CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 2

INDIVIDUAL SEWAGE DISPOSAL SYSTEM (Septic Tank)
TYPE OF LICENSE OR PERMIT

October 10, 1967
THIS LICENSE OR PERMIT EXPIRES

Donald O. Kuhn
LICENSEE OR PERMITTEE

845 Northborough Lane
ADDRESS

_____
NAME OF ESTABLISHMENT, IF ANY

Grant T 9N; R-7; Sec. 16; Lee Summit Add.
Legal Description
ADDRESS

REMARKS: Non-Transferable

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
143-1535	10.0116	24.0114	6-2

SERIAL NO.	DATE	AMOUNT
00048	APR 13 67	30.00 -

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-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. 2

DATE: April 7, 1967

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. 7 N ; Range 7 ; Section 16 ; Block ____ ; Lot ____ ; Addition Fee ; Grant Sumner
Street Address ? .

2. Property Use: Residential ____ [✓]; Commercial ____ [ ]
No. of Bed Rooms 4 Describe: ____

Other Use acreage [ ]
Describe: ____

3. Type of Individual Sewage Disposal System: Septic Tank [✓]; 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.)

Donald D Kuhn
Signature of Applicant (owner or lessee)

845 northborough
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: April 7, 1967
Filing Fee: $ ____ . ____

2. Date Site Clearance April 10, 1967

3. Site Visits:
Date: ____ by: ____
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved [✓]; Disapproved [ ]: ____
by: Lee Weed April 10, 1967

5. BUREAU OF LICENSES & PERMITS
Date Notified: April 13, 1967
Date Issued: 4-13-67 Serial 00048

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: ____ by: ____

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. 2

DATE: April 7, 1967

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. 7 Grant; Range 7; Section 4;
Block ____; Lot ____; Addition Lee Summit;
Street Address ?

2. Property Use: Residential ____ ☑; Commercial ____ ☐
No. of Bed Rooms 4 Describe: ____
Other Use garage ☐
Describe: ____

3. Type of Individual Sewage Disposal System: Septic Tank ☑; 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.)

Donald D Kuhn
Signature of Applicant (owner or lessee)

845 Scarborough
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: ____
Filing Fee: $____. ____

2. Date Site Clearance April 10, 1967

3. Site Visits:
Date: ____ by: ____
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved ✓; Disapproved ___: ____
by: Del Weed April 10, 1967

5. BUREAU OF LICENSES & PERMITS
Date Notified: April 13, 1967
Date Issued: 4-13-67 Serial 00048

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: ____ by: ____

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. 2

PROPERTY WHERE SOIL TESTED:
Location: Township Grant
Section & ¼ Sect. SE ¼ Sec 16
Property Dimensions: 228 ft. x 600 ft.
Area: 2½ acres. (Attach sketch of property showing hole location).

Owner: Don Kuhn
Address 845 northborough

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

Dates of Tests: April 6 to April 7. Weather: Precip. 0 Temp. 45 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)
1	3	4/6	12 Noon	4/6	7 PM	4/6	7 PM	11	7:45	10	45	1	45
2	4	4/6	12 Noon	4/6	7 PM	4/6	7 PM	11	7:45	10	45	1	45

Sum of Percolation Rates 90
Average of Rates: 45
Mean of Rates:

Don Kuhn
Signature of Person Conducting Test

Address 845 northborough
Phone: 466-9407

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

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

DATE: _____

_____
Signature of Reviewing Official

INTER-DEPARTMENT COMMUNICATION

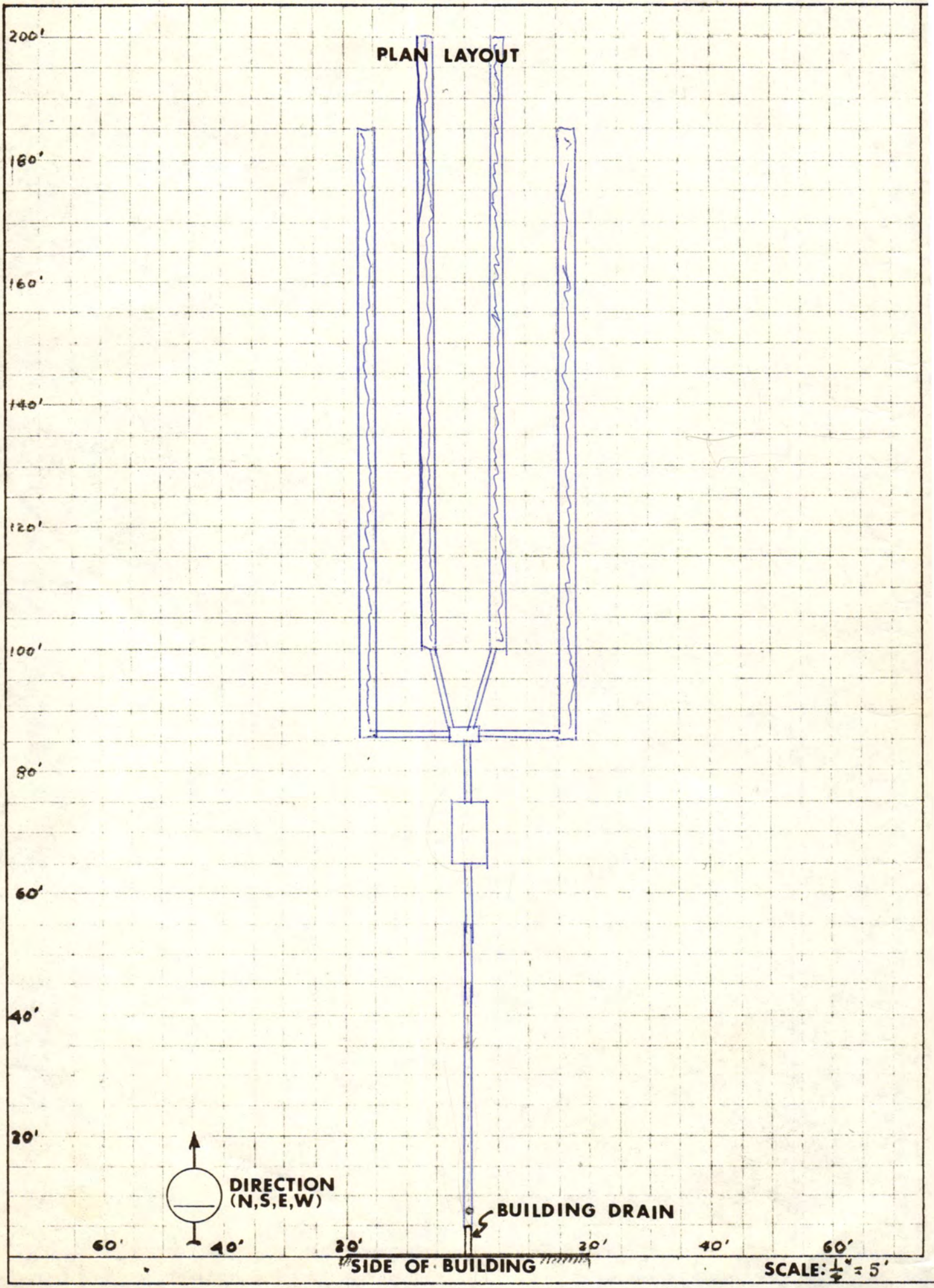
TO	Charlie Seale	**DATE**	April 27, 1967
DEPARTMENT	Supt. of Bldg. Inspection	**FROM**	Del Weed
ATTENTION		**DEPARTMENT**	Health
CARBONS TO		**SUBJECT**	Sewage Disposal System

The site, owned by Mr. Don Kuhn, and legally described as E. 228 ft. of W. 456 ft. of lot 4, Lees Summit, (S16-9-7), has been approved, including plans and specifications, for the installation of an individual sewage disposal system.

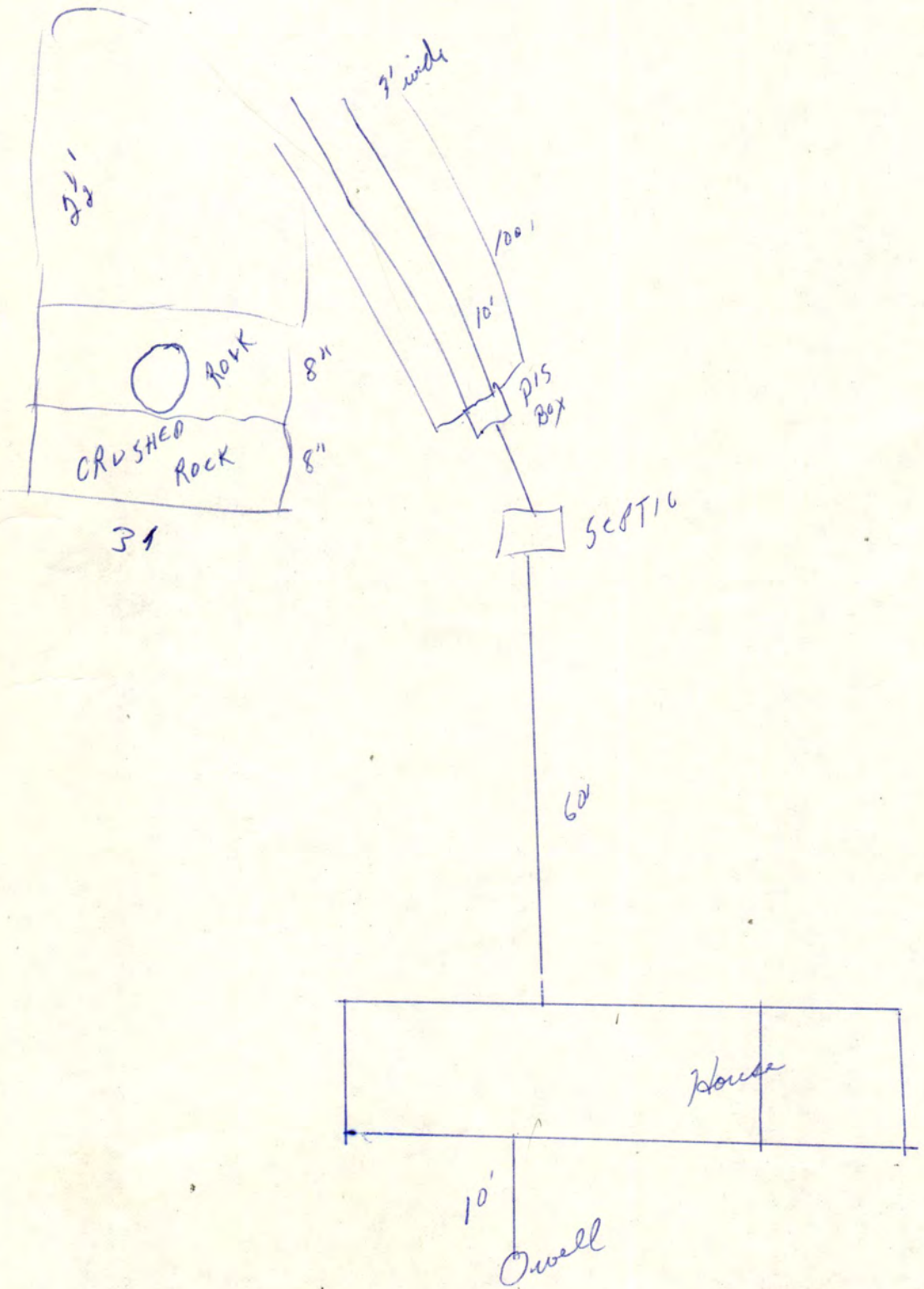
Del Weed, Chief
Section of General Sanitation
Division of Environmental Health

DW:do

PLAN LAYOUT


200'
180'
160'
140'
120'
100'
80'
60'
40'
20'
DIRECTION
(N,S,E,W)
BUILDING DRAIN
60'
40'
20'
20'
40'
60'
SIDE OF BUILDING
SCALE: 1/2" = 5'

DETAIL DRAWINGS



FORM HD 32 b(67): PLANS FOR INDV SEWAGE SYSTEM	Date April 7, 1967
Name Don Kuehn	
Address 845 Northborough	FILE NO. 2