FILE NO. 1434

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

APRIL 16, 1979
THIS LICENSE OR PERMIT EXPIRES

Dennis D. Schulte 2710 Laurel, Lincoln, NE 68502
LICENSEE OR PERMITTEE ADDRESS

T9N, R7E, Section 14, Lot p 13
NAME OF ESTABLISHMENT, IF ANY ADDRESS

REMARKS: NON-TRANSFERABLE

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
110.15	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
018606		

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

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: 474-1541

FILING FEE: $ 30.00

FILE NO. 1434

DATE: Oct 10, 1978

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 14 ; Block X : Lot D 13 : ~~Addition~~ EX. FOR SOUTH 233' & NORTH 260'
   Street Address 6500 So 84th

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

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

4. Distance to public sewer: 2½ mi ~~ft.~~

Dennis D. Schultz
Signature of Applicant (Owner or Lessee)

2710 Laurel
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/16/78 . Date Frwd. 10/16/78 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hoe

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____ . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: Diane Haase

3. City or County Engineer : Date Rec'd. 10-16-78 . Date Frwd. 10-16-78 . ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 12-6-78 by: sm
Date: 12-8-78 by: sm
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12-13-78 By: Ronald Magnuson

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

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 474-1541)

Set #2

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PROPERTY WHERE SOIL TESTED:
Owner: Russell L. Foster
Location: Township 9 N. : Range 7 E
Section & ¼ Sect. Lot 13 in S.W. ¼ Sec. 14 Address: 6810 So. 84
Property Dimensions: 260 ft. x 335 ft.
Area: 2 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Dates of Tests: 2-21 to 2-22. Weather: Precip. Trace Temp. 45

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				
old No.	Hole Depth (in.) 4"	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	2-21	12:50	2-21	4:55	2-22	4:30	10 ½	5:00	11 ⅛	30	⅝	
2	36	2-21	12:50	2-21	4:55	2-22	4:32	23 ⅜	5:02	24 ⅛	30	¾	
3	36	2-21	12:55	2-21	5:00	2-22	4:33	23 ⅛	5:04	23 ⅝	31	½	
4	36	2-21	12:55	2-21	5:00	2-22	1:05	22 ⅜	1:36	22 ¾	29	⅜	
5	36	2-21	1:00	2-21	5:05	2-22	4:35	24 ½	5:05	25 ⅜	30	⅞	
6	36	2-21	1:00	2-21	5:10	2-22	4:37	22 ⅝	5:07	23 ⅝	30	1	
											↑		
											used	30 minute	

Sum of Percolation Rates: 4.125
Average of Rates: .6875
Mean of Rates:

Russell L. Foster
Signature of Person Conducting Test

Address 6810 So. 84
Phone 423-4056

(Do not write below this line)

REVIEWING ACTION

REMARKS: SLD or SHC

DATE: February 23, 1978

Approved Percolation Rate (a)
A. 4/4 min./inch
B. _____ min./inch
C. _____ min./inch

Harold C. Hunt

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
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

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

REVIEWING ACTION

Remarks: _____

Date: October 11, 1978

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 893 sq.ft.

298 - 3ft
223 - 4ft

Gerrold C. Voss
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: 474-1541

D

DATE: Dec 9 78

6500 So 84th

FILE NO. _____

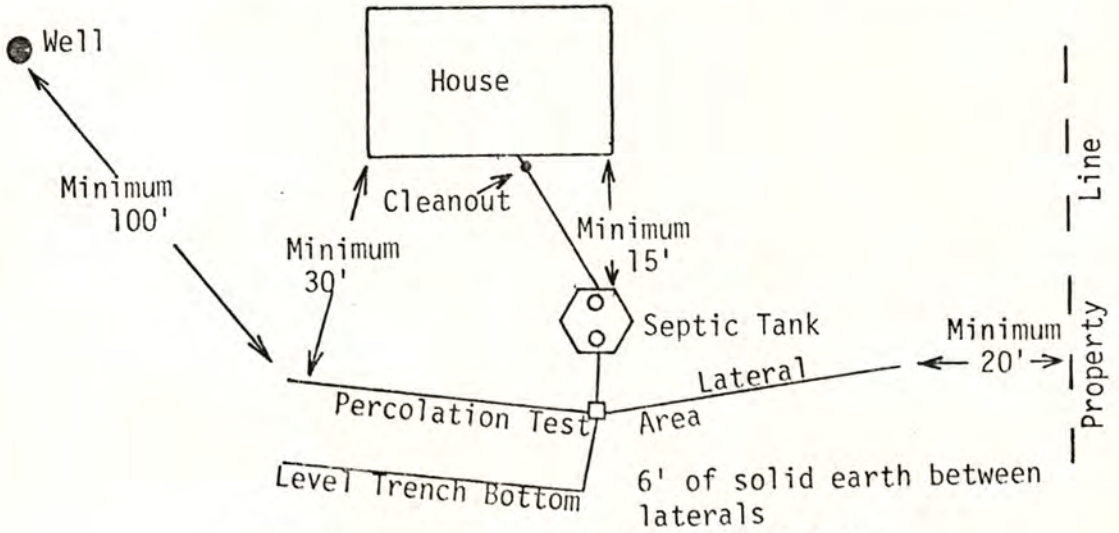
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 3 in.
3. Distance between dwelling and septic tank 75 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 20" in.
8. Distances to:
Well or Suction Line 100 ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Concrete ; Number - available outlets _____ .
2. Factory Built: Yes ☒ No ☐
(Company Pre cast)
3. Distance from Septic Tank 100 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 4" .
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____ .
2. Lateral Lines:
Number 4 ; Length of each line 80 , 100 , 100 , 30 , _____ ft.;
Total length of laterals 310 ft.;
min Distance between lateral lines 6 ft.
3. Trench dimensions: Width 3 ft.;
Slope 4 in/100 ft.; Average Depth 36 in.
4. Filter Material: Rd Gravel .
Depth of Material 12 in.
5. Distances to:
min Well or Suction Line 100 ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line 20 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE Dec 15, 78 INSTALLER Larry Schwarck

