CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 832

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

November 24, 1976
THIS LICENSE OR PERMIT EXPIRES

Wesley Pope
LICENSEE OR PERMITTEE

RFD #1, Lincoln, NE 68505
ADDRESS

T9N; R6E; Sec. 17; Bl. 2; Lot 7; Hitching Post Hills Add.
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
624-1535		

APPLICATION HEALTH DEPARTMENT

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 832

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 5/24/76

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

1. Legal description of property: Twp. 9 N ; Range 6E ; Section 17
Block 2 ; Lot 7 ; Addition Hitching Post Hills
Street Address Pleasant Hill Road

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.

Wesley A Pape
Signature of Applicant (Owner or Lessee)

RFD 1
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/25/76 . Date Frwd. 5/25/76 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 5-25-76 . Date Frwd. 5-25-76 . ACTION: Approved ☒ Disapproved ☐ Signature: Williamsen

3. City or County Engineer : Date Rec'd. 5-25-76 . Date Frwd. . ACTION: Approved ☒ Disapproved ☐ Signature:

REMARKS OR REASONS FOR DISAPPROVAL

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO._____

DATE: 5/24/76

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 appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N ; Range 6E ; Section 17 ; Block 2 ; Lot 7 ; Addition Hitching Post Hills .
   Street Address _____.

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
   No. of Bedrooms 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-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Wesley J. Pope
Signature of Applicant (owner or lessee)

RFD 1
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;_____
   Filing Fee: $ 30.00

2. Site Visits:
   Date: 7-27-76 by: jw
   Date:_____ by:_____
   Date:_____ by:_____

3. Date: Approved [X]; Disapproved [ ] 5/25/76
   by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 7-27-76 by: James Wewilka

FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 475-6221)

FILE NO. _____

PROPERTY WHERE SOIL TESTED:
Location: Township 9N ; Range 6E
Section & ¼ Sect. 17
Property Dimensions: 350 ft. x 400 ft.
Area: 3.21 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Wesley J. Pope
Address RFD 1

Dates of Tests: 5-19-76 to 5-20-76. Weather: Precip. 0 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	32"	5/19	8 PM	5/20	6 PM	5/20	6 PM	6"	4:30 PM	1/2	30 M	1 1/2	
2										1 1/2		1	
3										3/4		1 1/4	
4										3/4		1 1/4	
5										1/2		1 1/2	
6										2			

Robert D Johnson
Signature of Person Conducting Test

Address 2618 no 31st
Phone: _____

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 24 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: May 25, 1976

Jerrold C. Hood
Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. _____

SPECIFICATIONS

DATE: _____

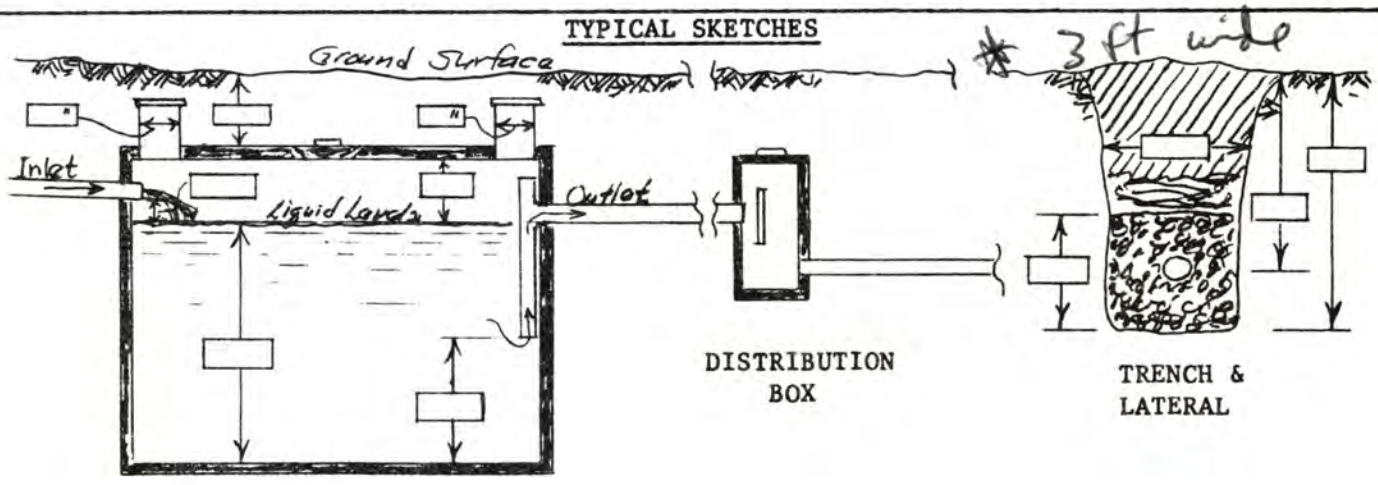
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concr; No. of compartments _____.
2. Capacity 500 gals.; Liquid depth 51 in.
3. Factory Built: Yes ☐ (Company Mid Cast Step) No ☐
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade _____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 ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material Concr; No. available outlets 3.
2. Factory Built: Yes ☒, (Company Mid Cast Step) No ☐
3. Dimension: Length 20 in.; Width 14 in. Depth 14 in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half moon
2. Lateral Lines: Depth below grade __in.
Number ____; Length of each line ___ft
Total length of Laterals 169 ft.; 226*
Slope ____in/100 ft. Diameter of pipe 20 in.; Shape Half moon
Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: Road 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



SEPTIC TANK

_____
Signature of Applicant

N

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: 8-17-1989

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

Legal Description of Property: TWP. 9N ; RANGE 6E ; SECTION 17 ; BLOCK 2

LOT 7 ; ADDITION HITCHING POST H. ; Street Address 2900 PLEASANT HILL RD.

Directions to Property

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System _____ Year Installed _____

	NAME	ADDRESS	PHONE
Present Owner:	Mr. & Mrs. MARTENS	2900 PLEASANT HILL RD	423-4934
Tenant/Buyer:	LEO & RAMONA L. STELER	4405 SO. 45th LINCOLN	488-0140
Return to:	BEATA BENA HOME REAL	ESTATE 3910 SOUTH ST. 68506	488-4663

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

Signature of Applicant _____ Address 4405 SO. 45th LINCOLN

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HEALTH DEPARTMENT USE ONLY

Date Received AUGUST 17, 1989 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 8/21/89

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date 8/21/89 by L.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 8-22-89 by [illegible]
Nitrate	☒	☐	Disapproved:	☒	Date _____ by _____

Comments: SOMETHING HAS DUG INTO THE LATERAL CAUSING DIRT TO INFILTRATE INTO THE CENTER LATERAL.

Defficiency Corrected See Attached Letter ☐

FINAL STATUS * Noted that 2 of the 3 laterals may possibly be failing

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

APPROVED BY Conrad C. Wood R.S. DATE AUGUST 23, 1989

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