CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 1282

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

September 30, 1979 — THIS LICENSE OR PERMIT EXPIRES

J.A. Sexton, 4720 South 47 Street, Lincoln, NE — LICENSEE OR PERMITTEE — ADDRESS

T9N, R6E, Section 16 NW Quarter — 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
110.15	110.16	148.14	6-2

624-1527

SERIAL NO.	DATE	AMOUNT

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

489-5648

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. 1282

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:

SEE ATTACHED

1. Legal description of property: Twp. 9 N ; Range 6 E ; Section 16 N W QUARTER
Block _____; Lot _____; Addition _____
Street Address 6101 South Coddington

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: N.A. ft.

J A Sexton
Signature of Applicant (Owner or Lessee)

4720 So 47TH
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 3/28/78 . Date Frwd. 3/28/78 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 3/28/78 . Date Frwd. 3/28/78 . ACTION: Approved ☒ Disapproved ☐ Signature: Ernest A Demmer

3. City ~~or County~~ Engineer : Date Rec'd. 3-28-78 . Date Frwd. 3-28-78 . ACTION: Approved ☒ Disapproved ☐ Signature: M Long

REMARKS OR REASONS FOR DISAPPROVAL _____

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

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 474-1541)

FILE NO. 1282

PROPERTY WHERE SOIL TESTED: Owner: _____
Location: Township 9 N : Range 6 E
Section & ¼ Sect. 16 N.W. QUARTER Address: _____
Property Dimensions: 493 ft. x 442 ft.
Area: 5 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; (Silty Clay Loam) ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Dates of Tests: 3/26/78 to 3/27/78. Weather: Precip. NONE Temp. 55

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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	37	3/26	11:30	3/27	12:30	3/27	12:30	7	1:00	6	30	1	
2	38	3/26	11:35	3/27	12:35	3/27	12:35	6 7/8	1:05	6 1/4	30	3/4	
3	36	3/26	11:40	3/27	12:40	3/27	12:40	6	1:10	4 7/8	30	1 1/8	
4	37	3/26	11:45	3/27	12:45	3/27	12:45	6 1/2	1:15	5 3/4	30	3/4	
5	36	3/26	11:50	3/27	12:50	3/27	12:50	8	1:20	6 3/4	30	1 1/4	
6	36	3/26	11:55	3/27	12:55	3/27	12:55	6	1:25	5 1/4	30	3/4	

J. A. Leytton
Signature of Person Conducting Test

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

Address _____
Phone _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: Wymore Silty Clay Loam. (S.C.S.) Seems a little fast for Wymore

DATE: March 28, 1978

Approved Percolation Rate (a)
A. 32 min./inch
B. _____ min./inch
C. _____ min./inch

Gerald 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. 1282

SPECIFICATIONS

DATE: _____

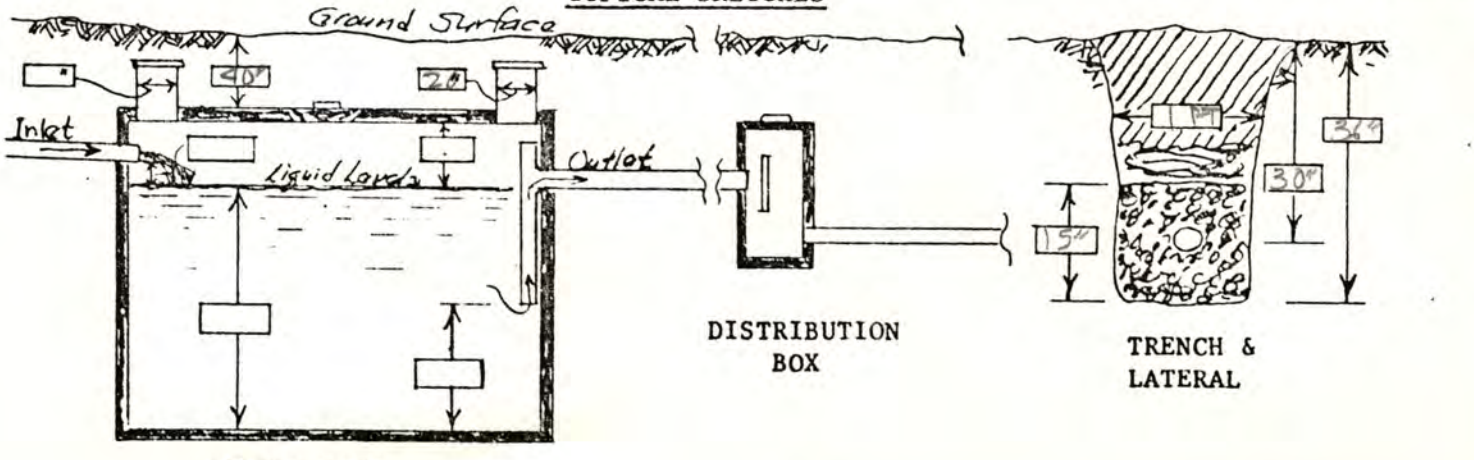
A. BUILDING SEWER:
1. Material SOIL; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 40 in.
3. Distance between dwelling and septic tank 70 ft.
4. Number of clean-outs 2.
5. Distances To:
Well or Suction Line 40 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material FIBERGLASS No. of compartments _____.
2. Capacity 1500 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☒ (Company CALDARY
No ☐
4. Manholes: Over Inlet; diam. 20 in.
Over Outlet; diam. 20 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 40 in.
8. Distances To:
Well or Suction Line 150 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

C. DISTRIBUTION BOX
1. Material FIBERG; No. available outlets ___.
2. Factory Built: Yes ☐, (Company CAL
No ☐
3. Dimension: Length 24 in.; Width 18 in
Depth 16 in.
4. Distance from Septic Tank 8 ft.
5. Serial Distribution: Yes ☐, No ☒
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: 4" PVC PERFORATED PIPE
2. Lateral Lines: Depth below grade 36 in.
Number ___; Length of each line ___ ft
Total length of Laterals 258 ft.;
Slope ___ in/100 ft. Diameter of pipe ___ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other 4 PVC Perf
Distance between lateral lines ___ ft.
3. Trench Dimensions, Depth 36 in.;
Width 36 in.
4. Filter Material: GRAVEL.
Depth of material from trench bottom 18 in.
5. Distances To:
Well or Suction Line 150 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line ___ ft.
6. Percolation Rate: _____ minutes/inch

TYPICAL SKETCHES

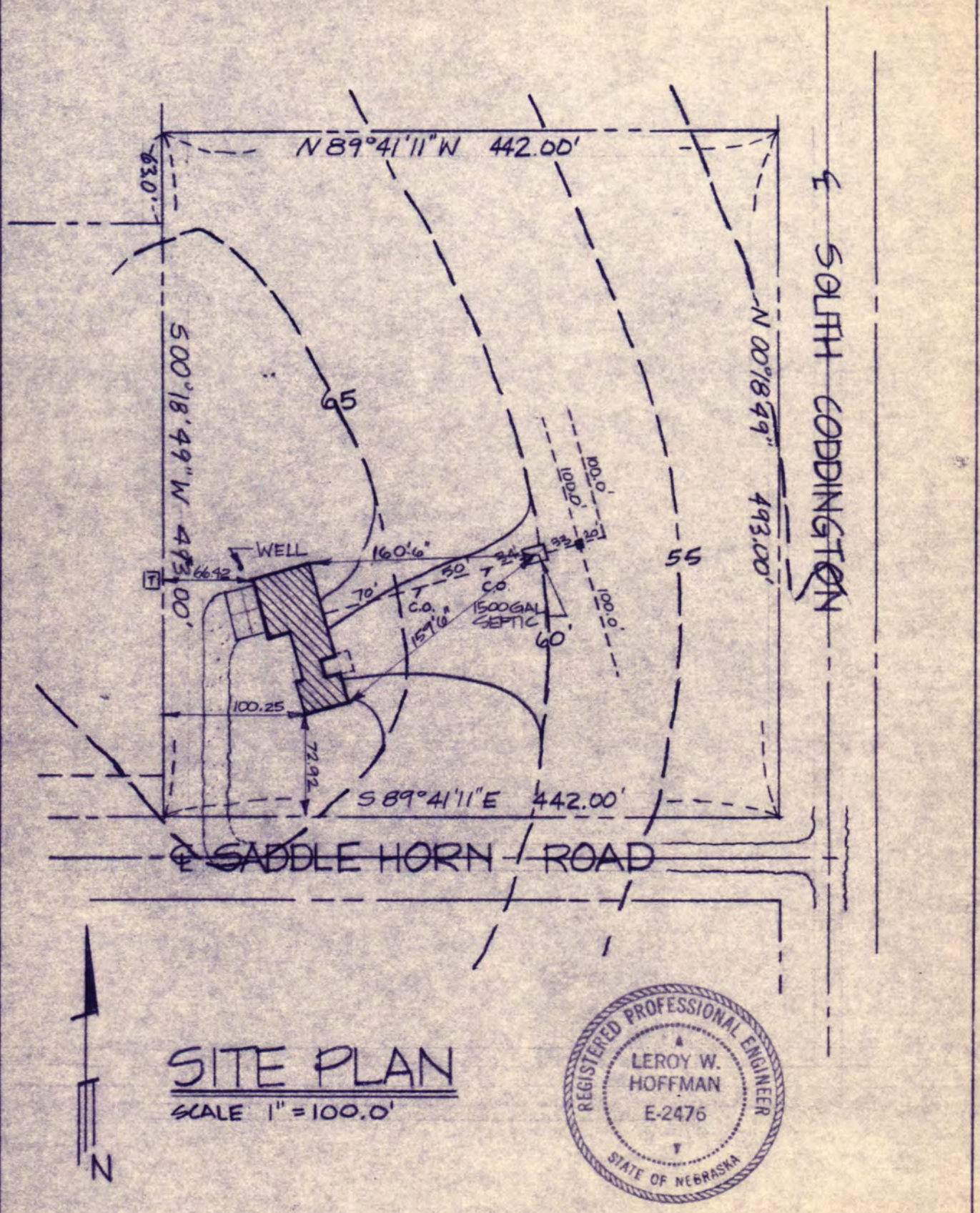


SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

_____
Signature of Applicant

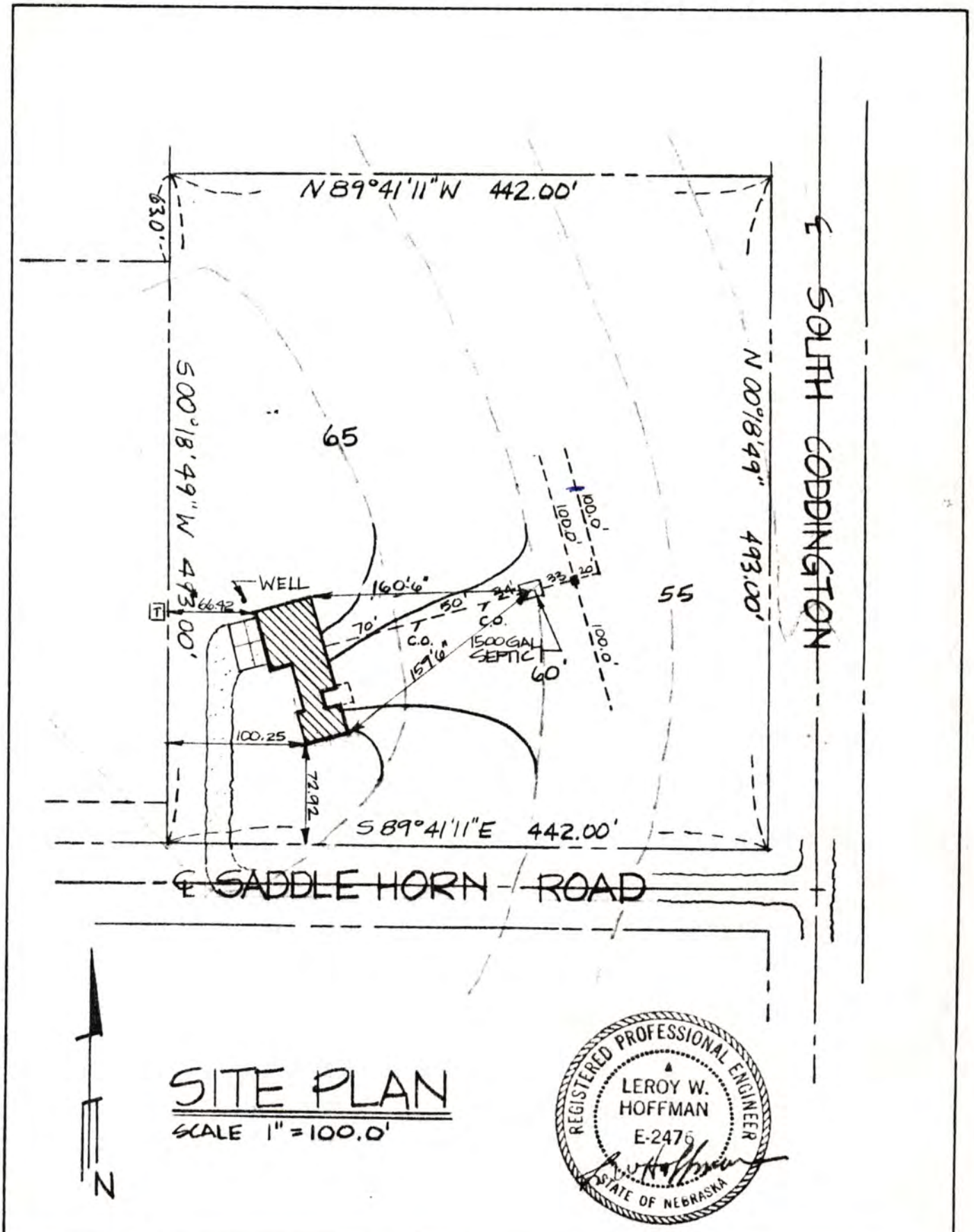


SITE PLAN

SCALE 1" = 100.0'

REGISTERED PROFESSIONAL ENGINEER
LEROY W. HOFFMAN
E-2476
STATE OF NEBRASKA

DETAIL NO:	6101 SOUTH CODDINGTON LANCASTER COUNTY	AITKEN HAZEN HOFFMAN & MILLER ARCHITECTS AND ENGINEERS 1340 GARBER AVE. LINCOLN, NEBR.
8-20-81		



SITE PLAN

SCALE 1" = 100.0'

REGISTERED PROFESSIONAL ENGINEER
LEROY W. HOFFMAN
E-2476
STATE OF NEBRASKA

DETAIL NO:	6101 SOUTH CODDINGTON LANCASTER COUNTY	AITKEN HAZEN HOFFMAN & MILLER ARCHITECTS AND ENGINEERS 1340 GARBER AVE. LINCOLN, NEBR.
4-20-90		

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: September 27, 1978

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☒ Evaluation of the Individual Water Supply

☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 9 N ; Range 6 E ; Section 16 ;
Block ; Lot pt. of 41 ; Addition .
Street Address 6101 South Coddington, Lincoln, NE 68523 .
Directions on how to get to property .

Location of well N. of driveway, drive rod, post is in ground .
Where is tap: Inside ☐ Outside ☐ .

	NAME	ADDRESS	PHONE
Present Owner:	Jiles A. Sexton		423 0722
Tenant:			
Lending Agency:	First Federal of Lincoln	1235 N Street, Lincoln, Ne.	475 0521

(Do not write below double lines)

Health Department: Date Received 9/29/78
Received $45.00 Check ☒ Cash ☐

Site Visits: Date 10-5-78 by sm
Date 10-25-78 by sm
Date by

First Federal of Lincoln
BY Carl E. Fullton
Signature of Applicant Vice-President

1235 N Street, Lincoln, Ne. 68501
Address

PRELIMINARY STATUS -- DATE 10-5-78

Water System: 10-25-78
Approved ☒ Disapproved ☐

Sewage Disposal System:
Approved ☒ Provisional Approval ☐
Disapproved ☐

Corrections Required or Reasons for Disapproval (over)

☐ See Attached Letter.

FINAL APPROVAL -- DATE 10-26-78

Water System ☒ . Sewage Disposal System ☒ .

BY James Newell

Form Number 20215-0878

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 4/26/90

☒ Evaluation of the Sewage Disposal System ☐ Enclosed is $75.00 $150.00

Legal Description of Property: TWP. 9N; RANGE 6E; SECTION 16; BLOCK ___

LOT PT OF 41; ADDITION _____; Street Address 6101 S. Coddington

Directions to Property 2½ miles South of Lee's Chicken / Pioneers Park

Address on Mail box. Solar panels on Roof.

Location of Well NORTH of Driveway Tap Location: Inside ☐ Outside ☐

Location of Sewage System East Year Installed 78

	NAME	ADDRESS	PHONE
Present Owner:	Rory & Connie Mueller	6101 S. Coddington	423-8095
Tenant/Buyer:	Same (refinancing)		
Return to:	Rory & Connie Mueller	6101 S. Coddington	423-8095

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Connie Mueller Address 6101 S. Coddington

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HEALTH DEPARTMENT USE ONLY $150.00

Date Received 4/27/90 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 5-1-90

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:	SITE VISIT:
Construction	☒	☐	Approved: ☐	Date 5-1-90 by DH
Bacteria	☒	☐	Provisional: ☐	Date _____ by ___
Nitrate	☒ 1.8 ppm	☐	Disapproved: ☒	Date _____ by ___

Comments: Sewage seeping to ground surface of lower lateral. This violation must be corrected regardless of sale. Should not farm over septic system. Corrected 6-4-90

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM:	
Approved: ☒	Approved: ☒	Provisional Approval: ☐

APPROVED BY Ron Mergenthaler DATE 6-4-90

Approval or disapproval is based on written standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832