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. 91380067801

Issued 03/13/91
Expires 09/13/91

ESTABLISHMENT

CLEMENT SOUCIE
T9N R6E SEC 17

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

CLEMENT SOUCIE
RR0001
DENTON NE 68339

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
3/15/91	PAID

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

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: 3/12/91

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 17 ; SEE ATTACHED
   Block_____: Lot_____: Addition_____
   Street Address_____

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2 . Describe_____

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

4. Distance to public sewer: 4 miles ~~ft~~.

Clement F Louie
Signature of Applicant (Owner or Lessee)

RR 1 Lincoln Nebr 68339
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 3/13/91. Date Frwd. 3/13/91. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 3/13/91. Date Frwd. 3/13/91. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]
3. City or County Engineer: Date Rec'd. 3/13/91. Date Frwd. 3/13/91. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL NO WELL PERMIT YET.

Site Visits:
Date: 4/25/91 by: L.C.H.
Date:_____ by:_____
Date:_____ by:_____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 5/1/91 By: Jerrold C Hood

FORM 23-43

Nebraska State Health Department
Division of Housing & Environmental Health

SAN 1701

SOIL ABSORPTION TEST DATA REPORT

PROPERTY WHERE SOIL TESTED:
Location: Township 9
Section & ¼ Sect. 17
Property Dimensions: 550 ft. x 1,702 ft.
Area: 21½ acres. (Attach sketch of property showing hole location).

Owner: Kim Soucie
Address: RR 1 Lincoln Nebr 68339

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

Dates of Tests: 3-9-91 to 3-10-91. Weather: Precip. 0 Temp. 50 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	3-9	1300	3-10	1300	3-10	1500				30 min		3/4"
2	"	"	1300	"	"	"	"				30 min		2 1/4"
3	"	"	"	"	"	"	"				"		2"
4	"	"	"	"	"	"	"				"		1 1/4"
5	"	"	"	"	"	"	"				"		1
6	"	"	"	"	"	"	"				"		3

Sum of Percolation Rates
Average of Rates:
Inches per minute:

Andrew Farmer
Signature of Person Conducting Test

Address 3925 Touzalin lincoln ne.
Phone 464 3947

(Do not write below this line)

REVIEWING ACTION

REMARKS: Sharpsburg Silty Clay Loam or Wymore Silty Clay Loam depending on location on lot.

Approved Percolation Rate(s)
A. 18 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: March 13, 1991

Gerrold 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 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

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: March 13, 1991

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 404 sq.ft.

Jerrold C. Hood
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
Lincoln, Nebraska 68502
Phone: 471-7800

D

DATE: 4/29/91

FILE NO. _____

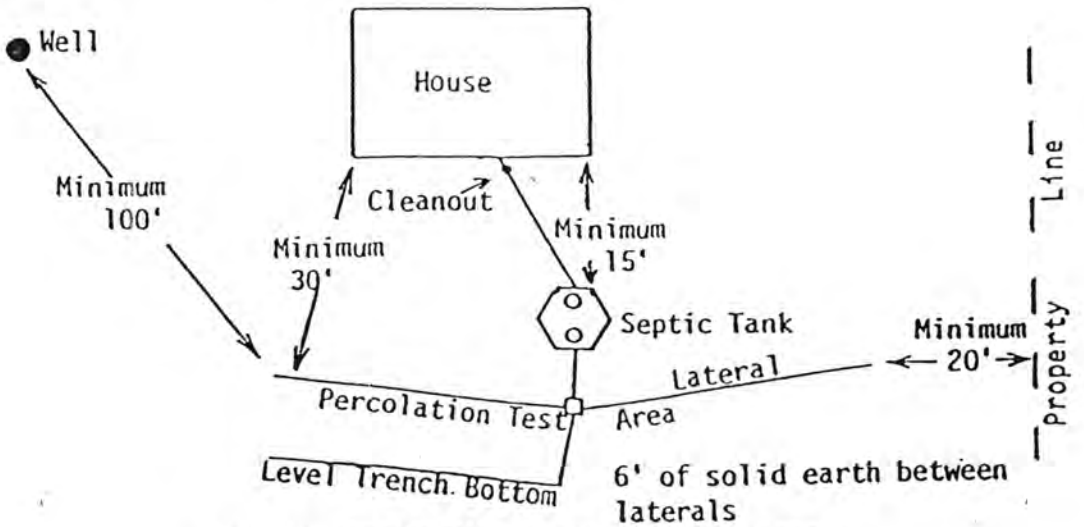
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 50 ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line 200 ft.; Stream None ft.; Pressure Line None ft.; Property Line 250 ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments ____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Precast)
4. Manholes: Over Inlet; diam. 24 in.
Over Outlet; diam. ____ in.
Riser Above ☐ Below ☒ Grade 12 in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 36 in.
8. Distances to:
Well or Suction Line 250 ft.; Stream None ft.; Pressure Line None ft.; Property Line 250 ft.

C. DISTRIBUTION BOX:
1. Material Plastic; Number - available outlets 6.
2. Factory Built: Yes ☒ No ☐
(Company Lincoln Lumber)
3. Distance from Septic Tank 40 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 2; Length of each line 100, 40, ____, ____, ____ ft.;
Total length of laterals 140 ft.;
Distance between lateral lines ____ ft.
3. Trench dimensions: Width 3 ft.;
Slope 25 in/100 ft.; Average Depth 24 in.
4. Filter Material: Gravel
Depth of Material 12 in.
5. Distances to:
Well or Suction Line 300 ft.; Stream None ft.; Pressure Line None ft.; Property Line 250 ft.

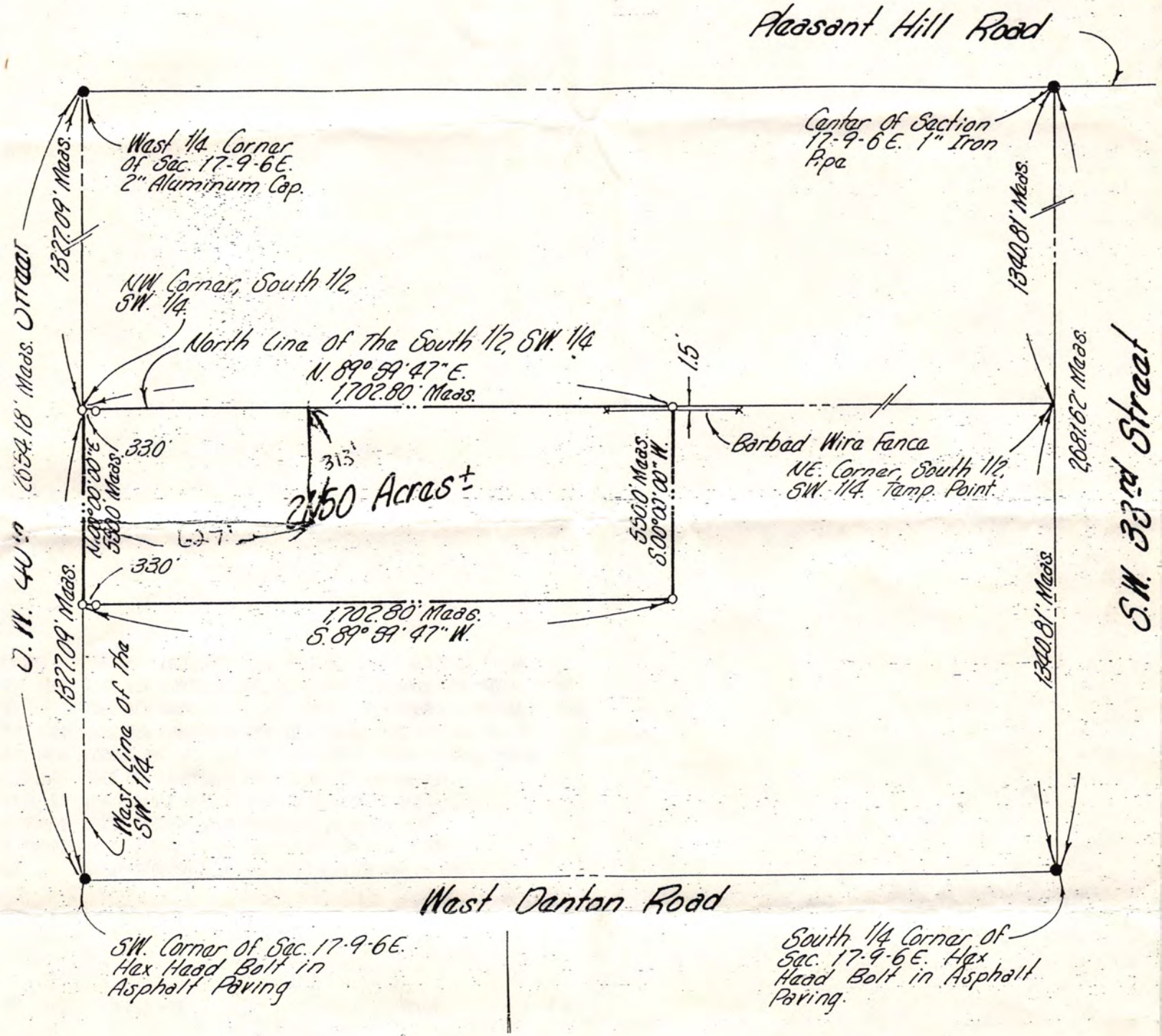


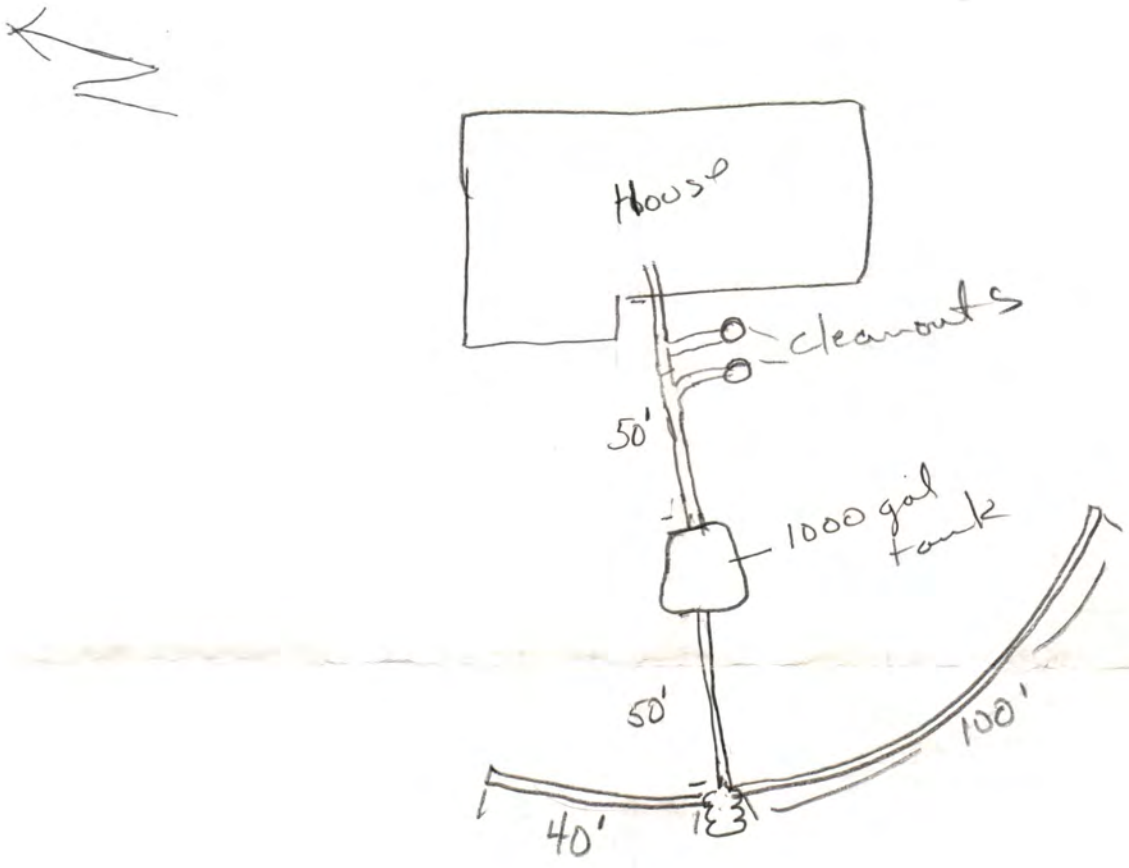
TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Southwest Quarter of _____ Section 17 T 9 N, R 6 E of the 6th P.M.

Job No. 12827

October 16, 1990




N
House
cleanouts
50'
1000 gal tank
50'
100'
40'