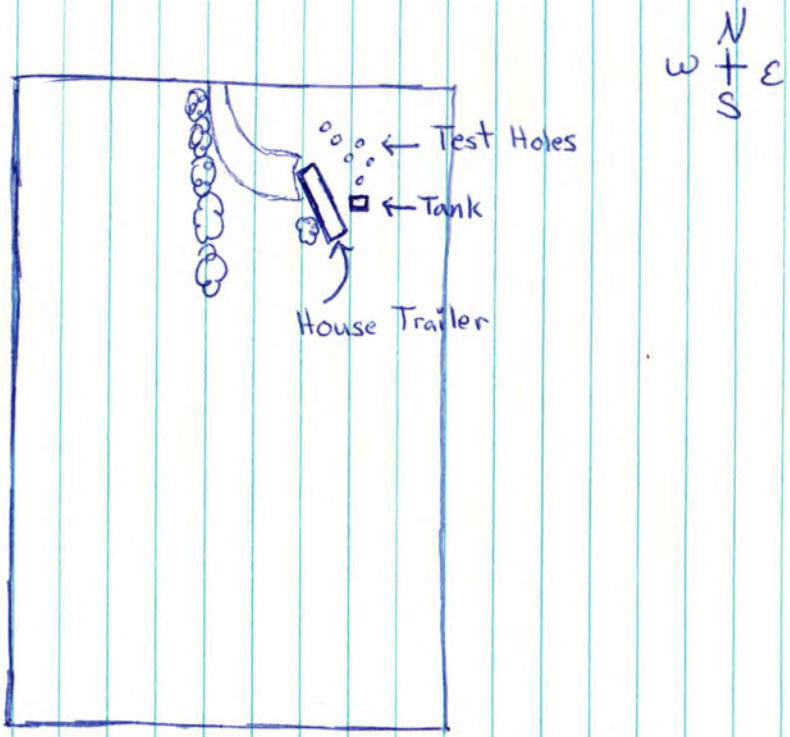

N
W
E
S
Test Holes
Tank
House Trailer

FORM HD-40(73) | REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 520-C

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

DATE: 9/15/74

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9 North; Range 7 East; Section 13 NE 1/4 E 1/2 NE 1/4 and E 1/2 W 1/2 NE 1/4
Block _____; Lot _____; Addition _____
Street Address Route #8 Lincoln 120 ACRES

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.

Clinton Burge
Signature of Applicant (Owner or Lessee)

Route #8 Lincoln, Nebr. 68506
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 9/16/74 . Date Frwd. 9/16/74 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____ . Date Frwd. 10/17/74 . ACTION: Approved ☐ Disapproved ☐ Signature: [illegible]

3. City or County Engineer: Date Rec'd. _____ . Date Frwd. 9-16-74 . ACTION: Approved ☒ Disapproved ☐ Signature: Walter Happe

REMARKS OR REASONS FOR DISAPPROVAL _____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [ ]
County Resolution No. 2832 [X]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. ~~9/15/74~~ 520-C

DATE: 9/15/74

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 appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9 North ; Range 7 East ; Section 13 NE¼ ; Block ; Lot ; Addition .
Street Address Route #8 Lincoln. 120 ACRES

2. Property Use: Residential [X]; Commercial [ ]
No. of Bedrooms 2
Describe:
Other Use
Describe:

3. Type of Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Clinton Burge
Signature of Applicant (owner or lessee)

Route # 8 Lincoln, Neb.
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;
Filing Fee: $ 30.00

2. Site Visits:
Date: 7-10-74 by: sm *
Date: by:
Date: by:

3. Date: Approved [X]; Disapproved [ ] 9/16/74
by: Jerrold C. Hoos

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: by:

* Covered w/o Inspection

FORM HD- 43(73) 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 475-6221)

FILE NO. 520-C

PROPERTY WHERE SOIL TESTED: 9 North
Location: Township Grant; Range 7 East
Section & ¼ Sect. 13
Property Dimensions: 2,640 ft. x 1980 ft.
Area: 120 acres. (Attach sketch of property showing hole location).

Owner: N. Oren Burge
Address Route #8 Lincoln Nebr.

Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: 9/14/74 to 9/15/74. Weather: Precip. No Temp. 25° 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	14"	9/14/74	9:30	9/14/74	1:30	9/15/74	9:30	6"	4 hr.	4½"	4 hr.	13⅛"	
2	"	"	"	"	"	"	"	"	"	4¾"	"	11¼"	
3	"	"	"	"	"	"	"	"	"	4¾"	"	11½	
4	"	"	"	"	"	"	"	"	"	4½"	"	13⅞	
5	"	"	"	"	"	"	"	"	"	5⅛"	"	8¼	
6	"	"	"	"	"	"	"	"	"	5¼"	"	6¾	
											30 Min	1½	20 min/inch
											"	1¼	24 min/inch
											"	1¼	24 min/inch
											"	1½	20 min/inch
											"	⅞ / ¾	34 min/inch 40 min/inch

Sum of Percolation Rates
Average of Rates: 27 min/inch
Mean of Rates:

Clinton Burge
Signature of Person Conducting Test

Address Route #8 Lincoln
Phone: 488-8350

(Do not write below line)

REVIEWING ACTION

REMARKS:

Approved Percolation Rate(s)
A. 25 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: September 16, 1974

Jerrold C. Hood
Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. 520-C

SPECIFICATIONS

DATE: 9/15/74

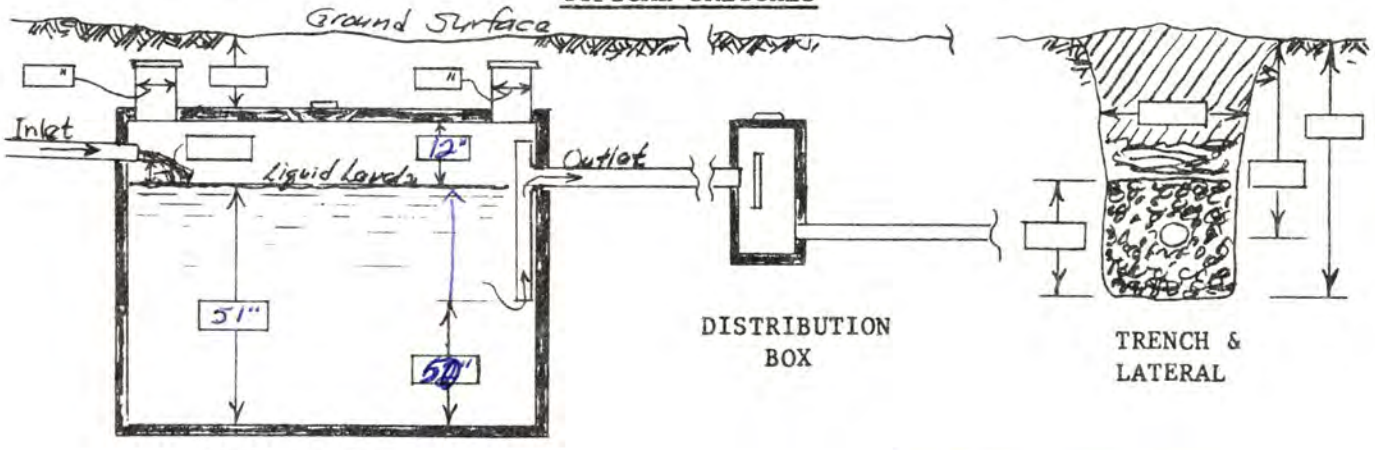
A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank 25 ft.
4. Number of clean-outs None.
5. Distances To:
Well or Suction Line 250ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line 300ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments one.
2. Capacity 1000 gals.; Liquid depth 62 in.
3. Factory Built: Yes ☒ (Company Pre-Cast
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ____in.
Below Grade ____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 ____in.
8. Distances To:
Well or Suction Line 250ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line 300ft.

C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 4 or more
2. Factory Built: Yes ☒, (Company Pre-Cast No ☐
3. Dimension: Length 20 in.; Width 14 in. Depth 12 in.
4. Distance from Septic Tank 5 ft.
5. Serial Distribution: Yes ☐, No ☒ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ____
2. Lateral Lines: Depth below grade ___in. Number 2; Length of each line ___ft Total length of Laterals 115 ft.; Slope 4 in/100 ft. Diameter of pipe ___ in.; Shape Half-moon Material: concrete ☒; fiber asbestos ☐; clay ☐; other ____ Distance between lateral lines ___ft.
3. Trench Dimensions: Depth 18 in.; Width 48 in.
4. Filter Material: ____. Depth of material from trench bottom ____in.
5. Distances To:
Well or Suction Line 250 ft.;
Stream ____ft.; Pressure Line ____ft.
Property Line 200 ft.
6. Percolation Rate: 27 minutes/inch

TYPICAL SKETCHES



Clinton Burge
Signature of Applicant