LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 471-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 92380094201

Issued 12/28/92
Expires 06/28/93
Revenue Code 18754

Establishment
BRAD SOUTHWICK
T9N R7E SEC 13
HIDDEN VALLEY ESTATE BLK 1 LOT 3

FEES: $150.00

TOTAL $150.00

Permittee
BRAD SOUTHWICK
701 E 4TH ST
HICKMAN NE 68372

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

923800942

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: $ 150.00
Southwick check # 9111

FILE NO. _____

DATE: 12-14-92

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 7E ; Section 13 ;
   Block 1 : Lot 3 : Addition Hidden Valley Estates
   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: N/A ft.

Doug + Terry Bartzatt by Brad Southwick
Signature of Applicant (Owner or Lessee)

701 E 4
Lincoln Ne Hickman, Ne 68372
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 12/24/92. ACTION: Approved ☒ Disapproved ☐
   Date Frwd. 12/24/92. Signature: Doug Smith

2. Supt. Bldg. Insp.: Date Rec'd. 12/24/92. ACTION: Approved ☒ Disapproved ☐
   or Village Clerk Date Frwd. 12/24/92. Signature: Bob T. Hoag

3. City or County Engineer: Date Rec'd. 12/24/92. ACTION: Approved ☒ Disapproved ☐
   Date Frwd. 12/24/92. Signature: Don T. Bonner

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 12/4/92 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

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

*SEE ENCLOSED LETTER

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 12/1/97 By: Jerrold C. Hook

Want notification when approved

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
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 7E ; Section & ¼ Section 13
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 ☐ ; SHD Clay Loam ☐ .
Dates of Tests: 7-22 to 7-23-92 . Weather: Precip. 0 Temp. 70 .

BLK 1 Lot 3
Pine Lake Rd & 112
Hidden Valley Estates

OWNER: Doug Bartzatt
Address: Waverly, Ne

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	7/22	6:06	7/23	6:00	7/23	10:08	26	10:38	26 7/8	30	7/8	
2			P		AM		AM	27 3/8	A	28 1/8		3/4	
3								26 1/8		26 7/8		3/4	
4								26		27 1/8		1 1/8	
5								25 1/4		25 7/8		5/8	
6								27		28		1	

Brad Smithwick
Signature of Person Conducting Test

Address 1016 CH4 Waverly Phone 792-2462

Sum of Percolation Rates: 5.125
Average of Rates: .854
Mean of Rates: _____

(Do not write below this line) 267 'X3' 1000 gal

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

Approved Percolation Rate (a)
A. 34 min./inch
B. _____ min./inch
C. _____ min./inch

_____
Signature of Reviewing Official

RECEIVED SEP 27 1993

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: _____

FILE NO. _____

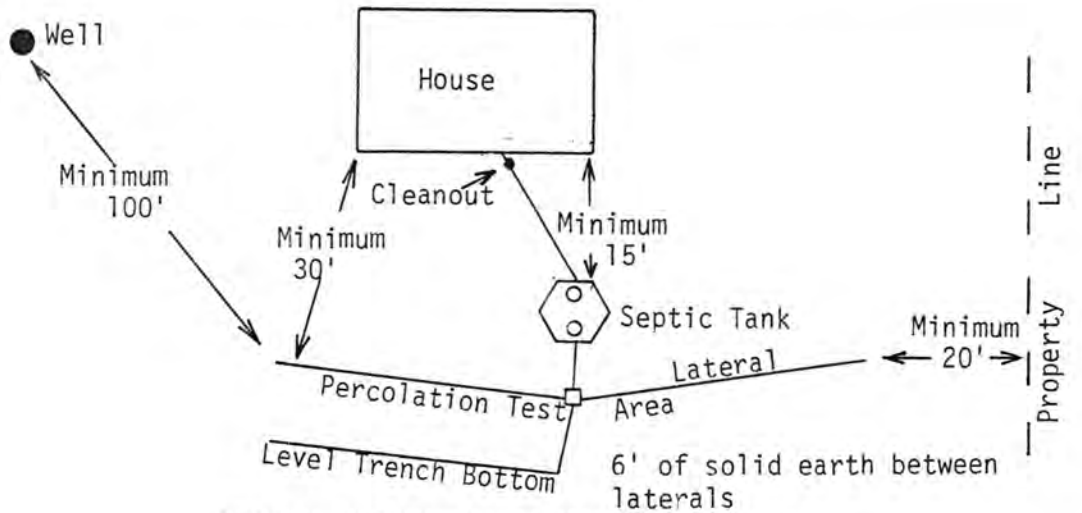
SPECIFICATIONS AS BUILT

A. BUILDING SEWER: Class 160
1. Material PVC; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and ~~septic tank~~ _____ ft. Lagoon
4. Number of clean-outs _____.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material _____; No. of compartments _____.
2. Capacity _____ gals.;
3. Factory Built: Yes ☐ No ☐
(Company _____)
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 _____ in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

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

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



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 9-23-93 INSTALLER Larry Schwarck

