CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 67

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

February 13, 1969
THIS LICENSE OR PERMIT EXPIRES

Paul Daniels by Keith Biggerstaff
LICENSEE OR PERMITTEE

7120 Logan
ADDRESS

T 9N; R 6E; Sec. 16; Blk. 1; Lot 18; Gateway Western Estates
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

SERIAL NO.	DATE	AMOUNT
143-1535	10.0116	24.0114

APPLICATION

14277 M 1 3 8 30.00 -CK

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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. 67

DATE: August 13, 1968

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 1; Lot 18; Addition GATEWAY WESTERN ESTATES
Street Address _____.

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.)

Paul Daniels
By Ruth Biggenstaff
Signature of Applicant (owner or lessee)

7120 Logan
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: ~~8/13/68~~ by: ~~[illegible]~~
Date: 12/4/68 by: J. C. H.
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 8/13/68
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 12/4/68 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. 67

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 No; Range 6 E; Section 16;
Block 1; Lot 18; Addition GATEWAY WESTERN ESTATES
Street Address _____.

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: 3 mi ft.

Paul Daniels
By Keith Byggenstoff
Signature of Applicant (owner or lessee)

7120 Logan
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/13/68. Date Frwd. 8/13/68.
ACTION: Approved ☐ Disapproved ☒
Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 8/13/68. Date Frwd. 8/13/68.
ACTION: Approved ☐ Disapproved ☒
Signature: Charles Seal By Bob Skinner

3. City Engineer: Date Rec'd. 8-13-68. Date Frwd. 8-13-68.
ACTION: Approved ☐ Disapproved ☒
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. 67

PROPERTY WHERE SOIL TESTED:
Location: Township 9N
Section & ¼ Sect. 16
Property Dimensions: ___ ft. x ___ ft.
Area: ___ acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
CRETE-SHARPSBURG
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: ___
Address ___

Dates of Tests: AUGUST 11, 1968 to AUGUST 12, 1968. 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)
		Aug 11	2 P	Aug 12	2 P								
	36"												
1						2 P			2 P				1
2						2 P			2 P				1
3						2 P			11				1 3/4
4						2 P			11				3/4
5						2 P			11				3/4
6						2 P			11				1 5/8

Sum of Percolation Rates ___
Average of Rates: ___
Mean of Rates: 45/87 in

Kent Biggerstaff
Signature of Person Conducting Test

Address 7120 Logan
Phone: 466-7680

(Do not write below this line)

REVIEWING ACTION

REMARKS: appears satisfactory

DATE: august 13, 1968

Approved Percolation Rate(s)
A. 45 min./inch
B. ___ min./inch
C. ___ min./inch

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. 67

SPECIFICATIONS

DATE: AUGUST 13, 1968

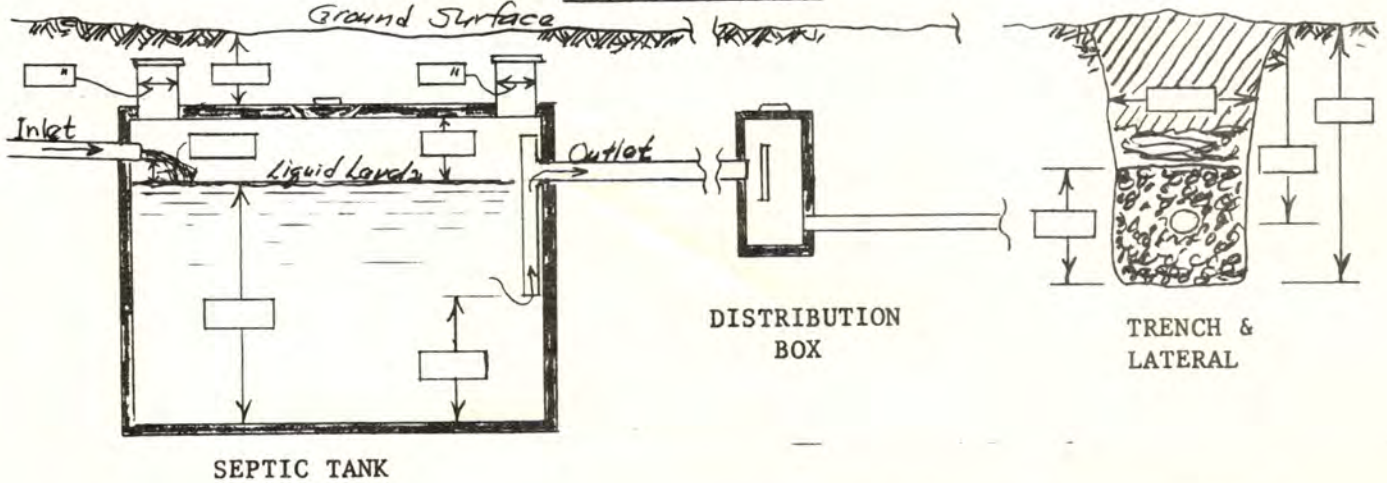
A. BUILDING SEWER:
1. Material CLAY TILE; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor ___in.
3. Distance between dwelling and septic tank 3'8" ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material ~~Concrete~~ FIBERGLAS; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___in.
3. Factory Built: Yes [X] (Company ~~Zumwalt~~ CORRIGATED FIBERGLAS)
No [ ]
4. Manholes: Over Inlet; diam. ___in.
Over Outlet; diam. ___in.
Below Grade ___in.
5. Inlet: Baffle [ ]; or Tee [X]
6. Outlet: Baffle [X]; or Tee [ ]
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade 36 in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

C. DISTRICTION BOX
1. Material Cone; No. available outlets 5.
2. Factory Built: Yes [X], (Company Tarvia)
No [ ]
3. Dimension: Length ___in.; Width ___in.
Depth ___in.
4. Distance from Septic Tank 13 ft.
5. Serial Distribution: Yes [X], No [ ]
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: FIBERGLASS HALF MOON
2. Lateral Lines: Depth below grade ___in.
Number 3; Length of each line 74 & 72 ft
Total length of Laterals 225 ft.;
Slope 4 in/100 ft. Diameter of pipe 16 in.; Shape ∩
Material: concrete [ ]; fiber GLASS ✓
asbestos [ ]; clay [ ]; other ___
Distance between lateral lines ___ft.
3. Trench Dimensions: Depth 48 in.;
Width 48 in.
4. Filter Material: GRAVEL.
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: ___minutes/inch

TYPICAL SKETCHES



Signature of Applicant

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: 6-5-90

☑ Evaluation of the Sewage Disposal System ☑ Enclosed is $75.00

Legal Description of Property: TWP. 9 North; RANGE 6E; SECTION SE¼ 16; BLOCK 9

LOT 5; ADDITION Gateway Western Estates; Street Address 1700 W. Denton Rd. Lincoln Ne

Directions to Property Replatted as Lot 5, Block 3

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System _____ Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	mr/mrs James Babcock	1700 West Denton Rd	423-1633
Tenant/Buyer:	mr/mrs. Thomas L. Sharpe Jr.	Rt 4 Box 218 Morgantown, W.V.	304-599-8399
Return to:	Marlene C. Litty	Woods Bros 3737 So 27 Lincoln, Ne	423-2373

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

Signature of Applicant Thomas Sharpe Address _____

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HEALTH DEPARTMENT USE ONLY

Date Received JUNE 7, 1990 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 6-11-90

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date 6-11-90 by [illegible]
Bacteria	☒ + trace/few	☐	Provisional:	☐	Date _____ by _____
Nitrate	☒ <0.1 8.5	☐	Disapproved:	☐	Date _____ by _____

Comments: owner pumps septic tank every 2 years

See Attached Letter ☐

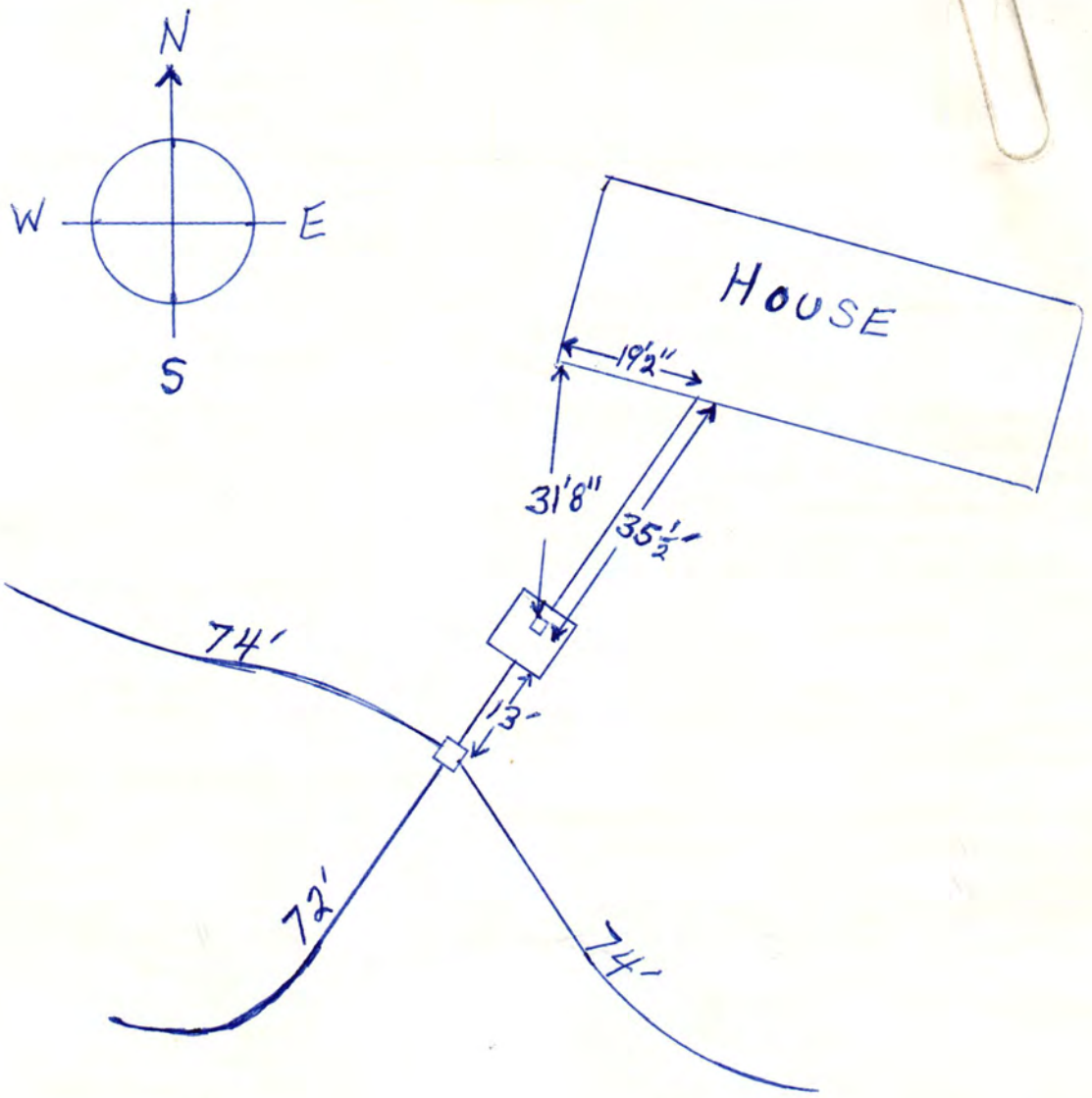
FINAL STATUS

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

APPROVED BY [signature] DATE 6-14-90

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


N
W
E
S
HOUSE
19½"
31'8"
35½'
74'
3'
72'
74'