FILE NO. 114

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

January 25, 1969
THIS LICENSE OR PERMIT EXPIRES

Krueger Construction
LICENSEE OR PERMITTEE

6530 Holdrege
ADDRESS

T 9N; R 6E; Section 16; Block 2; Lot 2; 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	
143 ~~110~~.1527	110.16	148.14	6-2	

SERIAL NO.	DATE	AMOUNT
16730	JAN 25	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. 114

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 2; Lot 2; 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.)

Roy Bailey for Krueger Const Co.
Signature of Applicant (owner or lessee)

6530 Hollrege
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: 9/18/69 by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 7/25/69
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/18/69 by: Jerrold C. Hood

FORM HD-30(67) REQUEST FOR SITE CLEARANCE 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. 114

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 2; Lot 2; Addition _____;
Street Address Gateway WESTERN ESTATES

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: None ft.

Roy Bailey for Krueger Const
Signature of Applicant (owner or lessee)

6530 Holdrege
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 7/25/69. ACTION: Approved ___ ☒ Disapproved ☐
Date Frwd. 7/28/69. Signature: Jerrold C. Wood

2. Supt. Bldg. Insp.: Date Rec'd. 7-28-69. ACTION: Approved ___ ☑ Disapproved ☐
Date Frwd. 7-28-69. Signature: Chas Seal - By Hinman

3. City Engineer: Date Rec'd. 7-28-69. ACTION: Approved ___ ☒ Disapproved ☐
Date Frwd. 7-28-69. Signature: J. 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. 114

PROPERTY WHERE SOIL TESTED:
Location: Township _____
Section & ¼ Sect. Lot 2 Sec 2
Property Dimensions: ___ft. x 300 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 23 to July 23. Weather: Precip. Dry Temp. 80 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	40"												
2	40"												

Roger Daley
Signature of Person Conducting Test

Address 489 5482
Phone: 4131 Clifford Dr.

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

1" every 9 min

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

DATE: July 25, 1969

Approved Percolation Rate(s)
A. _____ 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. 114

SPECIFICATIONS

DATE: July 23, 1969

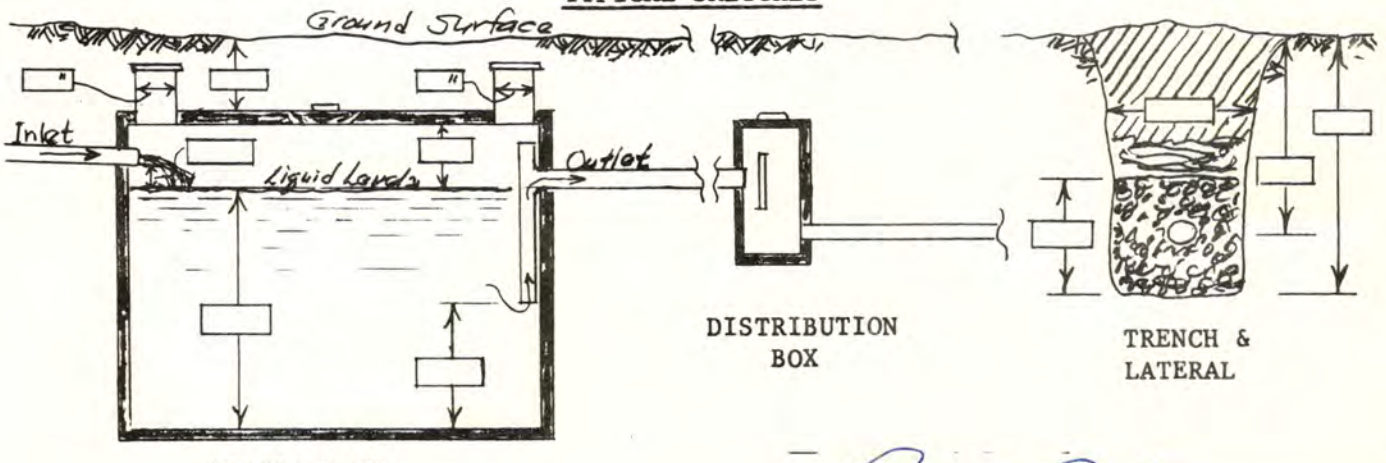
A. BUILDING SEWER: ORANGEBURG
1. Material ~~Tile~~; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 16 in.
3. Distance between dwelling and septic tank 84 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material ~~Steel~~ CONCRETE; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 48 in.
3. Factory Built: Yes ☒ (Company PRE-CAST ~~Concrete Products~~)
No ☐
4. Manholes: Over Inlet; diam. ~~24~~ 16 in.
Over Outlet; diam. 6 in.
Below Grade ~~24~~ 24 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 2 in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

C. DISTRIBUTION BOX BRICK
1. Material ~~Concrete~~; No. available outlets 3.
2. Factory Built: Yes ☒, (Company ___)
No ☒
3. Dimension: Length ___ in.; Width ___ in.
Depth ___ in.
4. Distance from Septic Tank ~~10~~ 5 ft.
5. Serial Distribution: Yes ☐, No ☒
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ~~TILE Round~~ ORANGEBURG
2. Lateral Lines: Depth below grade 20 in.
Number 3; Length of each line ___ ft
Total length of Laterals 165 ft.;
Slope 6 in/100 ft. Diameter of pipe ~~24~~ 4 in.; Shape ~~Tile~~ ROUND
Material: concrete ☐; ~~fiber~~ asbestos ☒; clay ☐; other ___
Distance between lateral lines 8 ft.
3. Trench Dimensions: Depth 30 in.;
Width 36 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 18 in.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line ___ ft.
6. Percolation Rate: ___ minutes/inch
1" every 9 min

TYPICAL SKETCHES

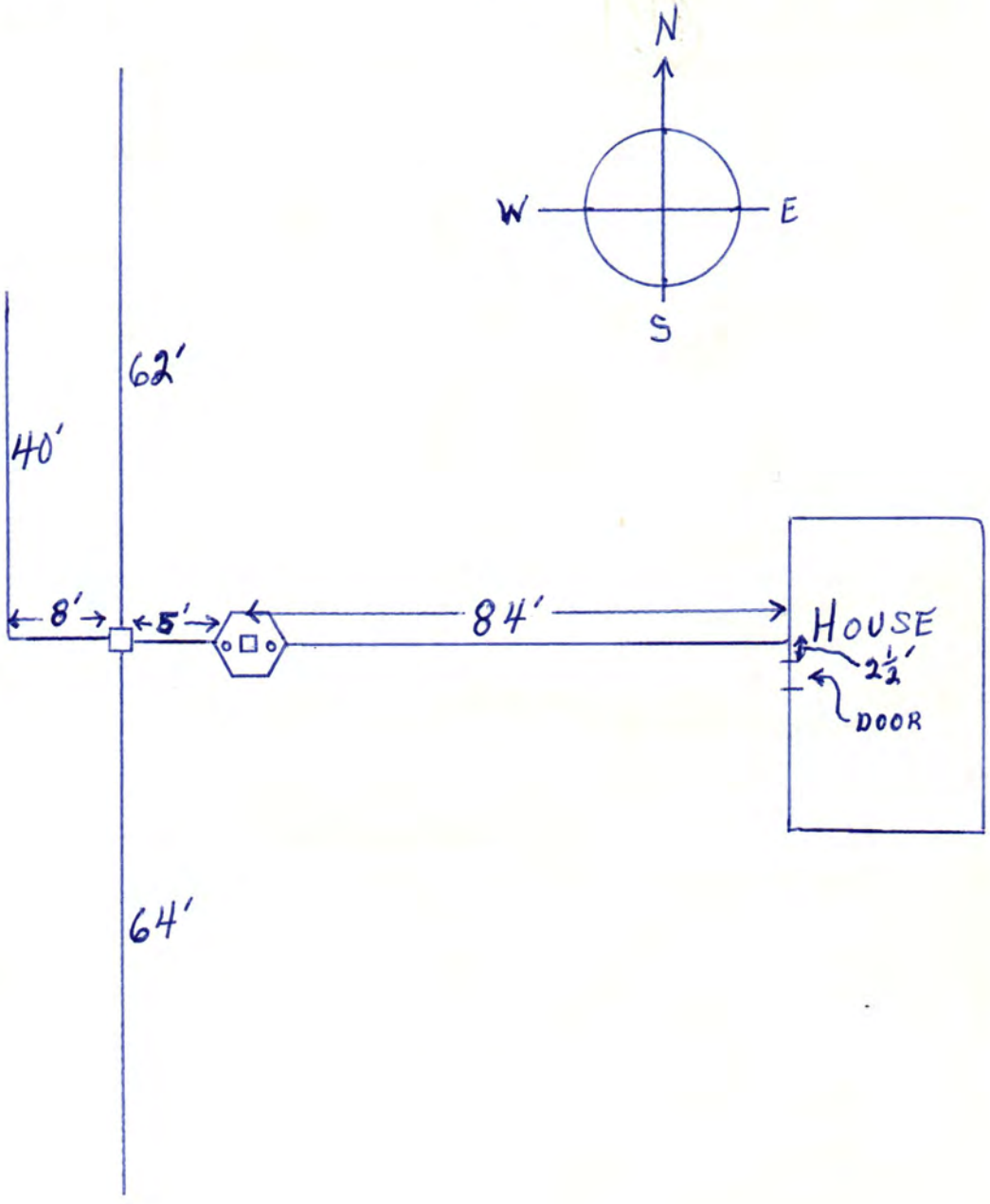


SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

Roger Bailey
Signature of Applicant


N
W
E
S
62'
40'
8'
5'
84'
HOUSE
2½'
DOOR
64'