LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1629-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

June 3, 1980 — THIS PERMIT EXPIRES

Norman Berghuis — ISSUED TO

3300 North 53rd, Lincoln, NE 68504 — ADDRESS

T9N; R6E; Section 36 (SW¼), Lot 67 I.T.

LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE

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

A

FILING FEE: $ 60.00

FILE NO. 1629-C

DATE: SEPT 11-79

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 36 ;
   Block _____ : Lot 6 I.T. : Addition _____
   Street Address _____

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

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

4. Distance to public sewer: _____ ft.

Norm Bayliss
Signature of Applicant (Owner or Lessee)

3300 N 53
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 12/3/79. Date Frwd. 12/3/79. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 12/3/79. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Harry McKeever

3. City or County Engineer: Date Rec'd. 12-3-79. Date Frwd. 12-3-79. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11/28 by: L.C.H
Date: 12-5-79 by: jw
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12/11/79 By: L.C. Hood

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
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B

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PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 6E ; Section & ¼ Section 36.
Property Dimensions: _____ ft. x _____ ft. Area: 100 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: SEPT 10 to SEPT 11. Weather: Precip. _____ Temp. _____.

OWNER: _____

Address: _____

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	30"	SEPT 10	12:00	~~SEPT 10~~ SEPT 11	12:30	SEPT 11	2:00	17 3/4	2:30	18 1/2	30	3/4	
2								21 3/4		22 5/8		7/8	
3								20 1/8		21 1/8		1	
4								24 1/8		25 1/4		1 1/8	
5								21 3/8		22 1/4		7/8	
6								19 3/8		20 3/4		7/8	
7													

Norm Berkshire
Signature of Person Conducting Test

Address 3300 N 53 Phone 466 5210

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Kennebec Silt Loam
Date: September 19, 1979

Approved Percolation Rate (a)
A. 32 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 ☐

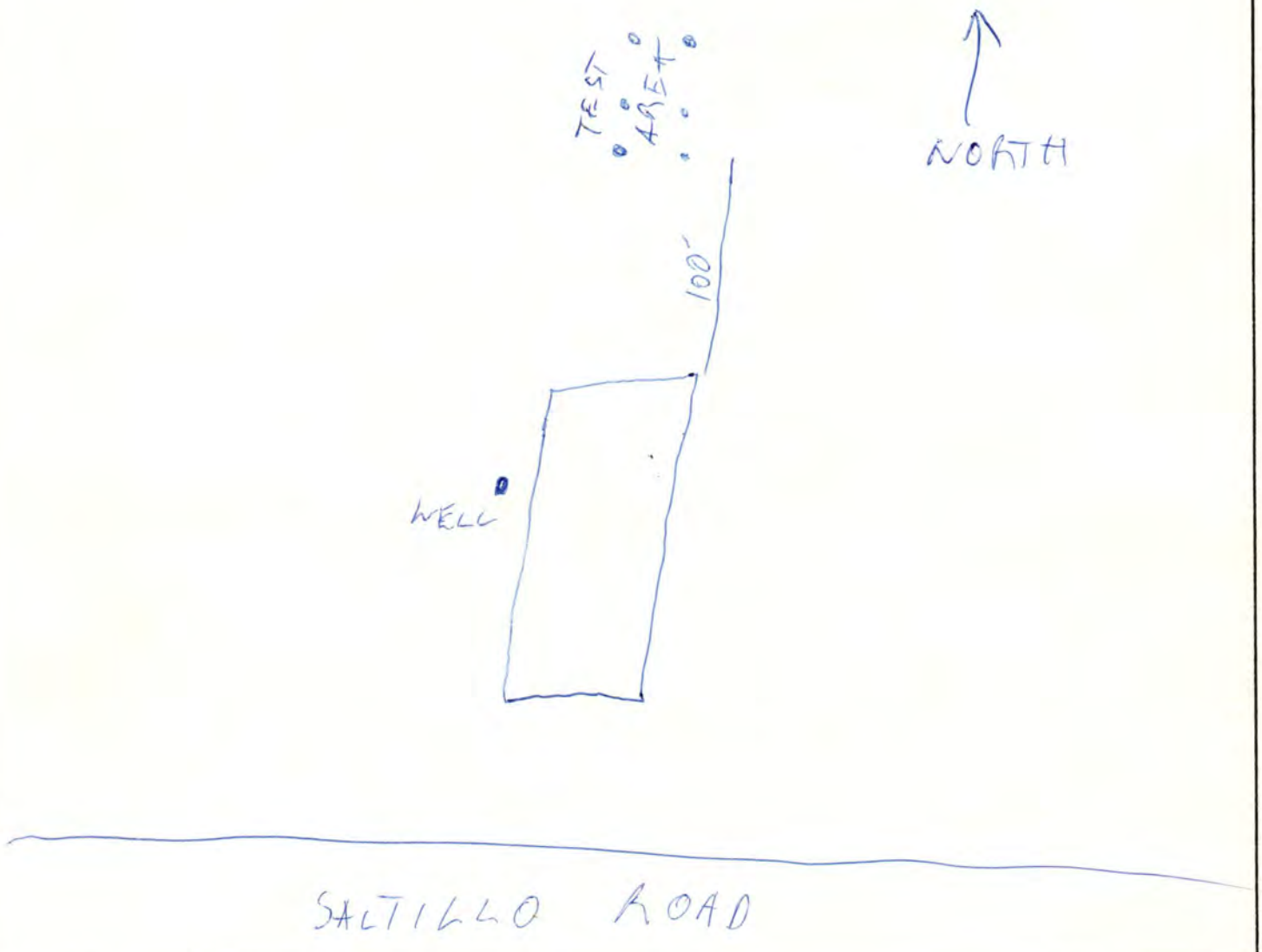
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

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



REVIEWING ACTION

Remarks: _____

Date: September 19, 1979

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 24 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
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D

DATE: 12/5/79

FILE NO. _____

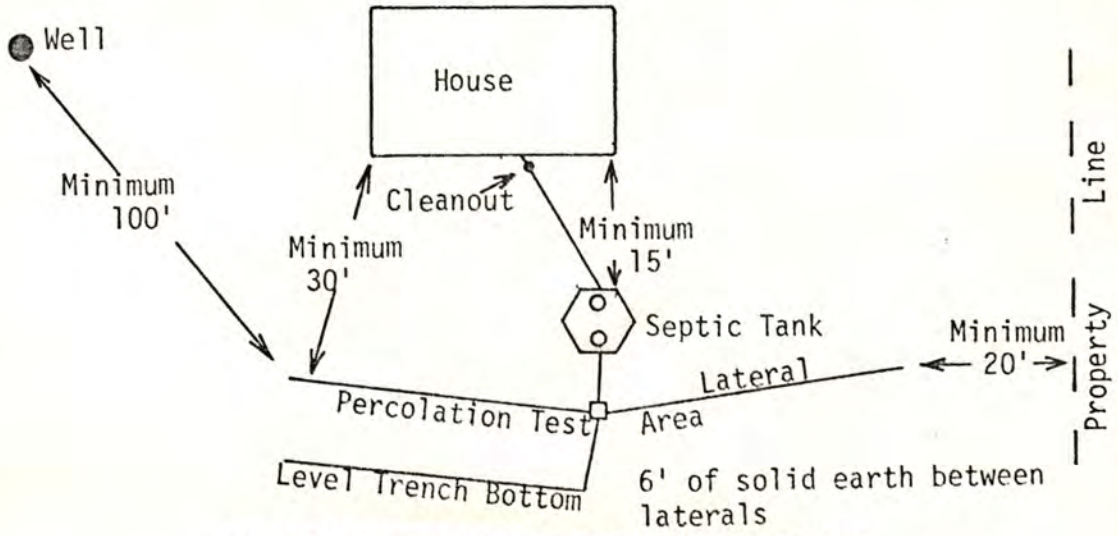
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Cast.; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 24 in.
3. Distance between dwelling and septic tank 64' ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line 65 ft.; Stream ____ ft.; Pressure Line 65 ft.; Property Line 75 ft.

B. SEPTIC TANK:
1. Material Concrete.; No. of compartments 1.
2. Capacity 1000 gal. gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre cast)
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 24 in.
8. Distances to:
Well or Suction Line 123 ft.; Stream ____ ft.; Pressure Line 123 ft.; Property Line 150 ft.

C. DISTRIBUTION BOX:
1. Material Concrete.; Number - available outlets 5.
2. Factory Built: Yes ☒ No ☐
(Company Precast.)
3. Distance from Septic Tank 10 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 2 or Perforated Pipe ____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other ____.
2. Lateral Lines:
Number 2; Length of each line 12, 40, ____, ____, ____ ft.;
Total length of laterals 52' ft.;
Distance between lateral lines ____ ft.
3. Trench dimensions: Width 3 ft.;
Slope 6 in/100 ft.; Average Depth 36" in.
4. Filter Material: gravel.
Depth of Material 24 in.
5. Distances to:
Well or Suction Line 130' ft.; Stream ____ ft.; Pressure Line 150 ft.; Property Line 150 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

BUILT DRAWING OF SYSTEM

DATE 12/3/79 INSTALLER Bus Hay

