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. 92380087201

Issued 07/07/92
Expires 01/07/93

ESTABLISHMENT
HENRY SADER
T9N R6E SEC 36
LOT 47
~~2400~~ 2030 SALTILLO ROAD

FEES: Permit 018754 $150.00

Total $150.00

Issued By COUNTY HEALTH

PERMITTEE HENRY SADER
RR0001
ROCA NE 68430

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
7/7/92	PAID

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: 471-7800

A

FILING FEE: $_____

FILE NO._____

DATE: 6-25-92

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 4 ~~7~~ Addition _____
   Street Address ~~2400~~ 2030 SALTILLO 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: UNKNOWN ft.

_____
Signature of Applicant (Owner or Lessee)

P.O. Box #89, Roca, Neb
Address
68430

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/30/92. Date Frwd. 7/1/92. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold E. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 7-1-92. Date Frwd. 7-1-92. ACTION: Approved ☐ Disapproved ☐ Signature: Ray Spain
3. City or County Engineer: Date Rec'd. 07/01/92. Date Frwd. / / . ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL Sewer line covered between cleanouts. Exposed sewer line was of proper materials

Site Visits:
Date: 2-2-94 by: P.D.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2-3-94 By: Paul Dotson

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

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
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

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: _____ to _____. Weather: Precip. _____ Temp. _____.

OWNER: Henry Soder
Address: Roca, NE. 68430

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"	6/26	10:30am	6/26	9:35pm	6/29	5:00pm	6"	5:30pm	4¾"	30 min	1¼"	
2	"	"	"	"	"	"	"	6"	5:35pm	4⅜"	35 min	1⅝"	
3	"	"	"	"	"	"	"	6"	5:36	4½"	36 min	1½"	
4	"	"	"	"	"	"	"	6"	5:39	4⅞"	39 min	1⅛"	
5	"	"	"	"	"	"	"	6"	5:41	4⅞"	41 min	1⅝"	
6	"	"	"	"	"	"	"	6"	5:44	4⅞"	44 min	1⅛"	

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

Andy Childers
Signature of Person Conducting Test

Address Roca, NE. 68430 Phone 423-4212

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 22 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: _____
Soil Type (SCS): Judson Silt Loam to Crete Silty Clay Loam
Date: June 30, 1992

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
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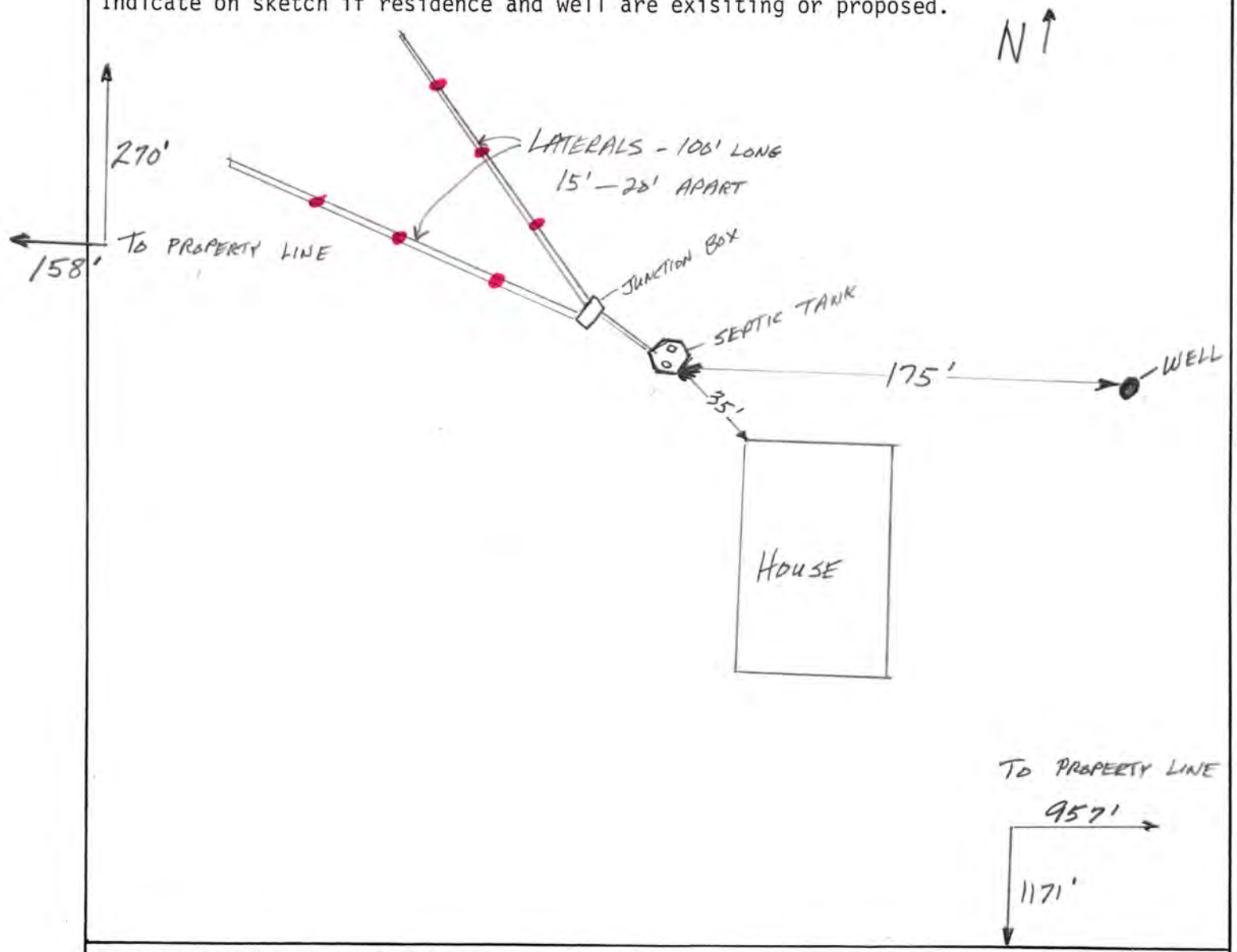
C

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

INDICATED IN RED

FILE NO. _____

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



REVIEWING ACTION

Remarks: _____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 164 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 653 sq.ft.

Paul D. Thomas
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
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D

DATE: 2-2-94

FILE NO. _____

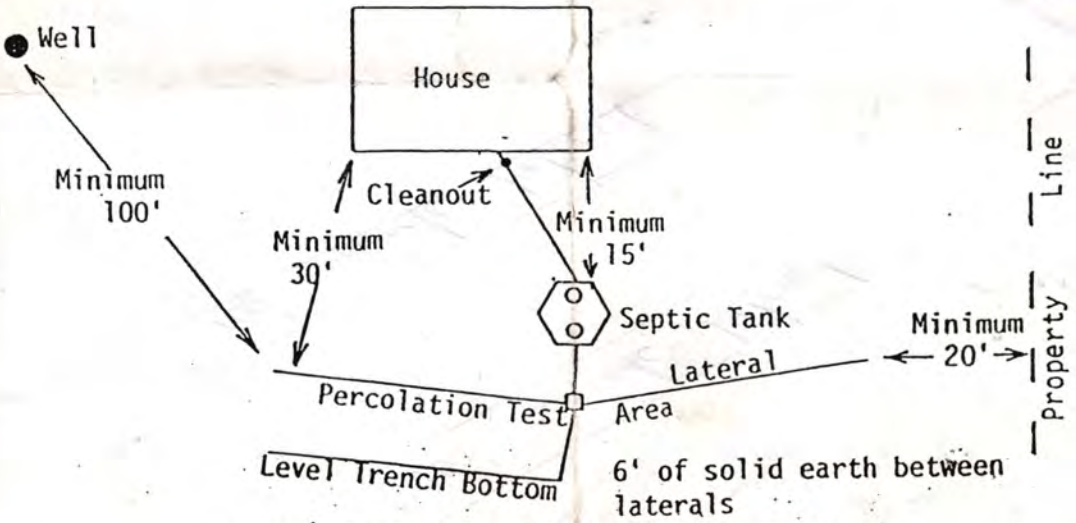
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material schedule 40 plastic; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 30 in.
3. Distance between dwelling and septic tank 112' ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line 200 ft.; Stream 1500 ft.; Pressure Line 200 ft.; Property Line 120 ft.

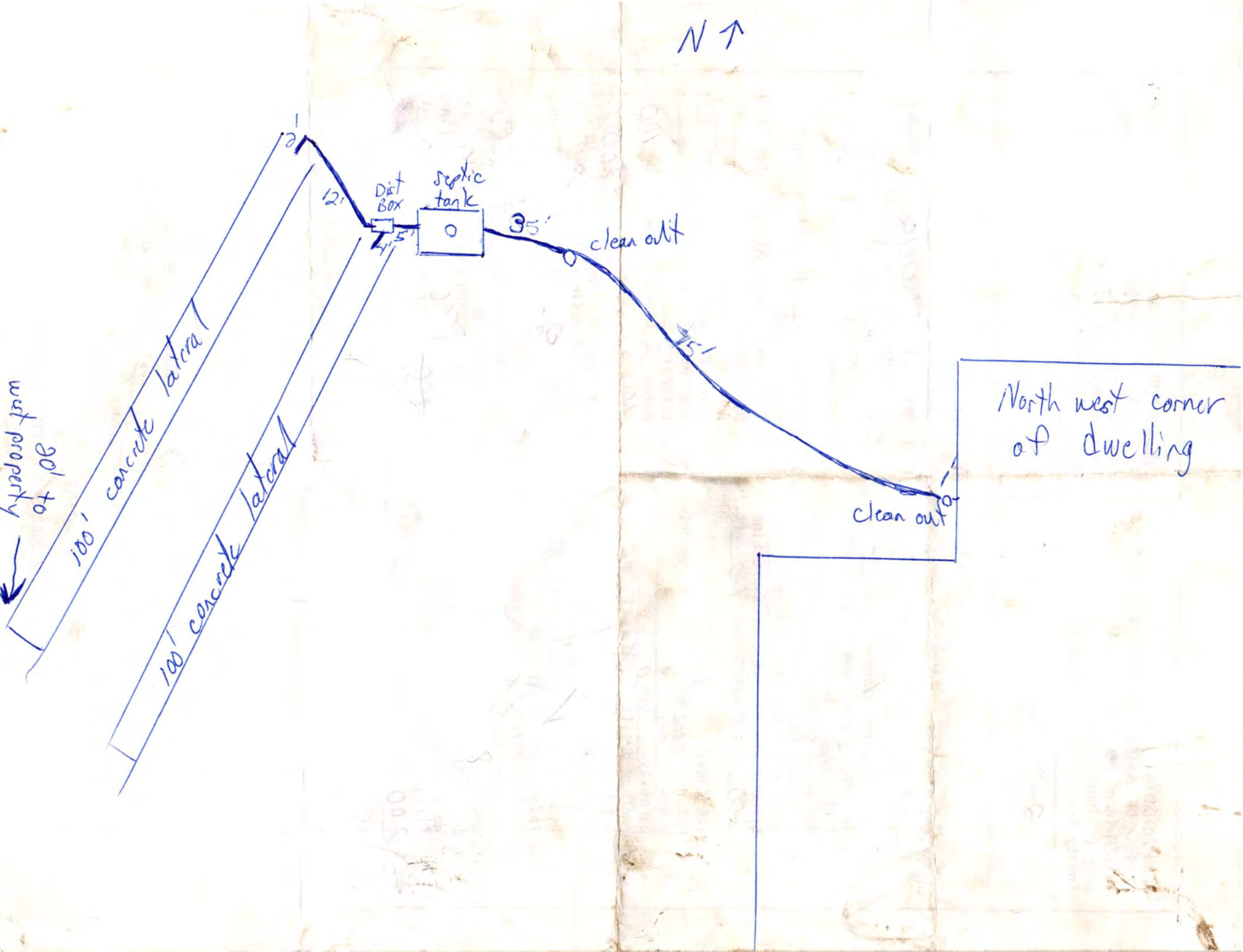
B. SEPTIC TANK:
1. Material concrete; No. of compartments one.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre Cast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☒ Below ☐ Grade 12 in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 8 in.
8. Distances to:
Well or Suction Line 250 ft.; Stream 1500 ft.; Pressure Line 200 ft.; Property Line 125 ft.

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

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 18" or Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other _____.
2. Lateral Lines:
Number 2; Length of each line 100, 100, _____, _____, _____ ft.;
Total length of laterals 200 ft.;
Distance between lateral lines _____ ft.
3. Trench dimensions: Width 24 ft.;
Slope 0 in/100 ft.; Average Depth 33 in.
4. Filter Material: gravel
Depth of Material 20 in.
5. Distances to:
Well or Suction Line 300 ft.; Stream 1500 ft.; Pressure Line ~~300~~ 250 ft.; Property Line 20 ft. at closest point



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


N
Dist Box
septic tank
12'
5'
4'
35'
clean out
75'
clean out
North west corner of dwelling
100' concrete lateral
100' concrete lateral
80' to property