CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 38

INDIVIDUAL SEWAGE DISPOSAL SYSTEM
TYPE OF LICENSE OR PERMIT

September 21, 1968
THIS LICENSE OR PERMIT EXPIRES

Rex Owens
LICENSEE OR PERMITTEE

2100 South 70th Street
ADDRESS

T 9N; R 7E; Sect. 1
NAME OF ESTABLISHMENT, IF ANY (Mailing Address: Rt. 1, Walton
ADDRESS

REMARKS: Non-Transferable

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$30.00	$	$	$	$30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
143-1535	10.0116	24.0114	6-2

SERIAL NO.	DATE	AMOUNT
12752	AUG 21 68	30.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

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

FORM HD-30(67) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 38

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described herein:

1. Legal description of property: Twp. 9; Range 7; Section 1;
Block ___; Lot ___; Addition ___;
Street Address RR 1 Waston, Nebr.

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

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

4. Distance to public sewer: ___ ft.

Rex Owens
Signature of Applicant (owner or lessee)

2100 So. 70
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. ___. ACTION: Approved ___ ☒ Disapproved ☐
Date Frwd. ___. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. ___. ACTION: Approved ___ ☒ Disapproved ☐
Date Frwd. ___. Signature: Charlie Seal By R.S.

3. City Engineer: Date Rec'd. 3-21-68. ACTION: Approved ___ ☒ Disapproved ☐
Date Frwd. ___. Signature: K. F. Braun

REMARKS OR REASONS FOR DISAPPROVAL ___

FINAL ACTION ON SITE CLEARANCE: Approved ☐ Disapproved ☐

Date Applicant Notified: ___ Signature ___

FORM HD-32(67) APPLICATION FOR PERMIT
TO CONSTRUCT INDIVIDUAL SEWAGE
DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 38

DATE: Mar. 19-1968

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N; Range 7E; Section 1;
Block _____; Lot _____; Addition _____;
Street Address RR. 1 Walton, Nebr.

2. Property Use: Residential yes ☒; Commercial _____ ☐
No. of Bed Rooms 3 Describe: _____

Other Use _____ ☐
Describe: _____

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

4. Plans and Specifications of Proposed System. (See FORM HD-32a(67) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT, attached hereto.)

Rex Owen
Signature of Applicant (owner or lessee)

2100 So. 70
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $_____. _____

2. Date Site Clearance _____

3. Site Visits:
Date: 6/3/68 by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved ☒; Disapproved ☐: _____
by: Jerrold C. Hood

5. BUREAU OF LICENSES & PERMITS
Date Notified: _____
Date Issued: _____ Serial _____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6/3/68 by: Jerrold C. Hood

FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 38

PROPERTY WHERE SOIL TESTED:
Location: Township 9 R. 7 Sec 1
Section & ¼ Sect. _____
Property Dimensions: ____ ft. x ____ ft.
Area: 5 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☒

Owner: Rex Owens
Address 2100 So. 70

Dates of Tests: Mar 16-1968 to Mar-17-1968. Weather: Precip. none Temp. 70 F.

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				
Hole 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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	36	[illegible]	10:30	3-16	3:30	3-17	10:30	6"	2:30	4 3/4"	240	9 1/4"	30m. 1.13
2	36	3-16	11:00	3-16	3:30	3-17	10:40	6"	2:40	4 3/4"	240	9 1/4"	30m. 1.16
3	36	3-16	11:10	3-16	3:30	3-17	10:55	6"	2:55	4 3/4	240	9 1/4	30 1.16
4	36	3-16	11:20	3-16	3:30	3-17	11:05	6"	3:05	4 3/4	240	9 1/8	30 1.14

Sum of Percolation Rates 30m. 4.59
Average of Rates: 30 Min. 1.15
Mean of Rates:

Rex Owens
Signature of Person Conducting Test

Address 2100 So 70
Phone: 488-7794

(Do not write below this line)

REVIEWING ACTION

REMARKS: Appears reasonable

DATE: _____

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

Jerrold C. Hood
Signature of Reviewing Official

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 38

SPECIFICATIONS

DATE: Jan 30 1968

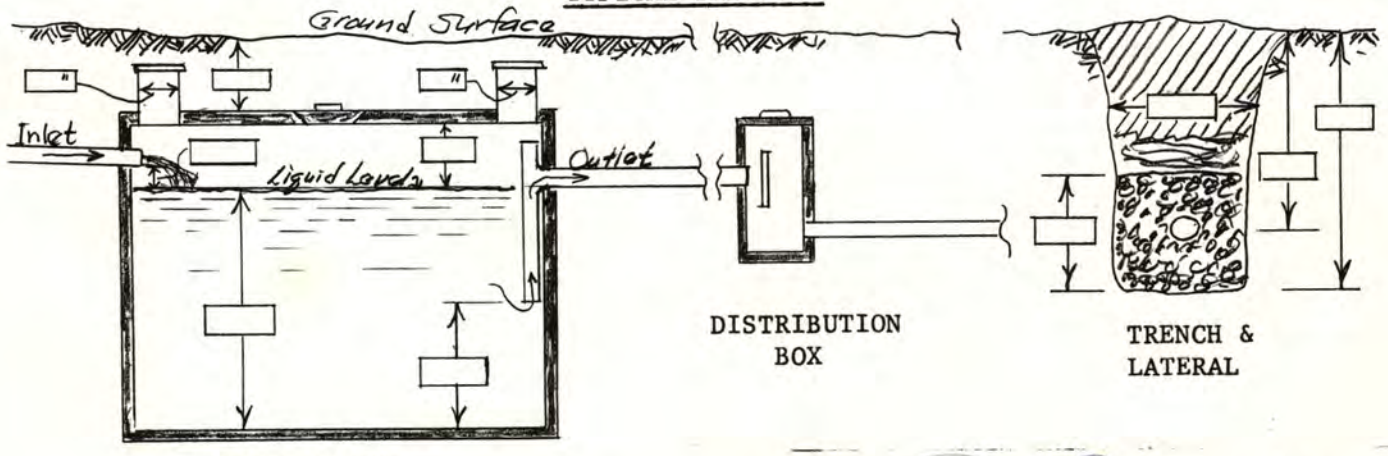
A. BUILDING SEWER:
1. Material Clay; Diameter 4" in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank 50 ft.
4. Number of clean-outs 0.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line 70 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments ____.
2. Capacity 1000 gals.; Liquid depth 47 in.
3. Factory Built: Yes ☑ (Company Precast)
No ☐
4. Manholes: Over Inlet; diam. 8 in.
Over Outlet; diam. 8 in.
Below Grade 12 in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☑
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 12 in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line 70 ft.

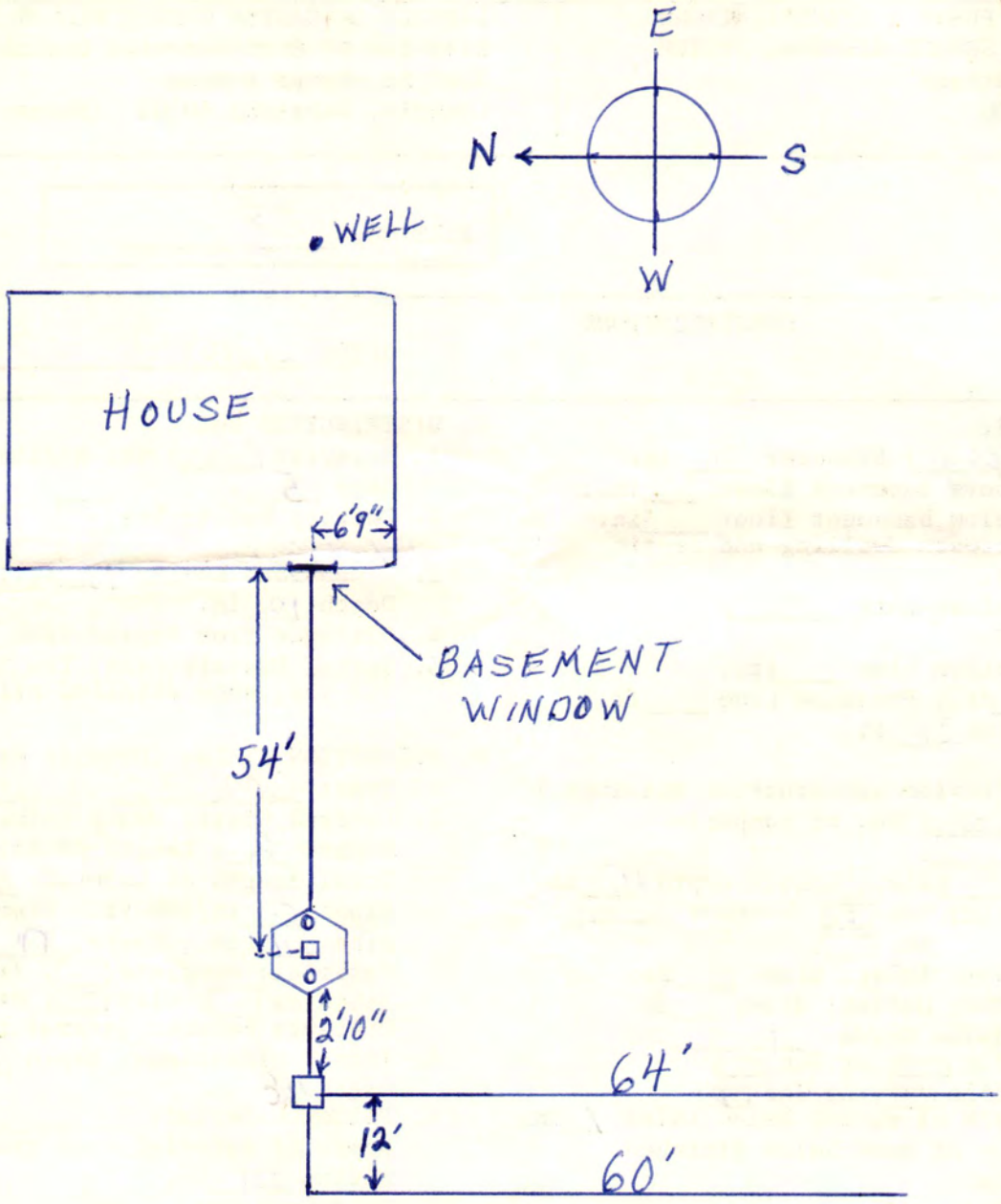
C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets ____.
2. Factory Built: Yes ☑, (Company Precast) No ☐
3. Dimension: Length 18 in.; Width 14 in. Depth 12 in.
4. Distance from Septic Tank 3 ft.
5. Serial Distribution: Yes ☒, No ☐
(If yes, show detailed plans.)

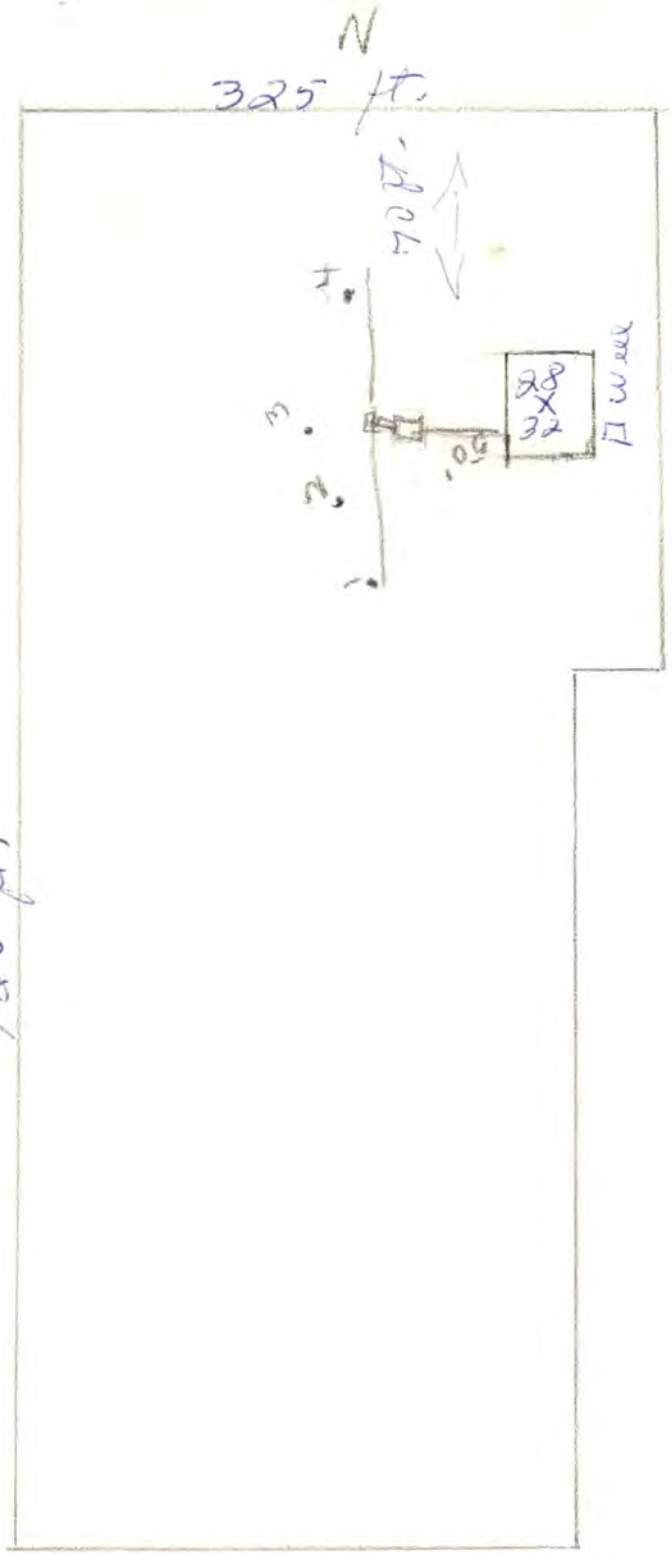
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: CONCRETE HALF ROUND
2. Lateral Lines: Depth below grade 36 in.
Number 2; Length of each line 62 ft
Total length of Laterals 124 ft.;
Slope 0 in/100 ft. Diameter of pipe 24 in.; Shape Half moon
Material: concrete ☑; fiber asbestos ☐; clay ☐; other ____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth 36 in.; Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 24 in.
5. Distances To:
Well or Suction Line 70 ft.;
Stream ____ft.; Pressure Line ____ft.
Property Line 70 ft.
6. Percolation Rate: ____minutes/inch

TYPICAL SKETCHES



Rex Owens
Signature of Applicant


E
N
S
W
WELL
HOUSE
6'9"
BASEMENT
WINDOW
54'
2'10"
64'
12'
60'



REX OWENS

T 9 R. 7 Sec 1

Dear Mr. Hood:

This system is to be installed by the Precast Co., using a precast tank,1000 gallons, at your recommended depth. The laterals will be 36 to 48 inches wide, as shallow as you recommend and as many feet. They will be made of the half moon concrete on concrete blocks with gravel above and beneath as you recommend. The Precast Co. has the "scale" drawing and will get it in as soon as it is possible, after the house has been set, otherwise it can not be accurate. Our basement diggers will dig April 1 and we must have a building premit before that time in order to get a culvert. Your help on this will be greatly appreciated. We have been working on this almost every minute since we got these papers and this is the best we have been able to do.

Sincerely yours,

Mrs Rex Owens
2100 So. 70
488-7794