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. 2938000790 1

Issued 12/13/89
Expires 06/13/90

ESTABLISHMENT

MON ARK HOMES
T7N R6E SEC 17
HITCHING POST HILL BLK 2 LOT 2
3RD ADDITION

FEES: Permit 01375. $150.00

Total $150.00

PERMITTEE

MON ARK HOMES
415 S 43 ST
LINCOLN NE 68510

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT

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

8938000079

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: 12/5/89

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. T9N ; Range R6E ; Section 17 ;
   Block 2 : Lot 7 : Addition Hitching Post Hills 2nd Addition
   Street Address 3201 West Rodeo Rd.

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe_____

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

4. Distance to public sewer: _____ft.

MonArk Homes
Signature of Applicant (Owner or Lessee)

415 5043 Lincoln 68510
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 12/12/89. Date Frwd. 12/18/89. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 12/18/89. Date Frwd. 12/15/89. ACTION: Approved ☐ Disapproved ☐ Signature: Mel Goddard

3. City or County Engineer: Date Rec'd. 12-18-89. Date Frwd. 12-18-89. ACTION: Approved ☒ Disapproved ☐ Signature: Robert D. Miller

REMARKS OR REASONS FOR DISAPPROVAL NO WELL PERMIT YET.

Site Visits:
Date: 12-12-89 by: rms
Date:_____ by:_____
Date:_____ by:_____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 1-4-90 By: Ron Mayhew

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
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED: Block #2, Lot #2, Hitching Post Hills, 3rd Addition 3201 Rodeo Rd Lincoln, Ne 68523

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).

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

Dates of Tests: 6-18-89 to 6-19-89. Weather: Precip. _____ Temp. _____.

OWNER: Tony Crapo

Address: 3201 West Rodeo Road

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"	6-18	2:00	6-19	1:00	6-19	1:00	6"	4:30	5½"	30 min	½"	
2	36"	6-18	2:00	6-19	1:00	6-19	1:00	6"	4:30	5½"	30 min	½"	
3	36"	6-18	2:00	6-19	1:00	6-19	1:00	6"	4:30	6½"	30 min	½"	
4	36"	6-18	2:00	6-19	1:00	6-19	1:00	6"	4:30	5½"	30 min	½"	
5	36"	6-18	2:00	6-19	1:00	6-19	1:00	6"	4:30	5"	30 min	1"	
6	36"	6-18	2:00	6-19	1:00	6-19	1:00	6"	4:30	4 3/4"	30 min	1 ¼"	

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

Pat Strohmeyer
Signature of Person Conducting Test

Address 4401 No 27th Phone 467-1627

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): Wymore Silty Clay Loam

Date: December 7, 1989

Approved Percolation Rate (a)
A. 44 min./inch
B. _____ min./inch
C. _____ min./inch

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: _____

FILE NO. _____

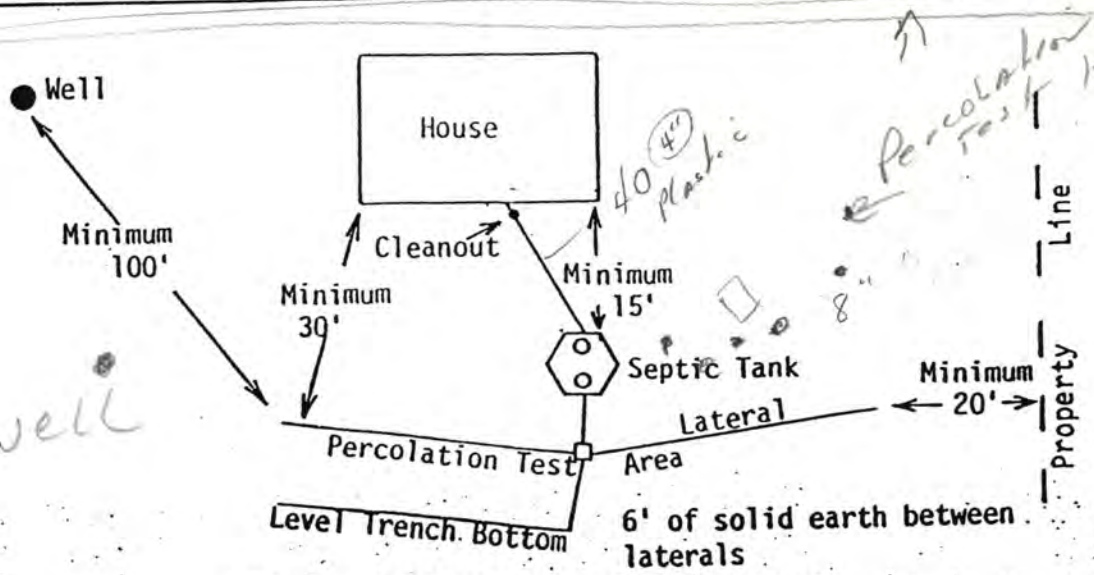
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material #160 ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 78 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:
1. Material Pre Cast ; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐ (Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 10" in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Pre Cast ; Number - available outlets _____.
2. Factory Built: Yes ☒ No ☐ (Company _____)
3. Distance from Septic Tank 6 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 3 ; Length of each line 100, 100, 100, _____, _____ ft.;
Total length of laterals 300 ft.;
Distance between lateral lines 9' ft.
3. Trench dimensions: Width 3' ft.;
Slope 6 in/100 ft.; Average Depth 3' in.
4. Filter Material: Road Gravel
Depth of Material 16 in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Larry Schwarck

12-12-89

