CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

205

INDIVIDUAL SEPTIC SYSTEM CONSTRUCTION — January 16, 1971

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

Ernie Sturzeneger — Old Cheney Road

LICENSEE OR PERMITTEE — ADDRESS

T9N; Range 7E; Section 20 S½ of SE¼; Lot Parcel 2 —

NAME OF ESTABLISHMENT, IF ANY — ADDRESS

Non-Transferable

REMARKS:

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-~~110.15~~ 1536	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

FORM HD-30(67) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 205

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

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described herein:

1. Legal description of property: Twp. 9N; Range 7E; Section 20; S½ of SE¼
Block ____; Lot PARCEL 2; Addition ____;
Street Address ____.

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

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

4. Distance to public sewer: ____ ft.

Ernie STarzenegger
Signature of Applicant (owner or lessee)

Old Cheney RD.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 7/16/71. ACTION: Approved ____ ☒ Disapproved ☐
Date Frwd. ____. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 7/16/71. ACTION: Approved ____ ☑ Disapproved ☐
Date Frwd. 7/16/71. Signature: Charles Seale By RH

3. DP City Engineer: Date Rec'd. 7-16-71. ACTION: Approved ____ ☒ Disapproved ☐
Date Frwd. 7-16-71. Signature: J. L. Blessing

REMARKS OR REASONS FOR DISAPPROVAL ____

FINAL ACTION ON SITE CLEARANCE: Approved ☐ Disapproved ☐

Date Applicant Notified: ____ Signature ____

FORM HD-32(67) APPLICATION FOR PERMIT
TO CONSTRUCT INDIVIDUAL SEWAGE
DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 205

DATE: _____

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 Lincoln City Ordinance No. 9150, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9N; Range 7E; Section 20; S ½ of SE ¼
Block _____; Lot PARCEL 2; Addition _____;
Street Address _____.

2. Property Use: Residential _____ [3]; Commercial _____ [ ]
No. of Bed Rooms _____ 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-32a(67) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT, attached hereto.)

Ernie Starzeneger
Signature of Applicant (owner or lessee)

Old Cheney RD.
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance _____

3. Site Visits:
Date: 9/28/71 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 7/16/71
by: Jerrold C. Hood

5. BUREAU OF LICENSES & PERMITS
Date Notified: _____
Date Issued: _____ Serial _____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/28/71 by: Jerrold C. Hood

FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 205

PROPERTY WHERE SOIL TESTED: S½ of SE¼ Owner: Ernie STurzenegger
Location: Township ____
Section & ¼ Sect. 20 T9N R7E Address Old Cheney Rd
Property Dimensions: ____ft. x ____ ft.
Area: ____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: July 7 71 to July 8 . Weather: Precip. 87° Temp. ___F.

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
Hole No.	Hole Depth (in.)	Pre-Saturation Period Start Date (Mo. Day)	Pre-Saturation Period Start Time (Hr. Min.)	Pre-Saturation Period End Date (Mo. Day)	Pre-Saturation Period End Time (Hr. Min.)	Percolation Readings Start Date (Mo. Day)	Percolation Readings Start Time (Hr. Min.)	Percolation Readings Start Water Level (in.)	Percolation Readings End Time (Hr. Min.)	Percolation Readings End Water Level (in.)	Results Elapsed Time (Min.)	Results Water Level Drop (in.)	Results Percolation Rates (Min./inch)
1	40	7/1/71	2:00	7/2/71	2:30	7/2/71	2:00	36	2:30	35	30	1	
2	"	"	"	"	"	"	"	"	"	34	"	2	
3	"	"	"	"	"	"	"	"	"	35	"	1	
4	"	"	"	"	"	"	"	"	"	34	"	1	
5	"	"	"	"	"	"	"	"	"	33½	"	1½	
6	"	"	"	"	"	"	"	"	"	34	"	1	

Sum of Percolation Rates
Average of Rates:
Mean of Rates: 1' every 30

188' 4' wide

Ray Bailey
Signature of Person Conducting Test

Address 4131 Clifford Dr
Phone: 489-5482

(Do not write below this line)

REVIEWING ACTION

REMARKS: ____

Approved Percolation Rate(s)
A. 30 min./inch
B. ____ min./inch
C. ____ min./inch

DATE: July 16, 1971

Jerrold C. Hood
Signature of Reviewing Official

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. _____

SPECIFICATIONS

DATE: _____

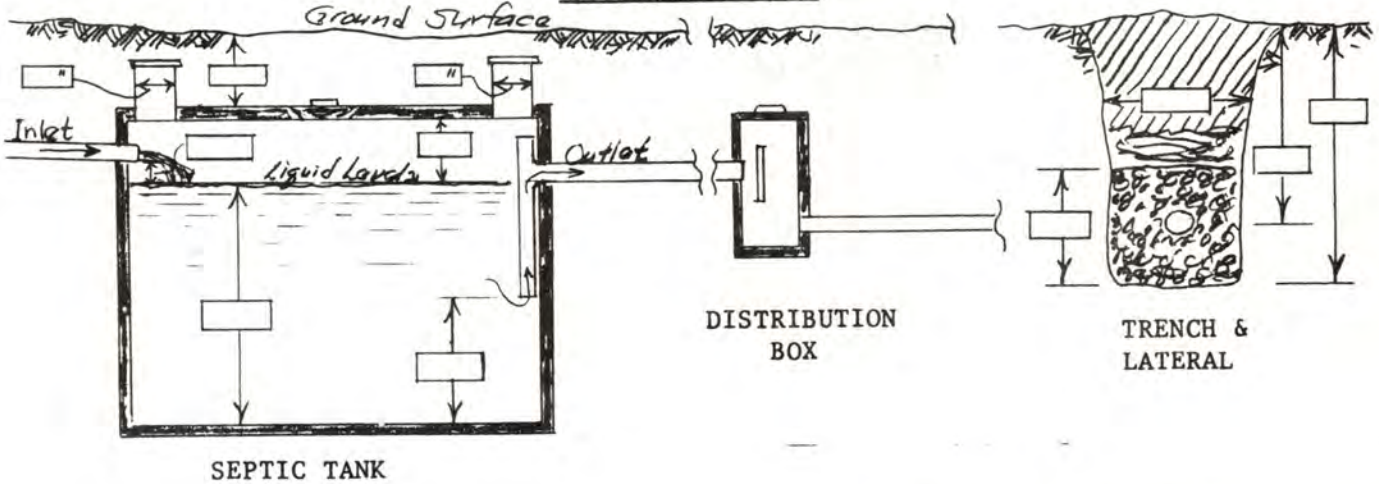
A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 16 in.
3. Distance between dwelling and septic tank 40 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 20' ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Fiber Glass; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☒ (Company CORRIGATED FIBERGLASS
No ☐
4. Manholes: Over Inlet; diam. ___ in.
Over Outlet; diam. ___ in.
Below Grade 24" in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☒
Depth of outlet below inlet ___ in.
7. Depth of top of tank below finished grade 2' in.
8. Distances To:
Well or Suction Line 200 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 20 ft.

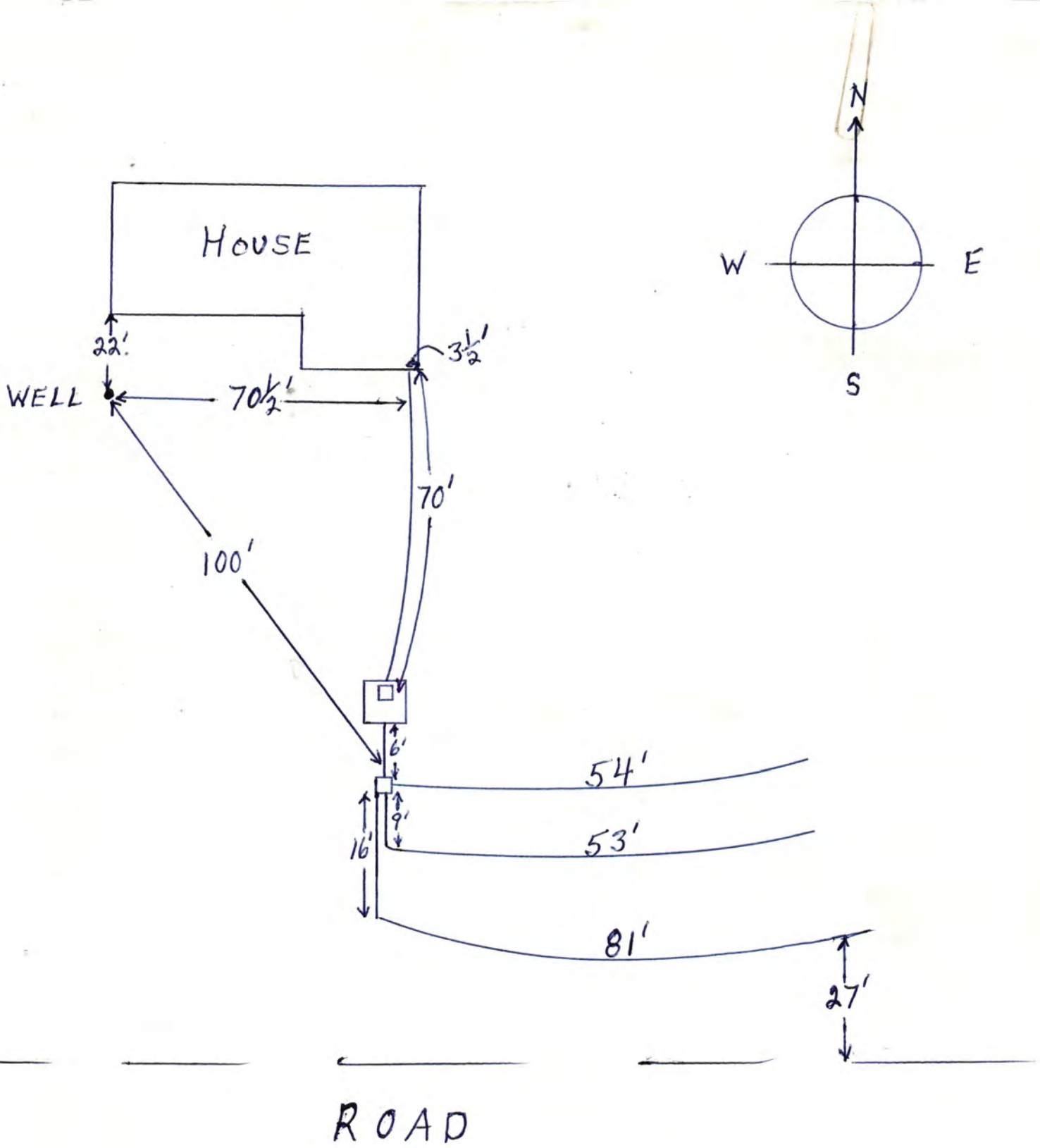
C. DISTRIBUTION BOX
1. Material CON; No. available outlets 5.
2. Factory Built: Yes ☒, (Company PRE-CAST STEP No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 6 ft.
5. Serial Distribution: Yes ☐, No ☒
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: 1 2
2. Lateral Lines: Depth below grade ___ in.
Number 3; Length of each line ___ ft
Total length of Laterals 188 ft.;
Slope 6 in/100 ft. Diameter of pipe 16 in.; Shape 2
Material: concrete ☐; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines 7 ft.
3. Trench Dimensions: Depth 4' in.; Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 16 in.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line 27 ft.
6. Percolation Rate: 30 minutes/inch

TYPICAL SKETCHES



Signature of Applicant


N
W
E
S
HOUSE
22'
3½'
WELL
70½'
70'
100'
6'
54'
9'
53'
16'
81'
27'
ROAD