CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 1310

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

November 8, 1978 — THIS LICENSE OR PERMIT EXPIRES

Steve Harron % Pottyco Inc., 1520 Pioneers Blvd., Lincoln, NE — LICENSEE OR PERMITTEE / ADDRESS

T9N, R6E, Section 21 NW¼ — 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

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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: 474-1541

A

FILING FEE: $ 30.00

FILE NO. _____

DATE: MAY 4, 1978

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 NW 1/4 21 ;
   Block _____ : Lot _____ : Addition SEE ATTACHED
   Street Address _____

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: NA ft.

Steve Hassop c/o Pollyco Inc.
Signature of Applicant (Owner or Lessee)

1520 Pioneer Blvd. Lincoln, Ne
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/5/78 . Date Frwd. 5/8/78 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5-8-78 . Date Frwd. 5-8-78 . ACTION: Approved ☒ Disapproved ☐ Signature: Williamson

3. City ~~or County~~ Engineer: Date Rec'd. 5-8-78 . Date Frwd. 5-8-78 . ACTION: Approved ☒ Disapproved ☐ Signature: M Long

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7-17-78 by: jw
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7-17-78 By: James Wewerka

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

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. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N; Range 6E; Section & ¼ Section 21.
Property Dimensions: 331 ft. x 1331 ft. Area: 10.15 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐; Silt Loam ☐; Clay Loam ☒.
Dates of Tests: 4-26-78 to 4-27-78. Weather: Precip. _____ Temp. _____.

OWNER: Steve Harsop

Address: 7700 SW 27th

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	28	4-26	2:30 PM	4-26	7:00 PM	4-27	12:00	8	12:30	7¼	30	¾	
2	24						12:00	6	12:30	5¾	30	¼	
3	28						12:10	6	12:40	5⅜	30	⅝	
4	28						12:10	8½	12:40	7⅝	30	⅞	
5	30						12:20	6½	12:50	6¼	30	¼	
6	24	"	"	"	"	"	12:20	6	12:50	5⅜	30	⅝	

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

Dontenwill Pottyco Inc.
Signature of Person Conducting Test

Address 1520 Pioneer Blvd. Phone 4230121

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 53 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: _____
Soil Type (SCS): Kennebec Silt Loam
Date: May 8, 1978

Jerrold C. Flood
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 ☐

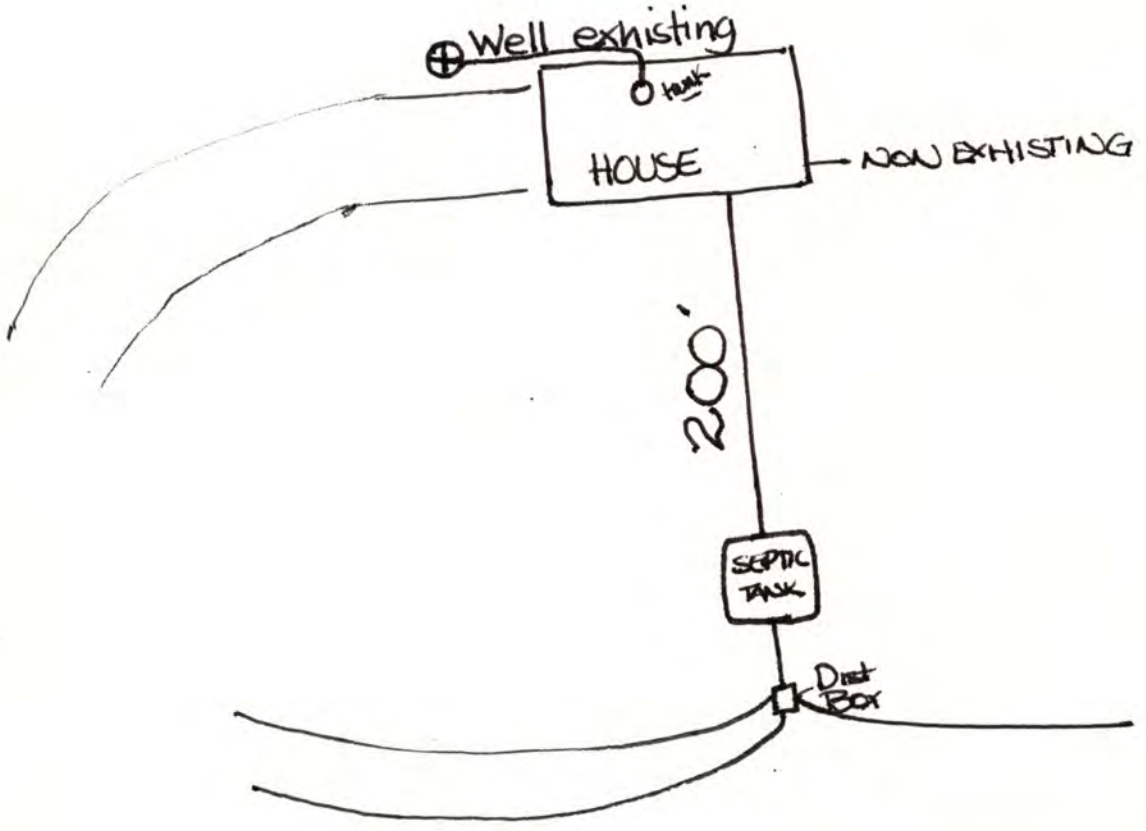
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

FILE NO._____

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



REVIEWING ACTION

Remarks:_____

Date: May 8, 1978

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 938 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: 474-1541

D

DATE: 1-18-78

FILE NO. _____

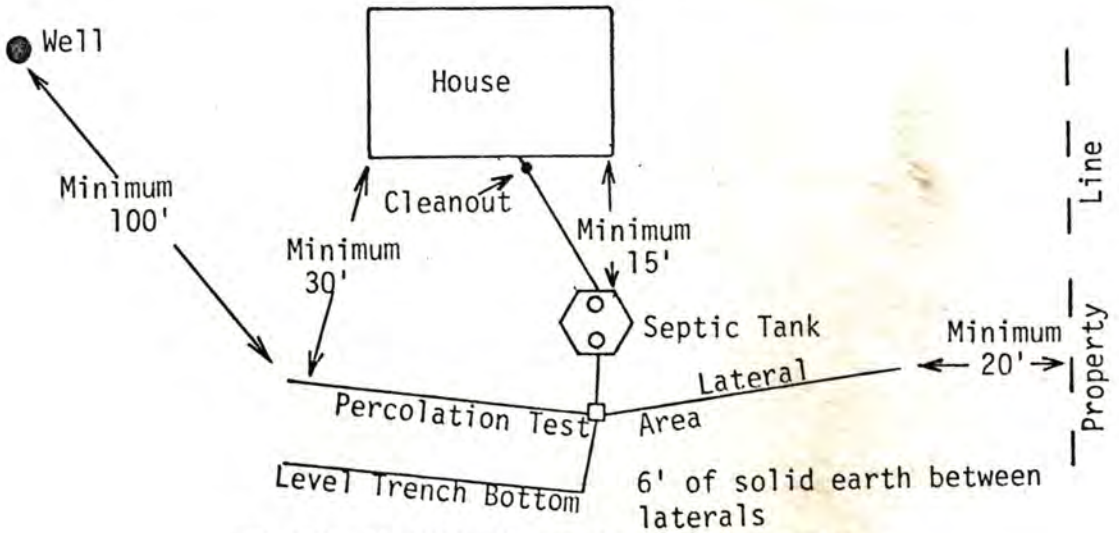
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank ~~100~~ + ft. 154'
4. Number of clean-outs 2 .
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line 180 + ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Fiberglass ; No. of compartments One .
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ , No ☐
(Company Mesonite)
4. Manholes: Over Inlet; diam. 0 in.
Over Outlet; diam. 6 in.
Riser Above ☒ Below ☐ Grade 4' in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 39" in.
8. Distances to:
Well or Suction Line _____ ft.;
Stream ≠ ft.; Pressure Line 184 + ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Fiberglass ; Number - available outlets 4 .
2. Factory Built: Yes ☒ No ☐
(Company " ")
3. Distance from Septic Tank 9 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round ~~4~~ or
Perforated Pipe 4" .
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____ .
2. Lateral Lines:
Number 4 ; Length of each line 100 , 100 , 100 , 18 , _____ ft.;
Total length of laterals ~~318~~ 318 ft.;
Distance between lateral lines 6-10 ft.
3. Trench dimensions: Width 3 ft.;
Slope 3 in/100 ft.; Average Depth 20 in.
4. Filter Material: Gravel
Depth of Material 18 in.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line 100 + ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN .

...partment to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☑

DATE: November 10, 1978

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☑ Evaluation of the Individual Water Supply

☑ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 9 North ; Range ~~North 6~~ 6 East of 6th P.M. ; Section 21 ;

Block — ; Lot — ; Addition —

Street Address 7900 SW 27th Lincoln, Nebraska

Directions on how to get to property 1/2 mile south of Denton Road on East Side of SW 27th - New Dutch Colonial House on Ridge.

Location of well Off North-East Corner of Garage

Where is tap: Inside ☑ Outside ☑ 2 Hydrants: Back of Garage, off South-West Corner

	NAME	ADDRESS	PHONE
Present Owner:	Steven D. Harrop	7900 SW 27th Lincoln 68522	423-1171
Tenant:	—		
Lending Agency:	First Federal Savings		

(Do not write below double lines)

Health Department: Date Received 11/14/78

Received $45.00 Check ☒ Cash ☐

Site Visits: Date 11-16-78 by DMM

Date _____ by _____

Date _____ by _____

Steven D. Harrop
Signature of Applicant

7900 SW 27th Lincoln Nebr.
Address

PRELIMINARY STATUS -- DATE 11-16-78

Water System:
Approved ☒ Disapproved ☐

Sewage Disposal System:
Approved ☒ Provisional Approval ☐
Disapproved ☐

Corrections Required or Reasons for Disapproval _____

☐ See Attached Letter.

FINAL APPROVAL -- DATE 11-20-78

Water System ☒ . Sewage Disposal System ☒ . BY Ronald Mangum

Form Number 20215-0878

.9208240004

PLEASE RUSH!!

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: 8-17-92

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $150.00

Legal Description of Property: SEE ATTACHED TWP. 9N; RANGE 6E; SECTION 21; BLOCK ___

LOT ___; ADDITION _____; Street Address 7900 S.W. 27th ST.

Directions to Property CALL DAVID HUBERTUS AT 464-7418 (WK) OR 423-2234

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System _____ Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	DAVID HUBERTUS	7900 S.W. 27th	464-7418
Tenant/Buyer:			
Return to:			

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

Signature of Applicant Gary Carbaugh, V.P. Address First Commerce Savings 434-4807

HEALTH DEPARTMENT USE ONLY

Date Received AUGUST 17, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE AUGUST 18, 1992

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒	☐
Nitrate 3.3 p.p.m	☒	☐

SEWAGE SYSTEM:
Approved: ☒
Provisional: ☐
Disapproved: ☐

SITE VISIT:
Date 8/18/92 by J.C.H
Date _____ by ___
Date _____ by ___

Comments: IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☒

SEWAGE DISPOSAL SYSTEM: Approved: ☒ Provisional Approval: ☐

APPROVED BY Jerrold C. Hood R.E.H.S. DATE AUGUST 24, 1992

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
INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

FG.4120

AS BUILT DRAWING OF SYSTEM

DATE _____ INSTALLER Potyco / Mark Henkemeier

