CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 75

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

March 9, 1969
THIS LICENSE OR PERMIT EXPIRES

Keith Herbster
LICENSEE OR PERMITTEE

3911 South 17th Street
ADDRESS

T 9N; R 6E; Section 14; Blk. 2; Lot 7; Lazy Acres Addition
NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: Non-Transferable

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
143110.15 35	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
14405	SEP 10 68	30.00

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. 75

DATE: 8-30-68

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. 9-N; Range 6-E; Section 14;
Block 2; Lot 7; Addition ____;
Street Address No 7 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.)

Keith Herbster
Signature of Applicant (owner or lessee)

3911 So 17
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance ____

3. Site Visits:
Date: 11/1/68 by: L. C. H.
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved [X]; Disapproved [ ]: 9/9/68
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 11/1/68 by: Jerrold C. 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. 75

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. 9-N; Range 6-E; Section 14;
Block 2; Lot 7; Addition _____;
Street Address No. 7 Lazy Acres.

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.

Keith Herbster
Signature of Applicant (owner or lessee)

3911 So 17
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 9/9/68. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 9-10-68. Signature: Jerrold C. Wood

2. Supt. Bldg. Insp.: Date Rec'd. 9-10-68. ACTION: Approved ☐ Disapproved ☒
Date Frwd. 9-10-68. Signature: L. L. Spahn

3. City Engineer: Date Rec'd. 9-10-68 ACTION: Approved ☐ Disapproved ☒
Date Frwd. 9-10-68. Signature: J. L. 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. 75

PROPERTY WHERE SOIL TESTED:
Location: Township _____
Section & ¼ Sect. _____
Property Dimensions: 190 ft. x 230 ft.
Area: 1 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Keith Herbster
Address #7 Lazy Acres

Dates of Tests: 9-7-68 to _____. Weather: Precip. Trace 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		9-7	5:00	9-8	5:00	9-8	5:00	6 8/16	5:30	4 15/16	30	1 9/16	
2		9-7	5:05	9-8	5:05	9-8	5:05	5 6/16	5:35	4 1/16	30	1 5/16	
3		9-7	5:10	9-8	5:10	9-8	5:10	8 7/16	5:40	8-0	30	7/16	
4													
5													
6													

Keith Herbster
Signature of Person Conducting Test
by Mrs. Keith Herbster
Address 3911 So. 17th
Phone: 423-4532

Sum of Percolation Rates ~~1½ in 1st~~
Average of Rates: ~~1½ in/30 min~~
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 30 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: September 9, 1968

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. 75

SPECIFICATIONS

DATE: Sept. 9, 1968

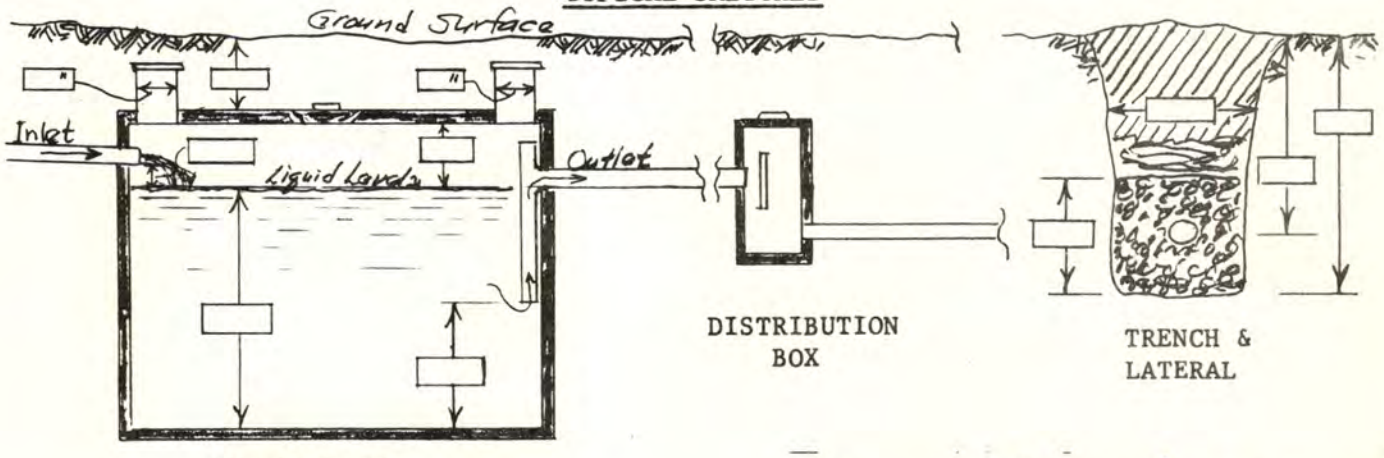
A. BUILDING SEWER:
1. Material CAST IRON; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor ___in.
3. Distance between dwelling and septic tank 16 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 50 ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material CON; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___in.
3. Factory Built: Yes ☒ (Company PRE-CAST
No ☐
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 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 50 ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

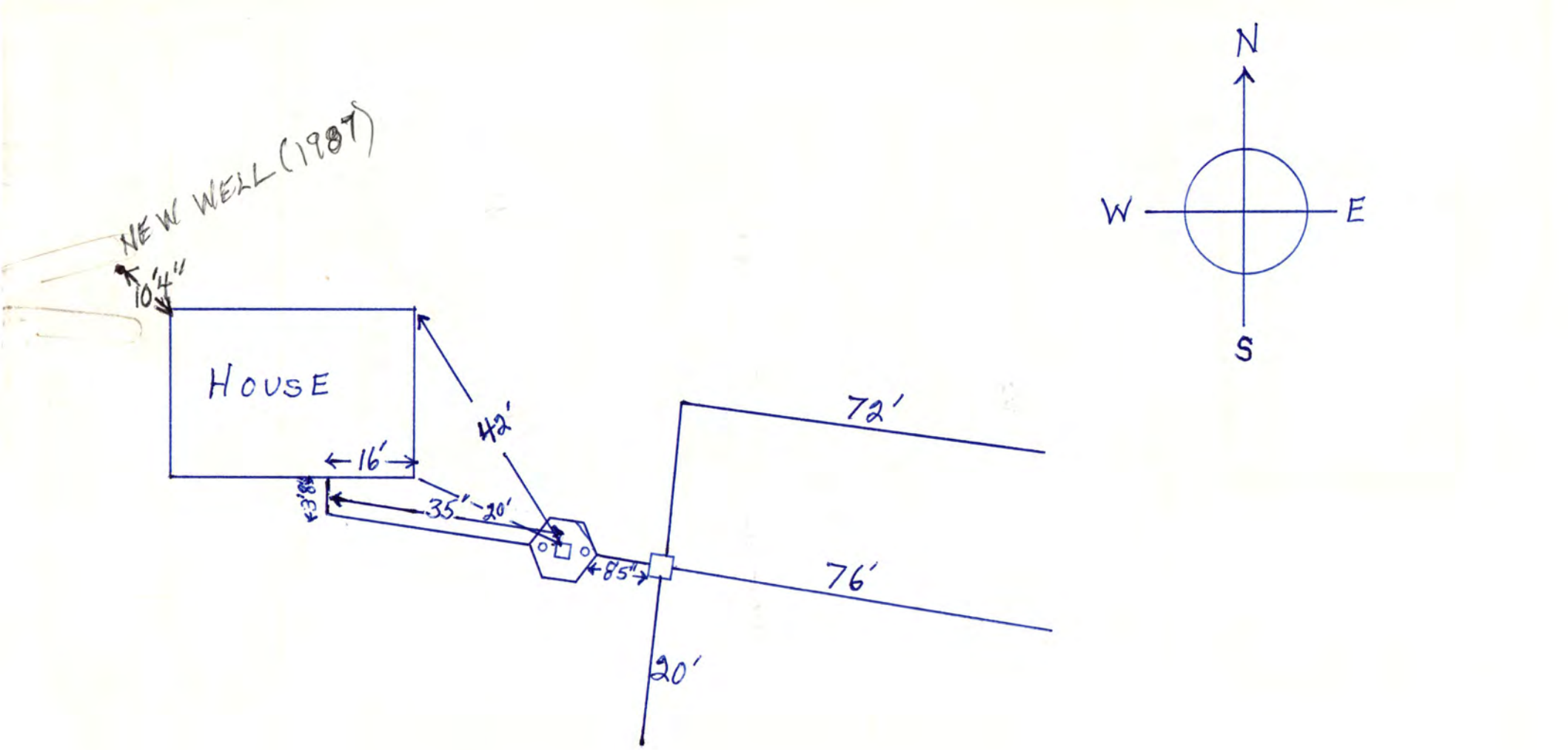
C. DISTRIBUTION BOX
1. Material CON; No. available outlets 5.
2. Factory Built: Yes ☒, (Company PRE-CAST STEP No ☐
3. Dimension: Length ___in.; Width ___in. Depth ___in.
4. Distance from Septic Tank 8½ ft.
5. Serial Distribution: Yes ☒, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: CONCRETE HALF ROUND
2. Lateral Lines: Depth below grade ___in. Number 2; Length of each line 76 ft Total length of Laterals 168 ft.; Slope 4 in/100 ft. Diameter of pipe 24 in.; Shape ∩
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 20 ft.
6. Percolation Rate: 30 minutes/inch

TYPICAL SKETCHES



Mrs. Keith Herbster
Signature of Applicant


NEW WELL (1987)
10'4"
HOUSE
42'
16'
3'8"
35'
20'
85"
72'
76'
20'
N
W
E
S