FILE NO. 318

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

August 9, 1973 — THIS LICENSE OR PERMIT EXPIRES

J. Sands — LICENSEE OR PERMITTEE

RFD #1-1900 S.W. 15th, Lincoln — ADDRESS

T9N; R6E; Sec. 16; Lot 34 — 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	
624-110.15	110.16	148.14	6-2	

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. 318

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 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 16;
Block _____; Lot 34; Addition _____;
Street Address R.4.D. 1.

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.)

J. Sanco
Signature of Applicant (owner or lessee)

R.F.D. 1 - 1900 S.W. 15th
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: 8/31/73 by: O.D.L.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 2/9/73
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ by: _____

9/27/73 Ob to be given when 1'-2' of soil is removed from over laterals

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. 318

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 16;
Block ____; Lot 34; Addition _____;
Street Address RFD 1.

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: 2 mi. ~~ft~~.

J. Sandos
Signature of Applicant (owner or lessee)

R. F. D. 1 - 1900 S.W. 15
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 2/9/73. ACTION: Approved ____ ☒ Disapproved ☐
Date Frwd. 2/9/73. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 2-9-73. ACTION: Approved ____ ☒ Disapproved ☐
Date Frwd. _____. Signature: Chas. Seale By R.D.

3. ~~City~~ Engineer: Date Rec'd. 2/9/73. ACTION: Approved ____ ☒ Disapproved ☐
Date Frwd. 2/9/73. Signature: Rex Smith

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. 318

PROPERTY WHERE SOIL TESTED:
Location: Township 9-N - R-6-E
Section & ¼ Sect. 16
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: J. Vanda
Address R.F.D. 1 - 1900 S.W. 15th

Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: Feb. 7 to Feb. 8. Weather: Precip. 0 Temp. 17°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	30	2/7	8:30	2/7	12:30	2/8	10:00	6"	10:30	5"	30	1"	1"
2	30	2/7	8:30	"	"	"	"	6"	"	5"	"	1"	1"
3	30	2/7	8:30	"	"	"	"	6"	"	5 1/8"	"	7/8"	7/8"
4	30	2/7	"	"	"	"	"	6"	"	5 1/4"	"	3/4"	3/4"
5	30	2/7	"	"	"	"	"	6"	"	5"	"	1"	1"
6	30	2/7	"	"	"	"	"	6"	"	5"	"	1"	1"

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

Al Vanda
Signature of Person Conducting Test
Nuttle Mercer Co.
Address 3800 Van Dorn
Phone: 434-9393

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

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

DATE: February 9, 1973

Jerrold C. Wood
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. 318

SPECIFICATIONS

DATE: [illegible]

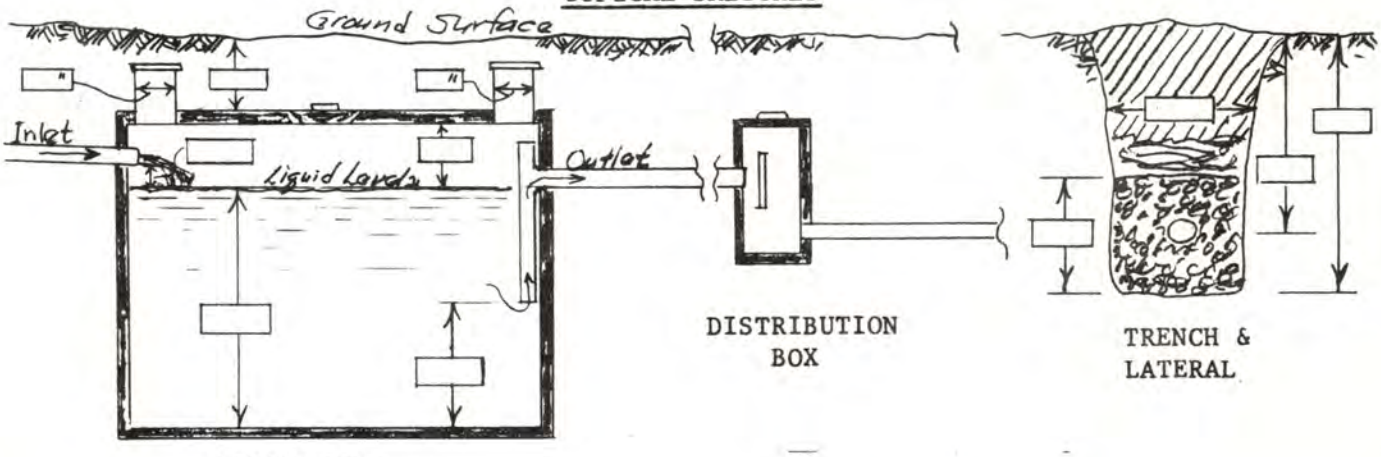
A. BUILDING SEWER:
1. Material PLASTIC; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor ___ in.
3. Distance between dwelling and septic tank 66 ft.
4. Number of clean-outs ___.
5. Distances To:
Well or Suction Line 50 ft.;
Stream ___ ft.; Pressure Line 50 ft.;
Property Line 00 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material CONCRETE; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 59 in.
3. Factory Built: Yes [X] (Company PRE-CAST STEP
No [ ]
4. Manholes: Over Inlet; diam. 14 in.
Over Outlet; diam. 6 in.
Below Grade ___ in.
5. Inlet: Baffle [ ]; or Tee [ ]
6. Outlet: Baffle [ ]; or Tee [X]
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade ___ in.
8. Distances To:
Well or Suction Line 50 ft.;
Stream ___ ft.; Pressure Line 50 ft.;
Property Line 00 ft.

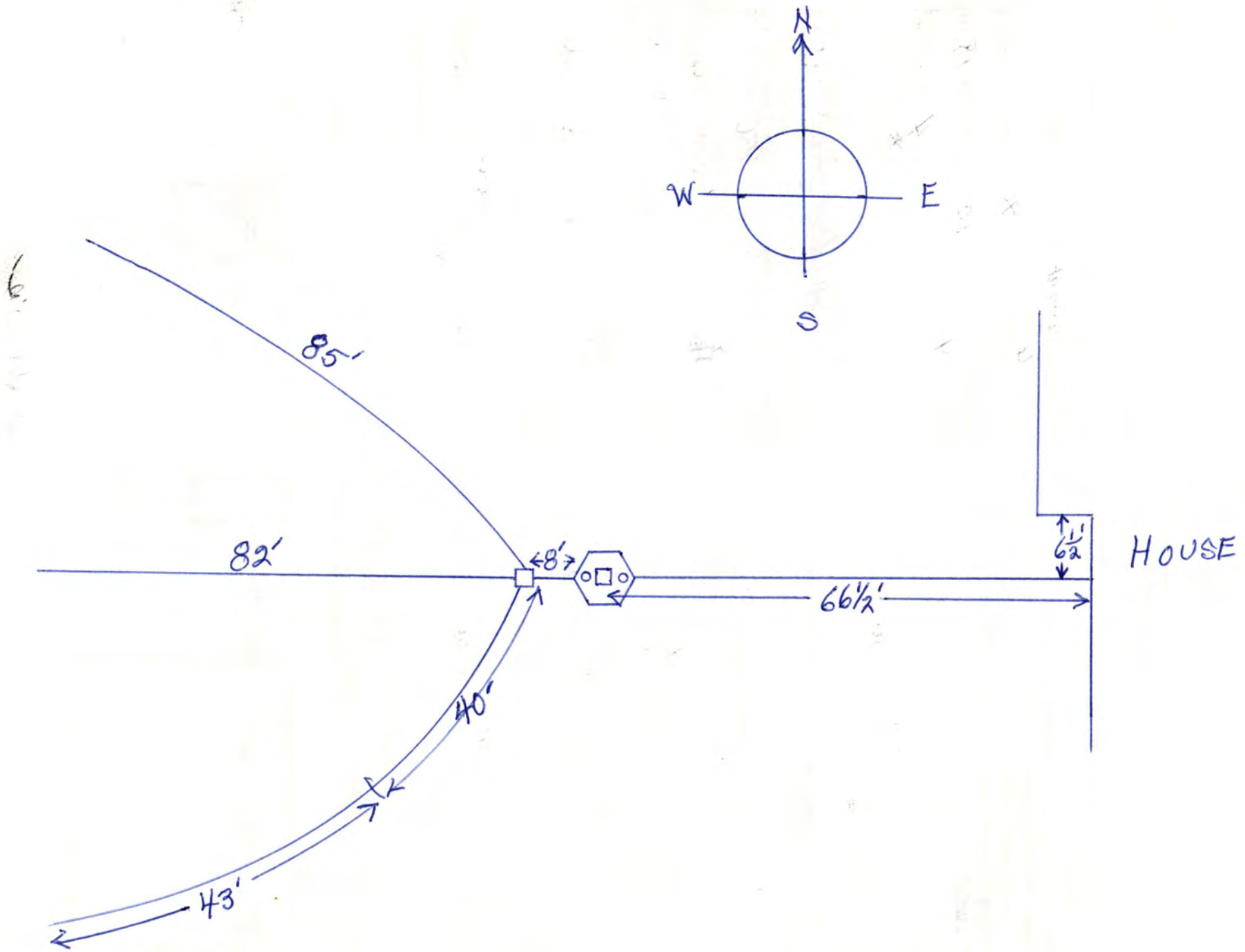
C. DISTRICTION BOX
1. Material [illegible]; No. available outlets 6.
2. Factory Built: Yes [X], (Company PRE-CAST STEP No [ ]
3. Dimension: Length 12 in.; Width 18 in. Depth 9 in.
4. Distance from Septic Tank 4 ft.
5. Serial Distribution: Yes [X], No [X] (If yes, show detailed plans.)

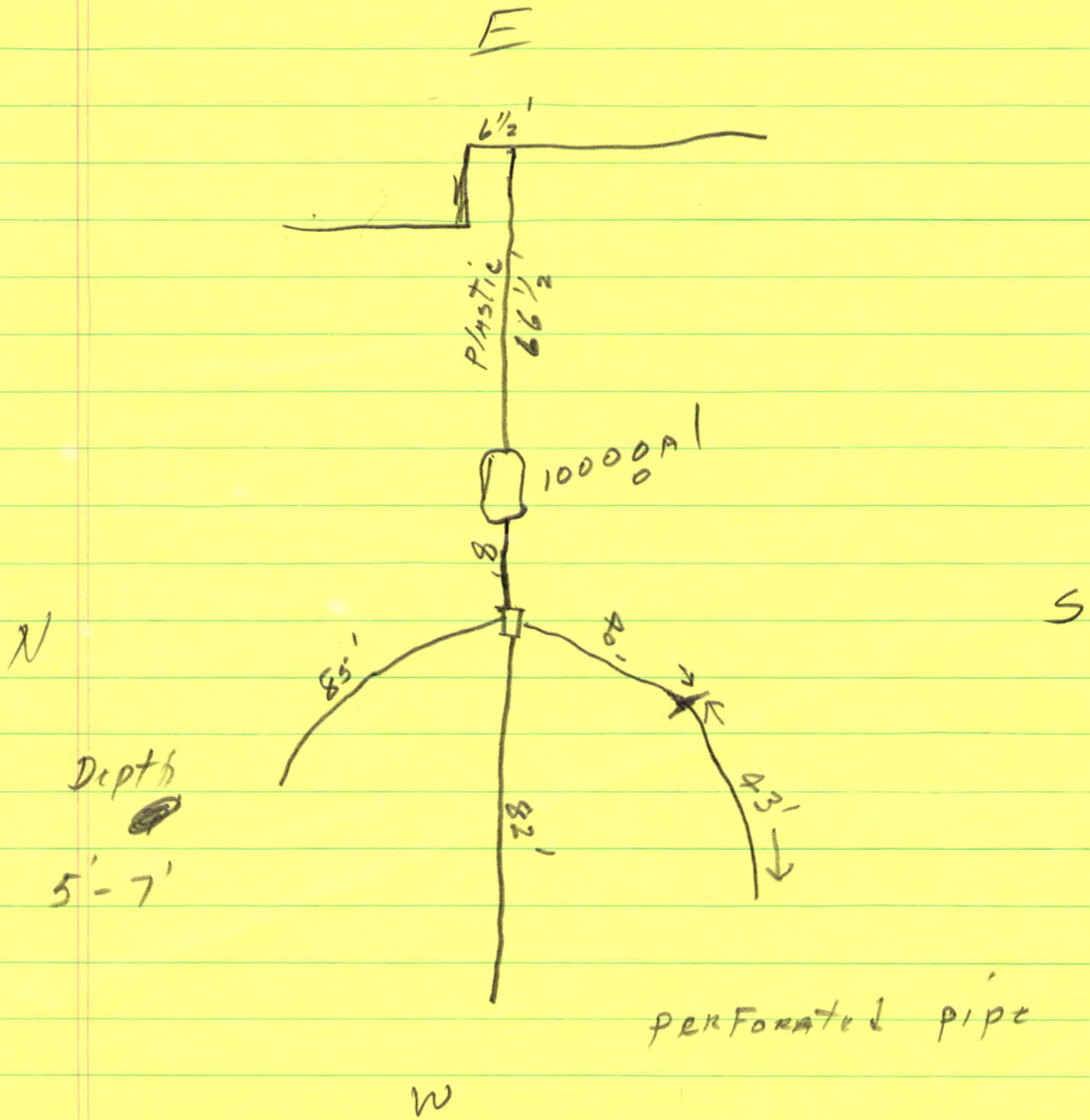
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ROUND PLASTIC
2. Lateral Lines: Depth below grade ___ in.
Number 3; Length of each line 83 ft
Total length of Laterals 250 ft.;
Slope 4 in/100 ft. Diameter of pipe 4 in.; Shape ROUND
Material: concrete [ ]; fiber asbestos [ ]; clay [ ]; other PLASTIC
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth ___ in.; Width 36 in.
4. Filter Material: [illegible].
Depth of material from trench bottom ___ in.
5. Distances To:
Well or Suction Line 100 ft.;
Stream 100 ft.; Pressure Line 100 ft.
Property Line 00 ft.
6. Percolation Rate: 32 minutes/inch

TYPICAL SKETCHES



[illegible]
Signature of Applicant


N
W
E
S
85'
82'
8'
6½'
HOUSE
66½'
40'
43'


E
6½'
PLASTIC
66½'
1000 GAL
8'
N
S
85'
40'
43'
28'
Depth
5'-7'
W
perforated pipe