [X]; Commercial ____ [ ]
No. of Bed Rooms 3 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-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.)

John Ver Mass by Roger Bailey
Signature of Applicant (owner or lessee)

5340 Oldham
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance ____

3. Site Visits:
Date: 10/13/72 by: L.C.H.
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved [X]; Disapproved [ ]: 7/14/72
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/13/72 by: Jerrold C. Hood RS

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. 284

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 14;
Block 2; Lot 2; Addition LAZY ACRES
Street Address Lazy Acres.

2. Property Use: Residential ____ [X]; Commercial ____ [ ]
No. of Bedrooms 3. Describe: ____
Other Use ____ [ ]
Describe: ____

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

4. Distance to public sewer: ____ ft.

John Vermast by Peggy Bailey
Signature of Applicant (owner or lessee)

5340 Oldham
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 7/14/72. Date Frwd. 7/14/72. ACTION: Approved ____ [X] Disapproved [ ] Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 7-14-72. Date Frwd. ____. ACTION: Approved ____ [X] Disapproved [ ] Signature: Charles Seale By RG

3. Dp City Engineer: Date Rec'd. 7-14-72. Date Frwd. " . ACTION: Approved ____ [X] Disapproved [ ] Signature: J. T. Blessing

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. 284

PROPERTY WHERE SOIL TESTED:
Location: Township Lot 2 Block 2 T9N, R6E, SEC. 14.
Section & ¼ Sect. Lazy acres
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: _____
Address _____

Dates of Tests: July 12 to 13 92. Weather: Precip. 80 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	36										24 hrs	7	
2	|											1	
3	|											11½	
4	|											6	
5	|											1	

Sum of Percolation Rates _____
Average of Rates: _____
Mean of Rates: _____
5.2 in Two hours

Signature of Person Conducting Test

Address _____
Phone: _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

DATE: June 14, 1972

Approved Percolation Rate(s)
A. 22 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold 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. 284

SPECIFICATIONS

DATE: July 14

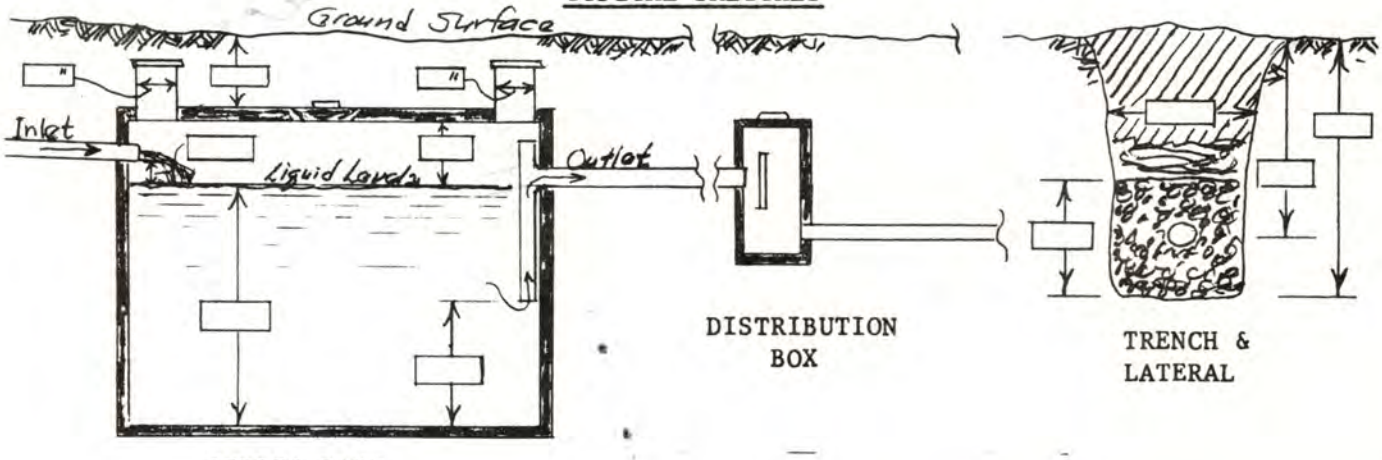
A. BUILDING SEWER:
1. Material PLASTIC; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor ___in.
3. Distance between dwelling and septic tank 19 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 75 ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material FIBERGLASS; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 56 in.
3. Factory Built: Yes ☒ (Company CORRUGATED FIBERGLASS) 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 28 in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

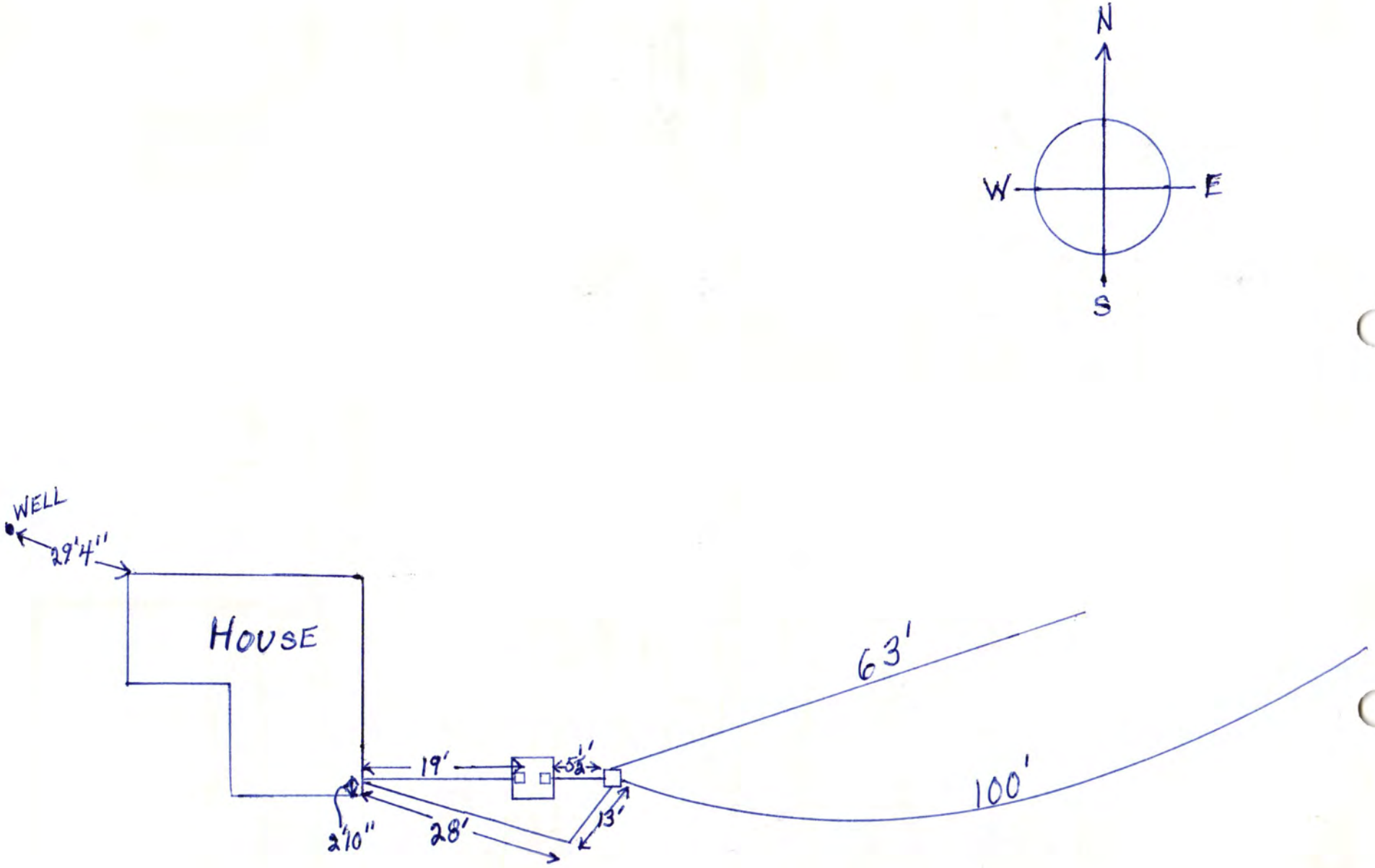
C. DISTRIBUTION BOX
1. Material CON; No. available outlets 5.
2. Factory Built: Yes ☒, (Company PRE-CAST STEP) No ☐
3. Dimension: Length ___in.; Width ___in. Depth ___in.
4. Distance from Septic Tank 6½ ft.
5. Serial Distribution: Yes ☐, No ☒ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: HALF Round
2. Lateral Lines: Depth below grade ___in.
Number 2; Length of each line 100 ft
Total length of Laterals 163 ft.; +63
Slope 6 in/100 ft. Diameter of pipe 16 in.; Shape HALF Round
Material: concrete ☒; fiber asbestos ☐; clay ☐; other ☐
Distance between lateral lines ___ft.
3. Trench Dimensions: Depth 36 in.; Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom ___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


N
W
E
S
WELL
29'4"
HOUSE
19'
5½'
2'10"
28'
13'
63'
100'