FILE #2092

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

NOVEMBER 30, 1984 — THIS LICENSE OR PERMIT EXPIRES

RICHARD J. YOUNG, YOUNG'S PLUMBING, 2830 DELHAY DR., LINCOLN, NE 68507 — LICENSEE OR PERMITTEE / ADDRESS

T9N; R7E; Sec 20; Bk 1; Lot 3; Country Acres Addition; 5300 Cavvy Rd. — 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

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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. 2092

DATE: May 29, 1984

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 20 ;
   Block 1 : Lot 3 : Addition Country Acres
   Street Address 5300 Cavvy Rd.

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

3. Type of Individual Sewage Disposal System: Septic Tank ☐ ; Other ☑ EXPERIMENTAL SYSTEM

4. Distance to public sewer: N/A ft.

Youngs Bldg. Richard J Youngs
Signature of Applicant (Owner or Lessee)

2830 Delhay Dr Lincoln, Ne
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/30/84. Date Frwd. 5/30/84. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 5/30/84. Date Frwd. 5/30/84. ACTION: Approved ☒ Disapproved ☐ Signature:
3. City or County Engineer: Date Rec'd. 5/30/84. Date Frwd. 5/30/84. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 10-1-84 by: JM (illegible)
Date: by:
Date: by:

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 11/9/84 By: J.C. Hood

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

* PROVISIONAL APPROVAL BECAUSE IT IS CONSIDERED EXPERIMENTAL.

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
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PROPERTY WHERE SOIL TESTED:

Location: Township_____; Range_____; Section & ¼ Section_____.
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 ☐ ; Clay Loam ■ .
Dates of Tests: 5-26-84 to 5-27-84. Weather: Precip. 0 Temp. 55°.

ALL Hole's still ~~Empty~~ Full From Pre-test

OWNER: Dr. Paine Res.
Address: So. 56th 5300 Cavvy Rd Country - Acres

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"	5-26	9:00 Am	5-27	9:00 Am	5-27	9:30 Am	6"	10:00 Am	6"	30m	0	
2	36"	5-26	9:00 Am	5-27	9:00 Am	5-27	9:30 Am	6"	10:00 Am	6"	30m	0	
3	36"	5-26	9:00 Am	5-27	9:00 Am	5-27	9:30 Am	6"	10:00 Am	6"	30m	0	
4	36"	5-26	9:00 Am	5-27	9:00 Am	5-27	9:30 Am	6"	10:00 Am	6"	30m	0	
5	36"	5-26	9:00 Am	5-27	9:00 Am	5-27	9:30 Am	6"	10:00 Am	6"	30m	0	
6	36"	5-26	9:00 Am	5-27	9:00 Am	5-27	9:30 Am	6"	10:00 Am	6"	30m	0	

Mike Hoagland
Signature of Person Conducting Test
Address 2701 W 27th Phone_____

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

(Do not write below this line)

REVIEWING ACTION

Remarks: Unsatisfactory for Conventional septic System
Soil Type (SCS): _____
Date: May 30, 1984

Approved Percolation Rate (a)
A. 0 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
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: _____

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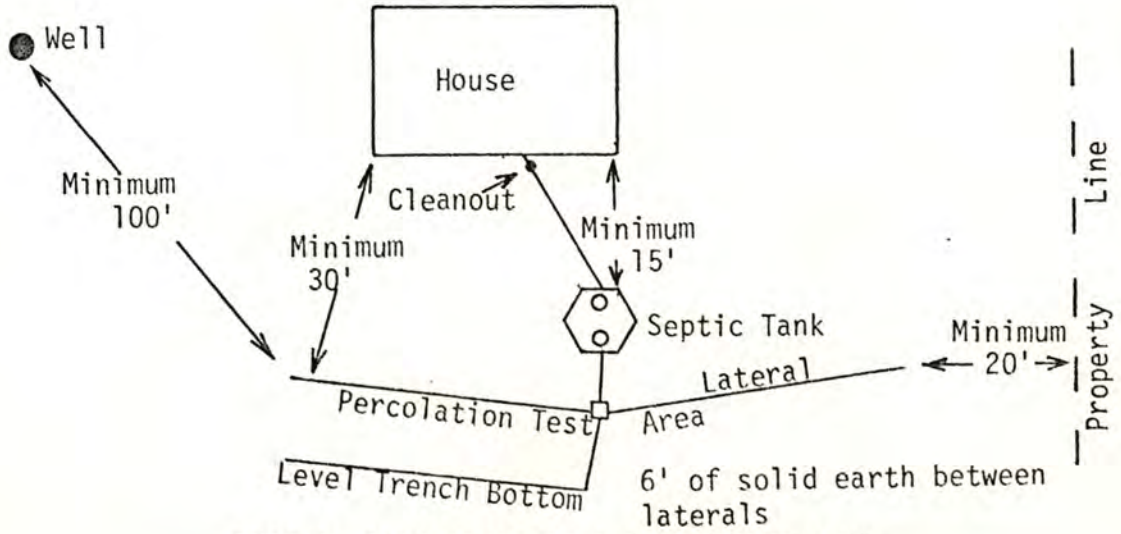
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 18 in.
3. Distance between dwelling and septic tank 69' ft.
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 CON ; No. of compartments 1.
2. Capacity 1500 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Pre CAST)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☑ Grade 12 in.
5. Inlet: Baffle ☑ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
7. Depth of top of tank below finished grade 24 in.
8. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material CON ; Number - available outlets _____.
2. Factory Built: Yes ☑ No ☐
(Company Pre CAST)
3. Distance from Septic Tank 6 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 6" _____.
Material: fiberglass ☐ ; plastic ☑ ; concrete ☐ ; other PIT 24'x48'.
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 10-1-84 INSTALLER Capital City Trenching

