LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

P E R M I T

No. 92380088901

t

WAGE INSTALLATION

Issued 07/31/92
Expires 01/31/93
Revenue Code 18754

Establishment

STEVE MCANDREVY
T9N R7E SEC 13
HIDDEN VALLEY 1ST AD BLK 4 LOT 2

FEES: $150.00

TOTAL $150.00

Permittee

STEVE MCANDREVY
4708 PRESCOTT ST
LINCOLN NE 68506

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"

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

FILE NO. _____

DATE: 7-29-92

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 SE¼;
   Block 4 : Lot 2 : Addition _____
   Street Address Hidden Valley First ADD

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☐ ; Other ☒
   "Perk test" does not agree with Soils Map.

4. Distance to public sewer: > 1 mile ft.

Steve McAndrew
Signature of Applicant (Owner or Lessee)

4708 Prescott Lincoln 68506
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7-29-92. Date Frwd. 7-29-92. ACTION: Approved ☒ Disapproved ☐ Signature: Ron Bryant

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 7-29-92. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: Gary Spurr

3. City or County Engineer: Date Rec'd. 07/29/92. Date Frwd. / / . ACTION: Approved ☐ Disapproved ☐ Signature: Dennis Bowman

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 9-21-92 by: P.D.
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-22-92 By: Paul Duff

FORM 23-43

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)

13-9-7

FILE NO. _____

Hidden Valley 1st Add
Blk 4, Lot 2

PROPERTY WHERE SOIL TESTED:
Location: Township 9N; Range 7E
Section & ¼ Sect. 13, SE ¼
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: Ken Whyrick
Address _____

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

Dates of Tests: 7-20-92 to 7-22-92. Weather: Precip. ____ Temp. ___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)
	30"	7-26-92	16:00	7-27-92	16:00	7-27-92	16:00		20:00		30 min		
1	"	"	"	"	"	"	"		"		"	1¼	
2	"	"	"	"	"	"	"		"		"	1½	
3	"	"	"	"	"	"	"		"		"	1	
4	"	"	"	"	"	"	"		"		"	1¼	
5	"	"	"	"	"	"	"		"		"	5	
6	"	"	"	"	"	"	"		"		"	2½	

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

Bryan Markey
Signature of Person Conducting Test

Address 612 Wm I Dr.
Phone: 781-2918 Home 464-0638 work

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 17 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: _____

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
Phone: 471-7800

D

DATE: 9-21-92

FILE NO: 923800889

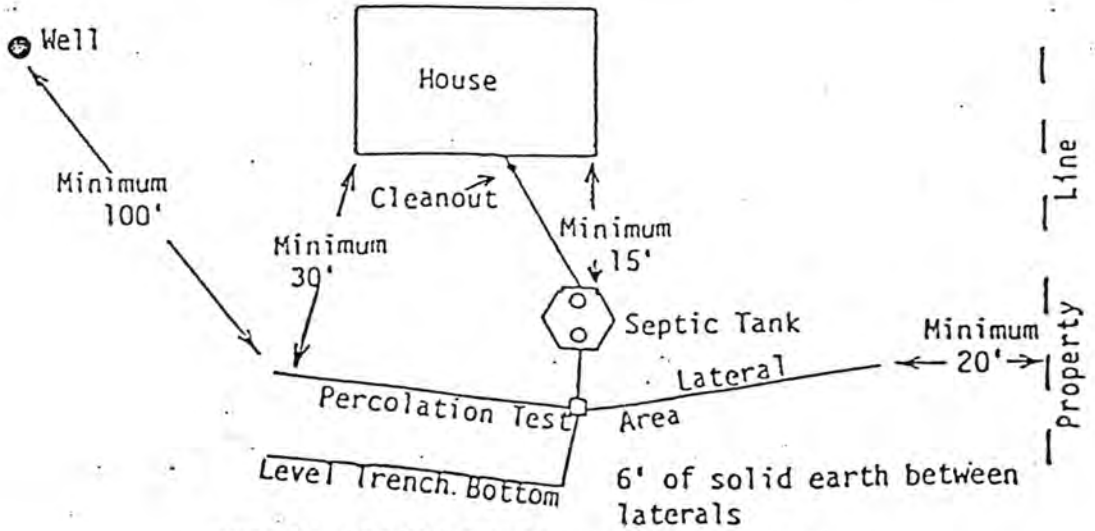
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 54 ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line ____ ft.;
Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

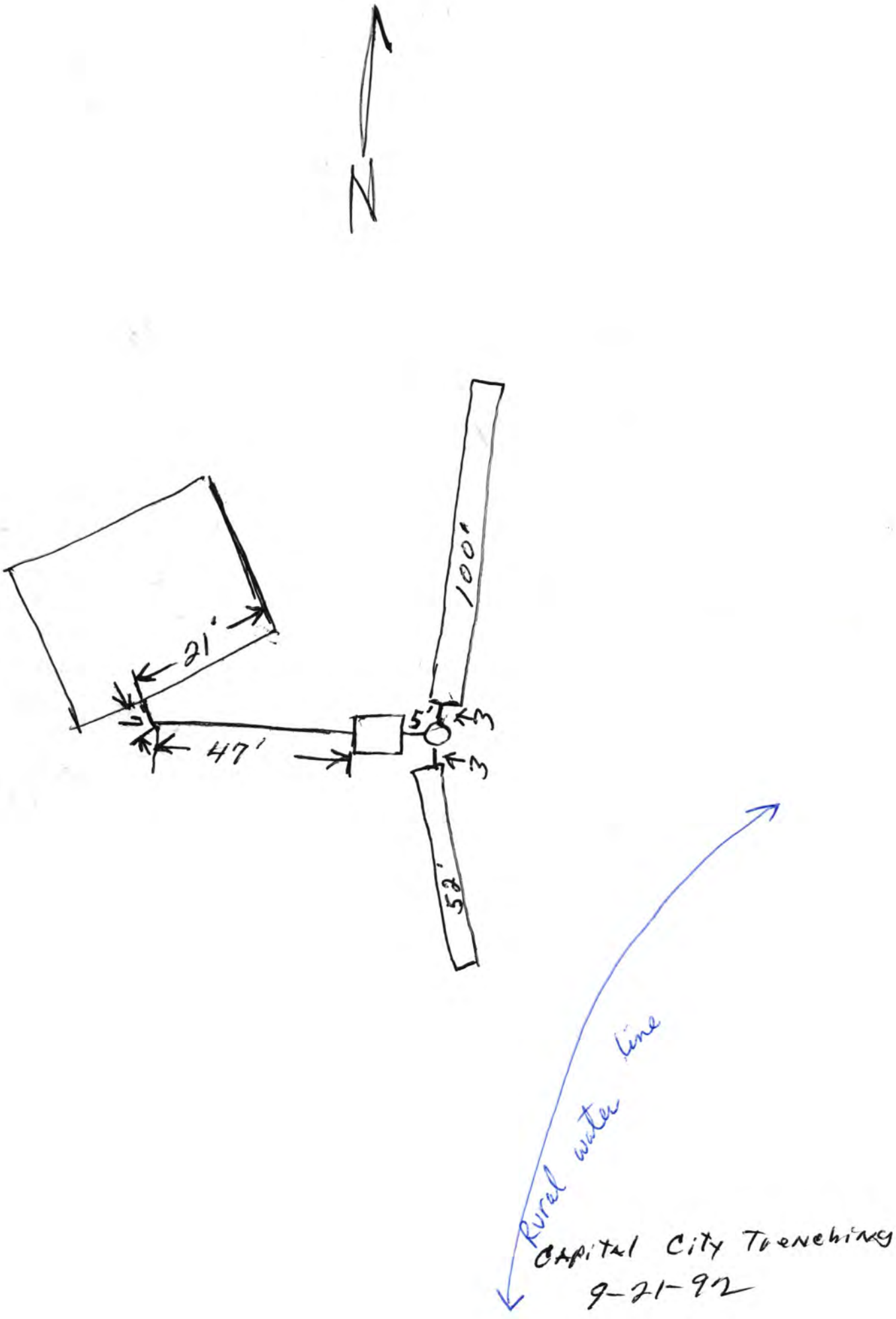
B. SEPTIC TANK:
1. Material concrete; No. of compartments ____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Pre Cast)
4. Manholes: Over Inlet; diam. ____ in.
Over Outlet; diam. ____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☑ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
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 ____ ft.

C. DISTRIBUTION BOX:
1. Material concrete ; Number - available outlets 5.
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 24 or
Perforated Pipe ____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☑ ; other ____.
2. Lateral Lines:
Number 2 ; Length of each line 100, 52, ____, ____, ____ ft.;
Total length of laterals 152 ft.;
Distance between lateral lines ____ ft.
3. Trench dimensions: Width 4 ft.;
Slope ____ in/100 ft.; Average Depth 24 in.
4. Filter Material: Gravel
Depth of Material 24 in.
5. Distances to:
Well or Suction Line ____ ft.;
Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN



Capital City Trenching
9-21-92