LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1705-C

INDIVIDAUL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

MARCH 24, 1981 — THIS PERMIT EXPIRES

Ray Braunsroth — ISSUED TO

Route 1, Lincoln, NE 68502 — ADDRESS

T9N, R6E, Section 19 N½ of NW¼

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH

ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

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: 474-1541

A

FILING FEE: $ 60.00

FILE NO. 1705-C

DATE: 9-22-80

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 19 ; 80 ACRES
   Block _____ : Lot _____ : Addition _____ N½ of NW¼
   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: _____ ft.

Ray B Braunroth
Signature of Applicant (Owner or Lessee)

Rt #1 Lincoln Nebr.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/24/80. Date Frwd. 9/24/80. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 9/24/80. Date Frwd. 9/24/80. ACTION: Approved ☐ Disapproved ☐ Signature: Walt Stuhr

3. City or County Engineer: Date Rec'd. 9-24-80. Date Frwd. 9-24-80. ACTION: Approved ☒ Disapproved ☐ Signature: Henry Ralf

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11-7-80 by: rm
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-7-80 By: Ron Maynard

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: 474-1541

B

FILE NO. 1705-C

PROPERTY WHERE SOIL TESTED: #9

Location: Township YANKEE HILL Range 6E ; Section & ¼ Section N½ NW¼ 19-9-6E
Property Dimensions: 26.6 ft. x 71.4 ft. Area: 80 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 3 Sept 80 to 4 Sept 80. Weather: Precip. NONE Temp. 86 .

OWNER: RAY B. BRAUNSROTH
Address: Route 1 Linc, NE

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	34"	3 Sept	10:00	3 Sept	2:00	4 Sept	9:00	12"	1:00	11½	30	½	1/60
2	"	"	"	"	"	"	"	"	"	11½	"	½	1/60
3	"	"	"	"	"	"	"	"	"	10⅝	"	1⅜	11/240
4	"	"	"	"	"	"	"	"	"	9¼	"	2¾	11/120
5	"	"	"	"	"	"	"	"	"	9	"	3	1/10
6	"	"	"	"	"	"	"	"	"	5	"	7	7/30

Sum of Percolation Rates: 1/4
Average of Rates: 1/24
Mean of Rates: 1½

M. J. Villalobos
Signature of Person Conducting Test

Address RFD #1 Garland, Me. Phone 588-2643

(Do not write below this line)

REVIEWING ACTION

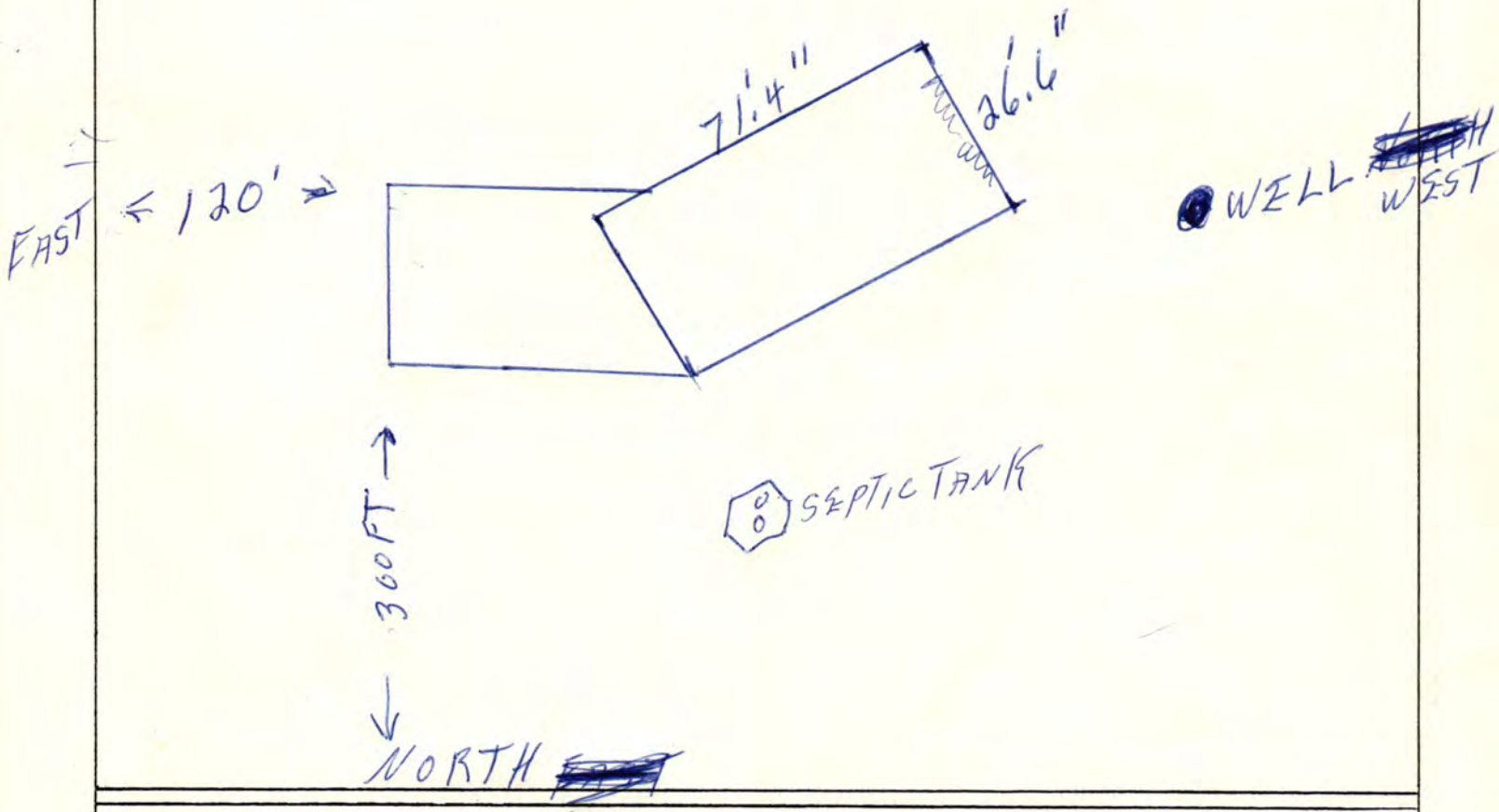
Remarks:
Soil Type (SCS): Wymore Silty Clay Loam
Date: September 24, 1980
Grades into an inclusion

Approved Percolation Rate (a)
A. 12 min./inch
B. ____ min./inch
C. ____ min./inch

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 ☐	LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT Division of Environmental Health 2200 St. Marys Avenue Lincoln, Nebraska 68502 Phone: 474-1541 **C**
Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.	FILE NO. 1705-C

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



REVIEWING ACTION

Remarks: _____

Date: September 24, 1980

$4\overline{)352}$ 88 $3\overline{)352}$ 117

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 352 sq.ft.

Gerrold C. Zood
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: 474-1541

D

DATE: 11/7/80

FILE NO. _____

RAY BRAUNSROTH
SW 40TH & DENTON RD.

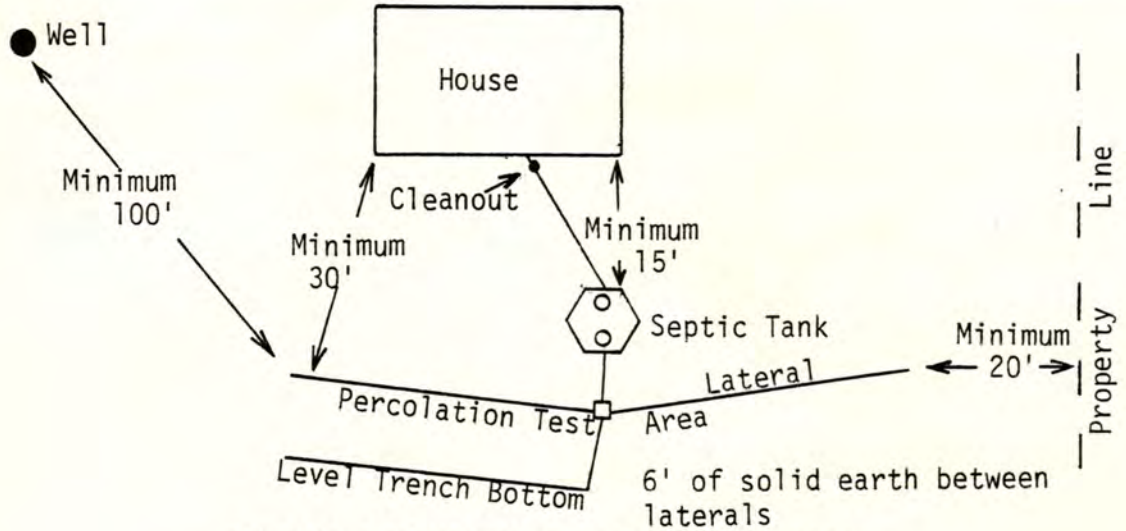
SPECIFICATIONS AS BUILT

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:
1. Material CONCRETE; No. of compartments 1.
2. Capacity 1,000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company PRE CAST STEP)
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 10 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 _____ in.
8. Distances to:
Well or Suction Line 170 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 140 ft.

C. DISTRIBUTION BOX:
1. Material PLASTIC; Number - available outlets 7.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank _____ ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 12" or Perforated Pipe _____.
Material: fiberglass ☒; plastic ☐; concrete ☐ ; other _____.
2. Lateral Lines:
Number 2; Length of each line 88, 88, _____, _____, _____ ft.;
Total length of laterals 176' ft.;
Distance between lateral lines 12½ ft.
3. Trench dimensions: Width 3 ft.; Slope 4 in/100 ft.; Average Depth _____ in.
4. Filter Material: ROAD GRAVEL (40T)
Depth of Material 18 in.
5. Distances to:
Well or Suction Line OVER 200 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 60 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 11/7/80 INSTALLER BRAD SOUTHWICK
HICKMAN, NE 792-2462

