FILE #2513

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

DECEMBER 22, 1987 — THIS LICENSE OR PERMIT EXPIRES

JOHN R. SOUKUP — LICENSEE OR PERMITTEE

3640 SO. 76 STREET, LINCOLN, NE 68506 — ADDRESS

T9N; R7E; Sec 16; Lot 3 I.T.; 6800 So. 59 St. Cir. — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	018754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. — Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2513

DATE: Feb 23 - 87

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 16 ;
   Block _____ : Lot 3 I.T. : Addition of ur of sub-div of lot 104
   Street Address I.T.

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4 . Describe _____

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

4. Distance to public sewer: — ft.

X John A Soukup
Signature of Applicant (Owner or Lessee)

3640 So 76th Lincoln, Ne. 68506
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 2/24/87. Date Frwd. 6/22/87. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 6/22/87. Date Frwd. 6/22/87. ACTION: Approved ☐ Disapproved ☐ Signature: Val Tetzloff

3. City or County Engineer: Date Rec'd. 6/22/87. Date Frwd. 6/22/87. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL HAS WELL PERMIT

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 6/27/88 By: Jerrold C. Hood

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

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PROPERTY WHERE SOIL TESTED:

Location: Township 9 ; Range 7E ; Section & ¼ Section 16 .
Property Dimensions: _____ ft. x _____ ft. Area: 5 acres. (Attach * Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☑ .
Dates of Tests: 2-22 to 2-23 . Weather: Precip. — Temp. 48 .

OWNER: John Soukup

Address: 3640 So 78th Lincoln 68506

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	30	2/22	1:00PM	2/23	12:30	2/23	3:00PM	15⅛	3:30PM	15⅛	30	¾	
2								14⅜		15⅛		⅞	
3								10¼		11⅛		⅞	
4								12⅜		13⅜		1	
5								11¼		12		¾	
6								7		7⅛		⅛	
7								14¾		15½		¾	
8								15		16⅛		1⅛	

Larry Schwarck
Signature of Person Conducting Test

Address 8200 old Cheny Phone 423-7294

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): JUDSON SILT LOAM
Date: FEBRUARY 24, 1987

Approved Percolation Rate (a)
A. 40 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

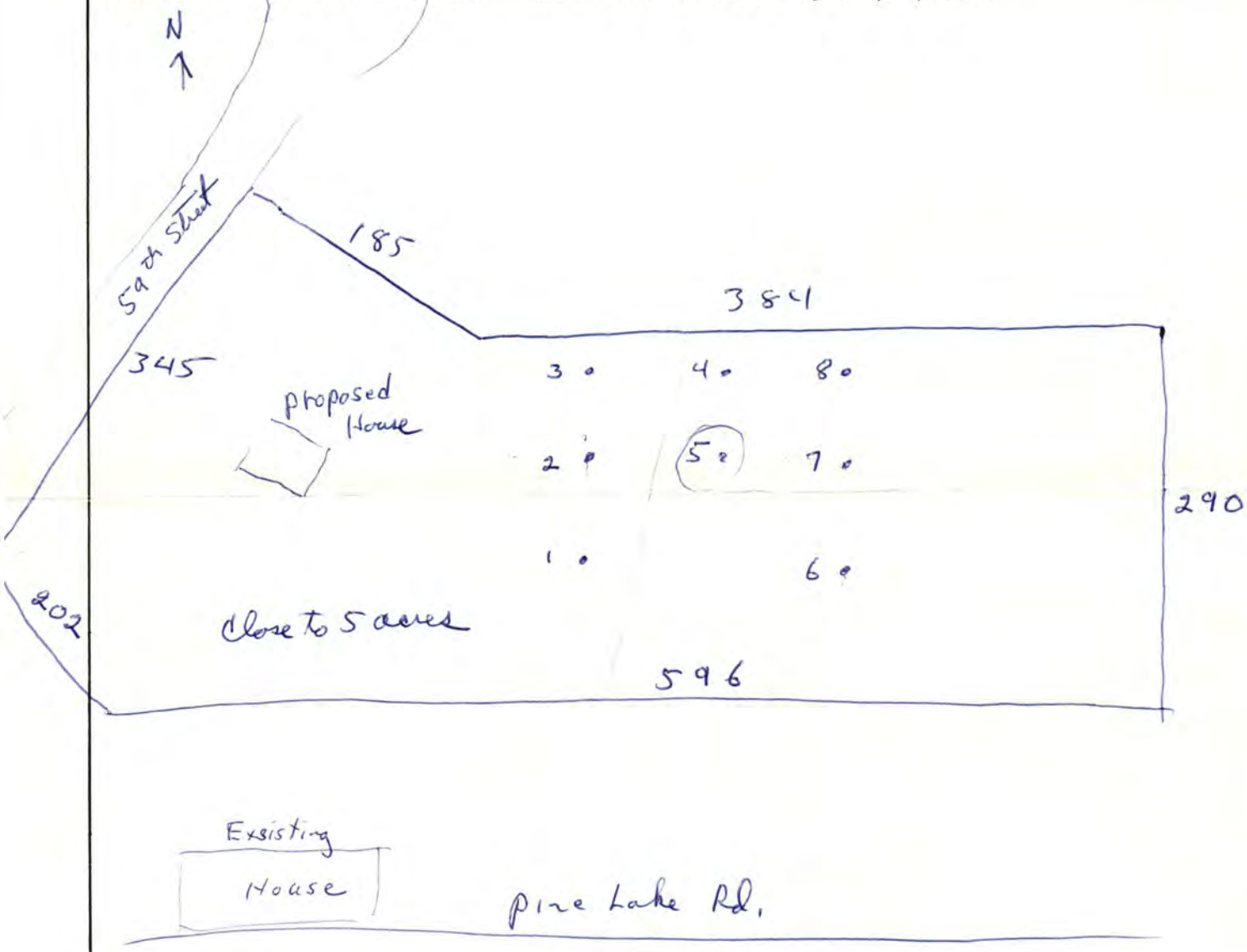
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

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: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1250 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 1149 sq.ft.

Jerrold C. Hoos
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
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D

DATE: _____

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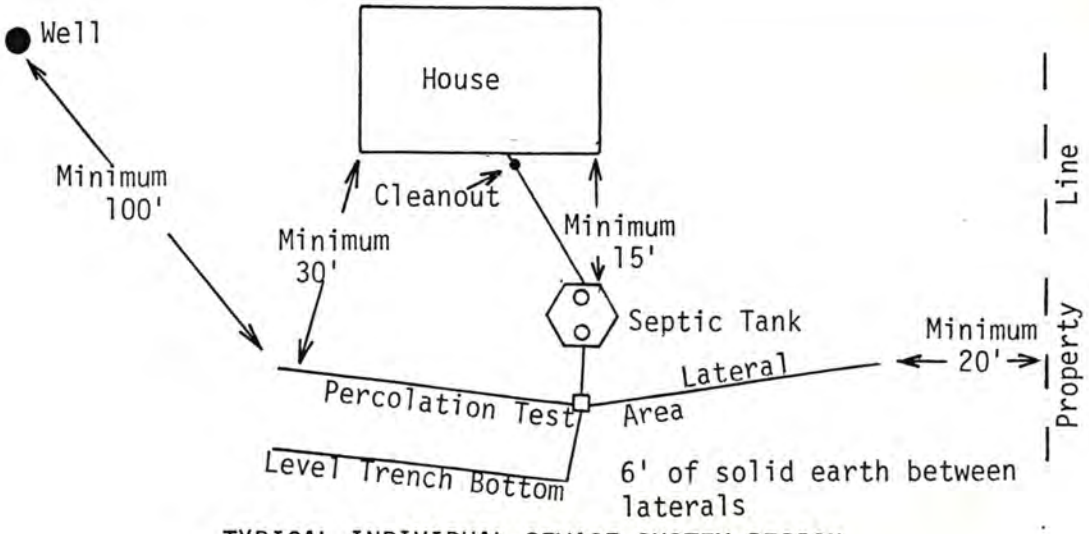
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 160 ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 81 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 Pre Cast; No. of compartments _____.
2. Capacity 1500 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 7" in.
8. Distances to:
Well or Suction Line 100' ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Pre Cast ; Number - available outlets _____.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank 13 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 100 , 100 , 100 , 85 , _____ ft.;
Total length of laterals 385 ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 3 ft.;
Slope 6 in/100 ft.; Average Depth 30-36 in.
4. Filter Material: Road Gravel
Depth of Material 16 in.
5. Distances to:
Well or Suction Line 100'+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

5-26-88

Larry Schwarck

