LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT
SEWAGE INSTALLATION

No. 92380087301

Issued 07/07/92
Expires 01/07/93

ESTABLISHMENT
GARY STANSBURY
T9N R6E SEC 16 QTR NW
EQUEES BLK 3 LOT 6

FEES: Permit 018754 $150.00

Total $150.00

MITTEE GARY STANSBURY
5656 CALVERT ST
LINCOLN NE 68506

Issued By COUNTY HEALTH

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

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
7/7/92	PAID

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 471-7800

A

FILING FEE: $_____

FILE NO._____

DATE: 7-2-92

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9N ; Range 6E ; Section 16/NW 1/4;
   Block 3 : Lot 6 : Addition 1st Equestrian Estates
   Street Address 6301 Equestrian Dr.

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3. Describe 2 story home

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: N/A ft.

Gary Stansbury
Signature of Applicant (Owner or Lessee)

5656 Calvert
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/2/92. Date Frwd. 7/6/92. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 7/6. Date Frwd. 7/6. ACTION: Approved ☒ Disapproved ☐ Signature:

3. City or County Engineer: Date Rec'd. 7-6-92. Date Frwd. 7-6-92. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 8/21 by: ____
Date: 8-21-92 by: PD
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8/21/92 By:

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9 ; Range 6 ; Section & ¼ Section 16 / NW¼
Property Dimensions: 497 ft. x 265 ft. Area: 3 acres. (Attach Sheet C with sketch of property).

Soil Type: Silty Clay ☑ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .

Dates of Tests: 6/23/92 to 6/24/92 . Weather: .15 rain on 24th Precip. Overcast Temp. 69-80°.

OWNER: Gary Stansbury

Address: 6301 Equestrian Dr.

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./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36"	6/23	1:00	6/24	1:30	6/24	1:30	6"	5:30 24	3"	240	11¼"	30/ 3"
2	36"	6/23	1:00	6/24	1:30	6/24	1:30	6"	5:30 24	2"	240	9¾"	30/ 2"
3	36"	6/23	1:00	6/24	1:30	6/24	1:30	6"	5:30 24	7/8"	240	7 1/2"	30/ 7/8"
4	36"	6/23	1:00	6/24	1:30	6/24	1:30	6"	5:30 24	3/4"	240	7¼"	30/ 3/4"
5	36"	6/23	1:00	6/24	1:30	6/24	1:30	6"	5:30 24	1"	240	3¼"	30/ 1"
6	36"	6/23	1:00	6/24	1:30	6/24	1:30	6"	5:30 24	¼"	240	2"	30/ ¼"

Sum of Percolation Rates: 180/ 7 7/8"
Average of Rates: 1.30
Mean of Rates: 1.63

Gary Stansbury
Signature of Person Conducting Test

Address 5656 Calvert St. Phone 488-2711

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 23 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: _____
Soil Type (SCS): Wymore Silty clay loam
Date: July 2, 1992

Jerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

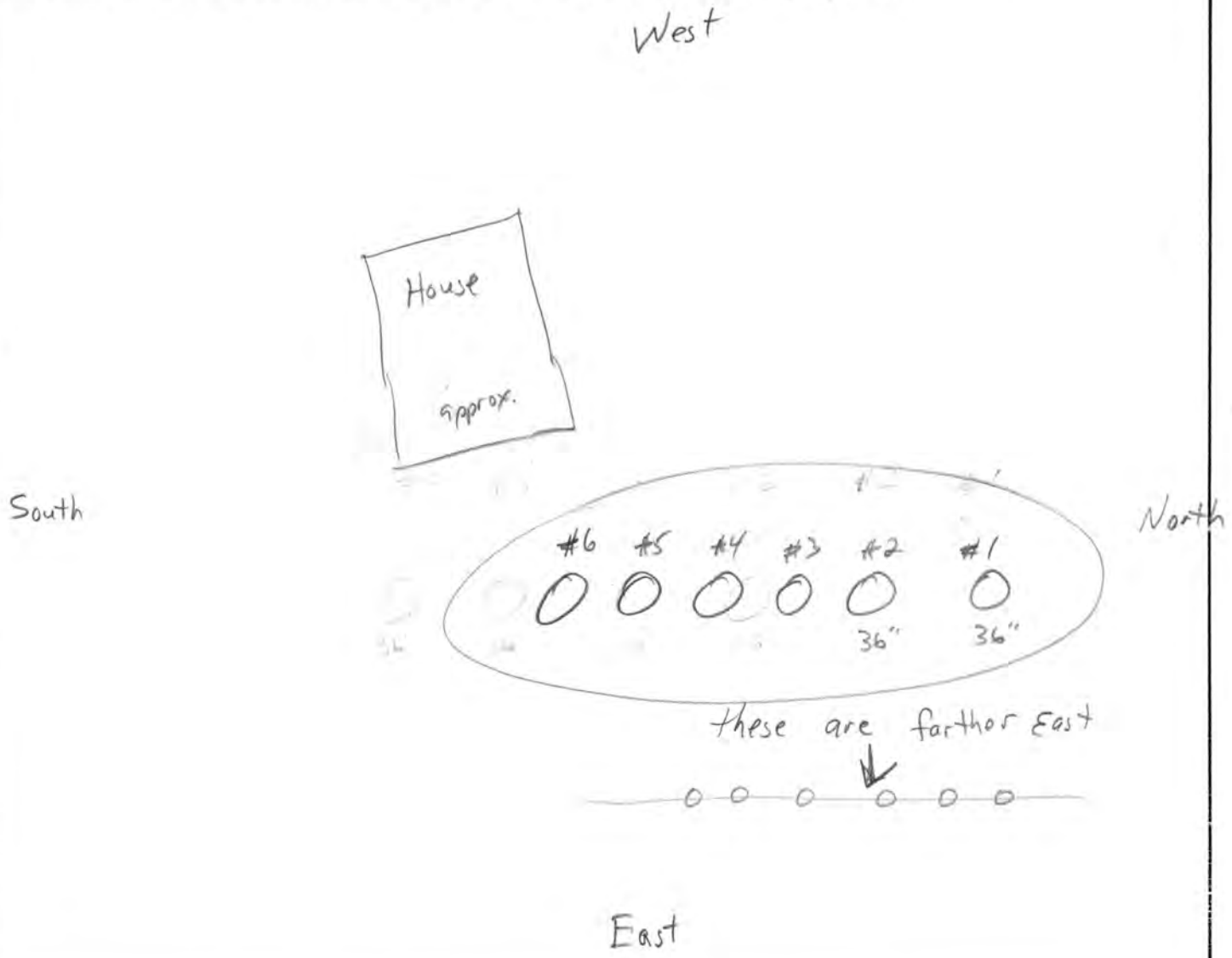
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C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1250 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed ~~665~~ 665 sq.ft.

_____
Signature of Reviewing Official

FORM 20104-0477
PLANS & SPECIFICATIONS FOR 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
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D

DATE: 8 21-92

FILE NO. _____

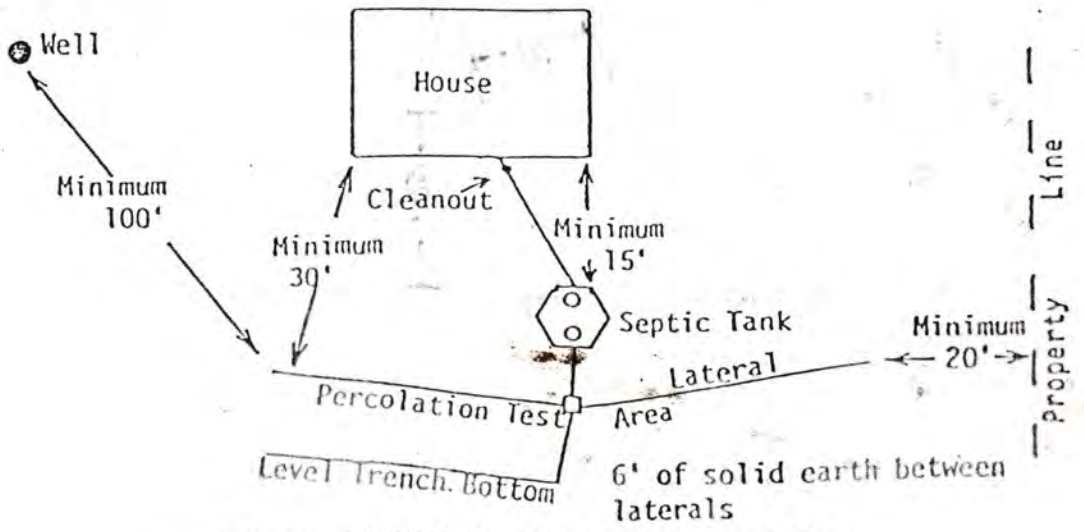
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Scedule 40; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 39' ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line 75 ft.; Stream - ft.; Pressure Line - ft.; Property Line 150' ft.

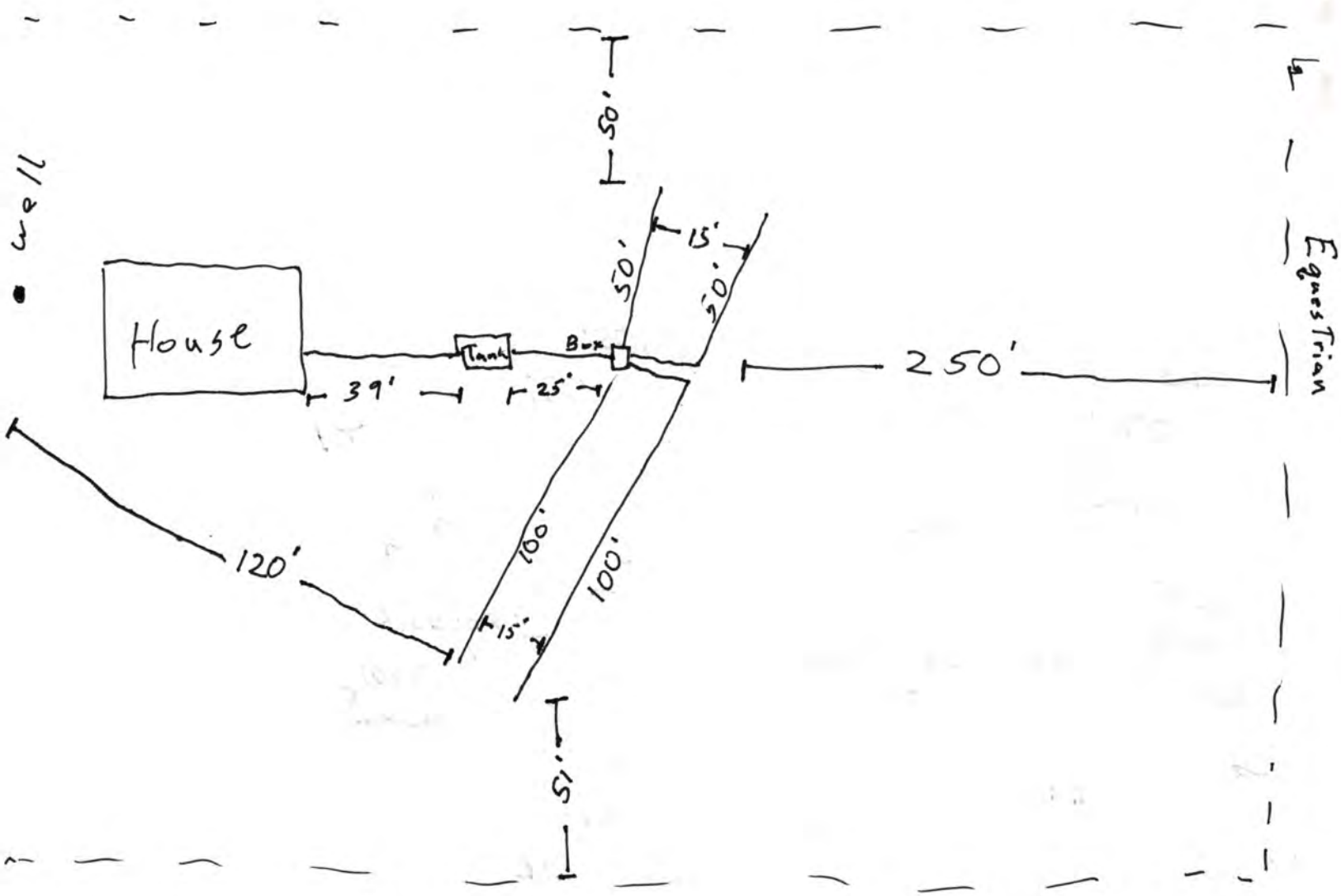
B. SEPTIC TANK:
1. Material Concrete; No. of compartments 3.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☑ No ☐
(Company precast)
4. Manholes: Over Inlet; diam. - in.
Over Outlet; diam. ____ in.
Riser Above ☑ Below ☐ Grade 3 in.
5. Inlet: Baffle ☑; or Tee ☐
6. Outlet: Baffle ☑; or Tee ☐
7. Depth of top of tank below finished grade 12 in.
8. Distances to:
Well or Suction Line 100 ft.; Stream - ft.; Pressure Line - ft.; Property Line 150' ft.

C. DISTRIBUTION BOX:
1. Material plastic; Number - available outlets 5.
2. Factory Built: Yes ☑ No ☐
(Company ?)
3. Distance from Septic Tank 25 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☑
Diameter of Half Round ____ or Perforated Pipe 4".
Material: fiberglass ☐; plastic ☑; concrete ☐; other ____.
2. Lateral Lines:
Number 4; Length of each line 100, 100, 50, 50, ____ ft.;
Total length of laterals 300 ft.;
Distance between lateral lines 15 ft.
3. Trench dimensions: Width 3 ft.; Slope 3 in/100 ft.; Average Depth 30 in.
4. Filter Material: Gravel
Depth of Material 12 in.
5. Distances to:
Well or Suction Line 120 ft.; Stream - ft.; Pressure Line - ft.; Property Line 50 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN



6301 Equestrian

Wellmann Plumbing