FILE NO. 118

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

February 12, 1970
THIS LICENSE OR PERMIT EXPIRES

Krueger Construction
LICENSEE OR PERMITTEE

6530 Holdrege
ADDRESS

T 9N; R 6E; Section 16, Block 3; Gateway Western
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
143 110.1535	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
16862	AUG 12	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-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. 118

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 3; Lot 1; Addition _____;
Street Address Gateway Western.

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.

Kruegar Construction by Roy Bailey
Signature of Applicant (owner or lessee)

6530 Holdrege
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/11/69. ACTION: Approved ☑ Disapproved ☐
Date Frwd. 8/12/69. Signature: Kenneth W. Montagne

2. Supt. Bldg. Insp.: Date Rec'd. 8/12/69. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 8/12/69. Signature: K L Fickenscher

3. City Engineer: Date Rec'd. _____. ACTION: Approved ☐ Disapproved ☑
Date Frwd. 8-12-69 Signature: D D Wilson

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. 118

PROPERTY WHERE SOIL TESTED:
Location: Township 9N
Section & ¼ Sect. Block 3
Property Dimensions: ___ ft. x ___ ft. Lot 1
Area: 3 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Krueger Co:
Address 6530 Holdrege

Dates of Tests: Aug 11 1969 to _____. Weather: Precip. 90 Temp. Dry 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										45 min	3	
2	36										45 min	3½	

Sum of Percolation Rates
Average of Rates: 1" in 20 min
Mean of Rates: 1" in every 20 min

Roger Raley
Signature of Person Conducting Test

Address 4131 CL F Ford
Phone: 489-5482

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

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

DATE: August 12, 1969

Kenneth V. Wiedeman
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. 118

SPECIFICATIONS

DATE: August 11, 1969

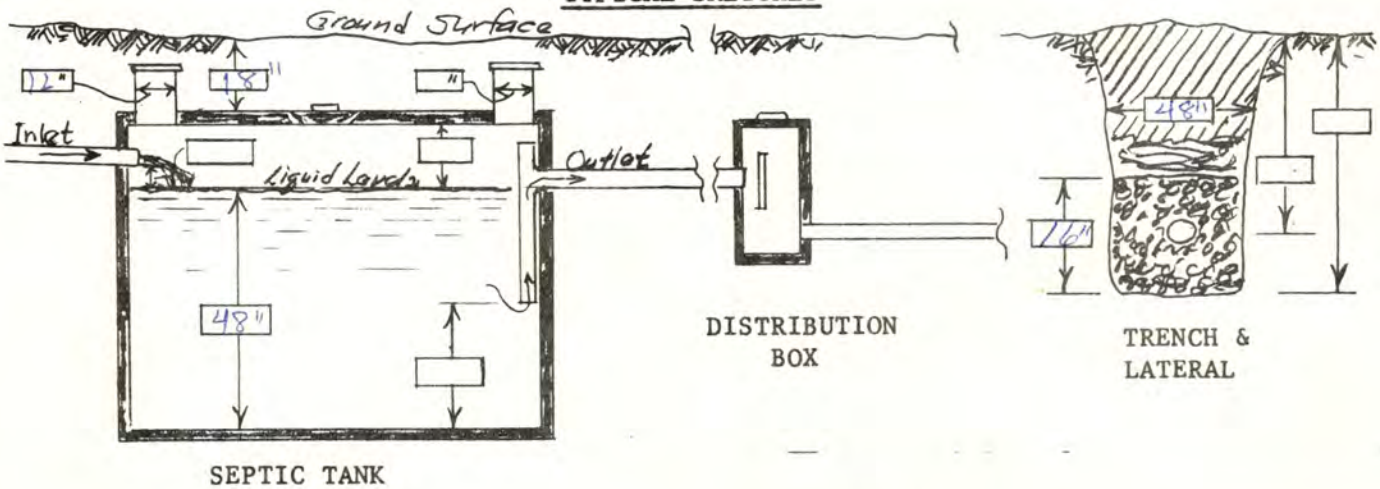
A. BUILDING SEWER: ORANGEBURG
1. Material ~~Cast Iron~~; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 18 in.
3. Distance between dwelling and septic tank 30 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ 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 ~~Concrete~~)
No ☐
4. Manholes: Over Inlet; diam. ~~24~~ 16 in.
Over Outlet; diam. 6 in.
Below Grade ~~48~~ in.
5. Inlet: Baffle ☐; or Tee ☑
6. Outlet: Baffle ☐; or Tee ☑
Depth of outlet below inlet 2 in.
7. Depth of top of tank below finished grade 18 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 ~~Concrete~~) No ☒
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☐, No ☒
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ~~Tile~~ ORANGEBURG
2. Lateral Lines: Depth below grade 4 in.
Number 3; Length of each line 78½ ft
Total length of Laterals ~~234~~ ft.; 208
Slope 6 in/100 ft. Diameter of pipe ~~3~~ 4 in.; Shape ROUND
Material: concrete ☐; fiber ~~Glass~~ asbestos ☒; clay ☐; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth 36 in.;
Width ~~24~~ 36 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 16 in.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line 25 ft.
6. Percolation Rate: 20 minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

Signature of Applicant

Lincoln-Lancaster County Health Department

009

3140 "N" Street, Lincoln, Nebraska 6851(

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER/LOAN A

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

MAKE CHECK PAYABLE TO: Lincoln-Lancaster County Health Department or LLCHD

☐ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

☐ Evaluation of the Individual Water System ☐ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 1611 West Ridge

Twp 9N Range 6E Section 16 1/4 1/4 Block 3 Lot 1 Addition GATEWAY WESTERN

Directions to Property West on Denton Road to S.W. 12th, then north 2-3 blocks to West Ridge.

Location of Well NORTH WEST CORNER OF House Tap Location: Inside ☐ Outside ☐

Location of Sewage System EAST OF HOUSE Year Installed 1981

Call seller 488-9053 and he will meet you

	NAME	ADDRESS	PHONE
Present Owner:	Jack Hoenig	1611 West Ridge	488-9053
Tenant/Buyer:	Doug Christensen	3001 Rydling	423-7262
Return to: (Call me + I'll pick it up)	Carla Hines	800 So. 13th Lincoln, Ne 68508	432-0252

Signature of Applicant Carla B. Hines Address 800 So. 13th Date 10/17/95

Kimball + Associates Lincoln, Ne. 68508

HEALTH DEPARTMENT USE ONLY

Date Received 10/17/95 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 10/17/95

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☐	Approved ☐	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☒	Date ___/___/___ by ___
Nitrate	☒ 5.9 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

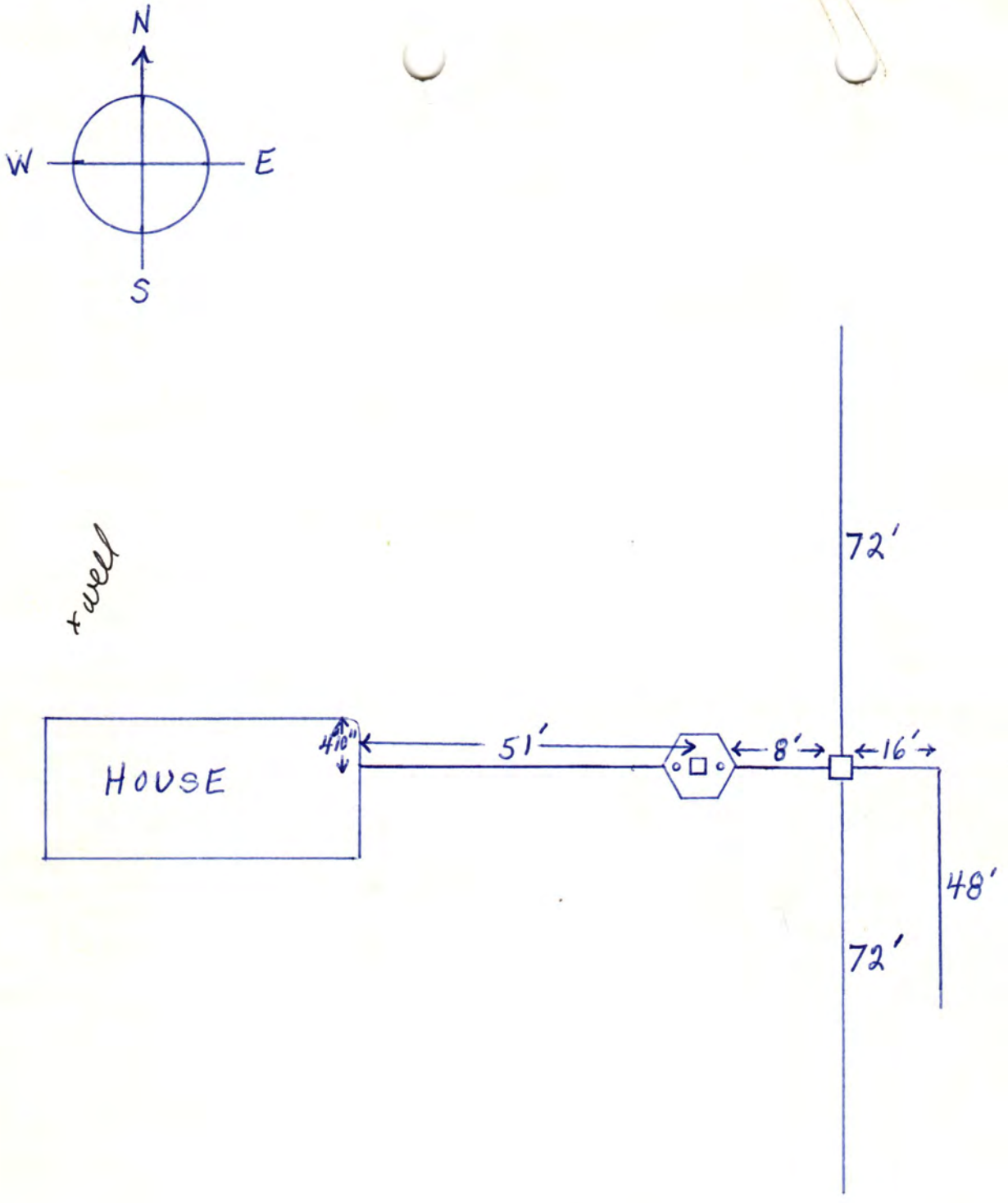
Comments: PROVISIONAL APPROVAL ON SEWAGE SYSTEM SINCE IT WAS COVERED WITHOUT INSPECTION AT TIME OF INSTALLATION. NO EVIDENCE OF MALFUNCTION. IF THE TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 10/23/95

Approval or disapproval is based on State and local 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 operations.


N
W
E
S
+well
72'
HOUSE
4'10"
51'
8'
16'
48'
72'