FILE NO. 952

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

May 3, 1977
THIS LICENSE OR PERMIT EXPIRES

Doug Campbell, Route 8, Pine Lake Road, Lincoln, NE 68506
LICENSEE OR PERMITTEE — ADDRESS

T9N; R7E; Section 21 N½ NW¼ 21 97
NAME OF ESTABLISHMENT, IF ANY — ADDRESS

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE	
624-1535	110.16	148.14	6-2	

SERIAL NO.	DATE	AMOUNT
42626	3/4	30.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

Health APPLICATION

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 952

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

DATE: Nov 1/76

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: N 1/2 NW 1/4 21 97
   Twp. 9N ; Range 7E ; Section 21
   Block _____; Lot _____; Addition _____
   Street Address _____

2. Property Use: Residential _____ ☐ ; Commercial Nursery ☑
   No. of Bedrooms _____. Describe: Nursery Store
   Other Use _____ ☐
   Describe: _____

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

4. Distance to public sewer: 1 or 2 miles ~~ft.~~

Doug Campbell
Signature of Applicant (Owner or Lessee)

Rt. 8 Pine Lake Rd.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 11/2/76. Date Frwd. 11/3/76.
   ACTION: Approved ☒ Disapproved ☐
   Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 11-3-76. Date Frwd. 11-3-76.
   ACTION: Approved ☑ Disapproved ☐
   Signature: RWilliamson

3. City or County Engineer: Date Rec'd. 11/3/76. Date Frwd. _____.
   ACTION: Approved ☐ Disapproved ☒
   Signature: Joe Rudy

REMARKS OR REASONS FOR DISAPPROVAL _____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 952

DATE: Nov. 1/76

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 appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: N 1/2 NW 1/4 21 97 Twp. 9N ; Range 7E ; Section 21 ; Block ; Lot ; Addition .
Street Address .

2. Property Use: Residential [ ]; Commercial Nursery [X]
No. of Bedrooms
Other Use
Describe:
Describe: Nursery Store

3. Type of Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Doug Campbell
Signature of Applicant (owner or lessee)

Rt. 8 Pine Lake Rd.
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 11-17-77 by: [illegible]
Date: by:
Date: by:

3. Date: Approved [X]; Disapproved [ ] 11/2/76
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-17-77 by: [illegible]

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 475-6221)

FILE NO. 953

PROPERTY WHERE SOIL TESTED: N½ NW¼ 21 9 7 Owner: CAMPBELL'S NURSERIES
Location: Township ____; Range ____
Section & ¼ Sect. ____ Address Rt. 8 PINE LAKE RD.
Property Dimensions: ____ ft. x ____ ft.
Area: 80 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Judson Soil
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: 10/28/76 to 10/29/76. Weather: Precip. 0 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				
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	30"	10/28	12:00	10/29	12:00	10/29	3:40	6"	4:10	0	30 Min.	6"	5min / 1 inch
2	30"	10/28	12:00	10/29	12:00	10/29	3:40	6"	4:10	0	30 min.	6"	5min / 1 inch
3	30"	10/28	12:00	10/29	12:00	10/29	3:45	6"	4:15	0	30 min.	6"	5min / 1 inch
4	30"	10/28	12:00	10/29	12:00	10/29	3:45	6"	4:15	0	30 min	6"	5min / 1 inch
5	30"	10/28	12:00	10/29	12:00	10/29	3:50	6"	4:20	5 1/8"	30 min	7/8"	26 1/4 min. / inch
6	30"	10/28	12:00	10/29	12:00	10/29	3:50	6"	4:20	5 1/4	30 min	3/4"	22 1/2 min / inch

Sum of Percolation Rates 68 3/4 / 6 inches
Average of Rates: 7 min / 1 inch
Mean of Rates: ____

Doug Campbell
Signature of Person Conducting Test

Address Rt 8 Pine LAKE RD
Phone: 488-0958

(Do not write below this line)

REVIEWING ACTION

REMARKS: ____

Approved Percolation Rate(s)
A. 7 min./inch
B. ____ min./inch
C. ____ min./inch

DATE: November 2, 1976

Jerrold C. Hood
Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM

(Annex to Application)
City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 953

SPECIFICATIONS

DATE: Nov 1/76

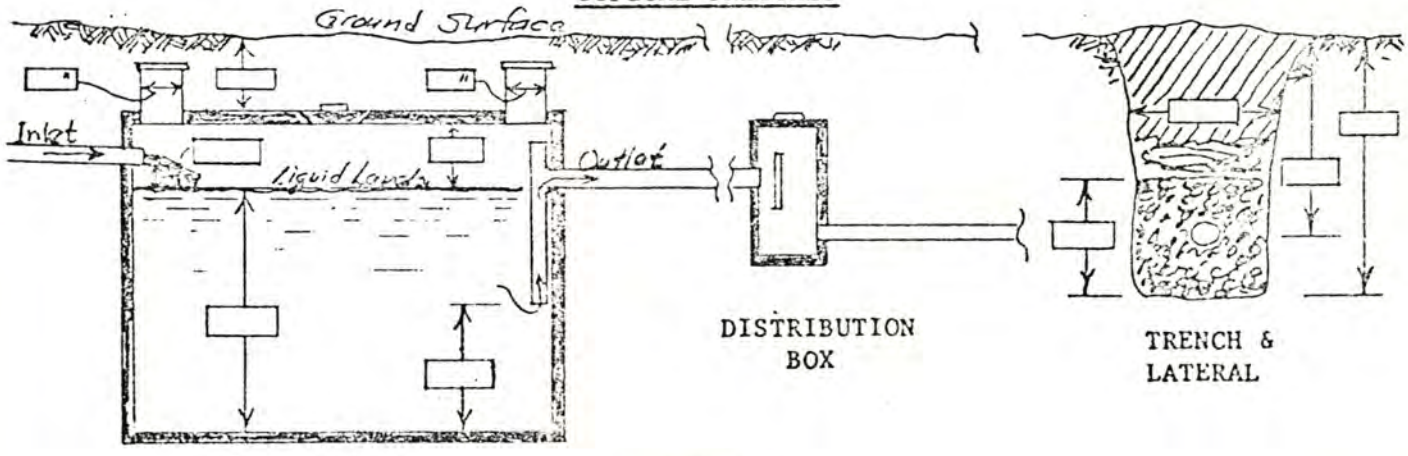
A. BUILDING SEWER:
1. Material CAST IRON; Diameter 4" in.
2. Distance above basement floor 0" in.; or below basement floor 6" in.
3. Distance between dwelling and septic tank 25' ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 320' ft.;
Stream NONE ft.; Pressure Line 320' ft.;
Property Line 240' ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material CONCRETE No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth 51 in.
3. Factory Built: Yes [✓] (Company Lee Cast Step Co) No [ ]
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade _____ in.
5. Inlet: Baffle [ ]; or Tee [ ]
6. Outlet: Baffle [X]; or Tee [ ]
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 12" in.
8. Distances To:
Well or Suction Line 320' ft.;
Stream NONE ft.; Pressure Line 320' ft.;
Property Line 240' ft.

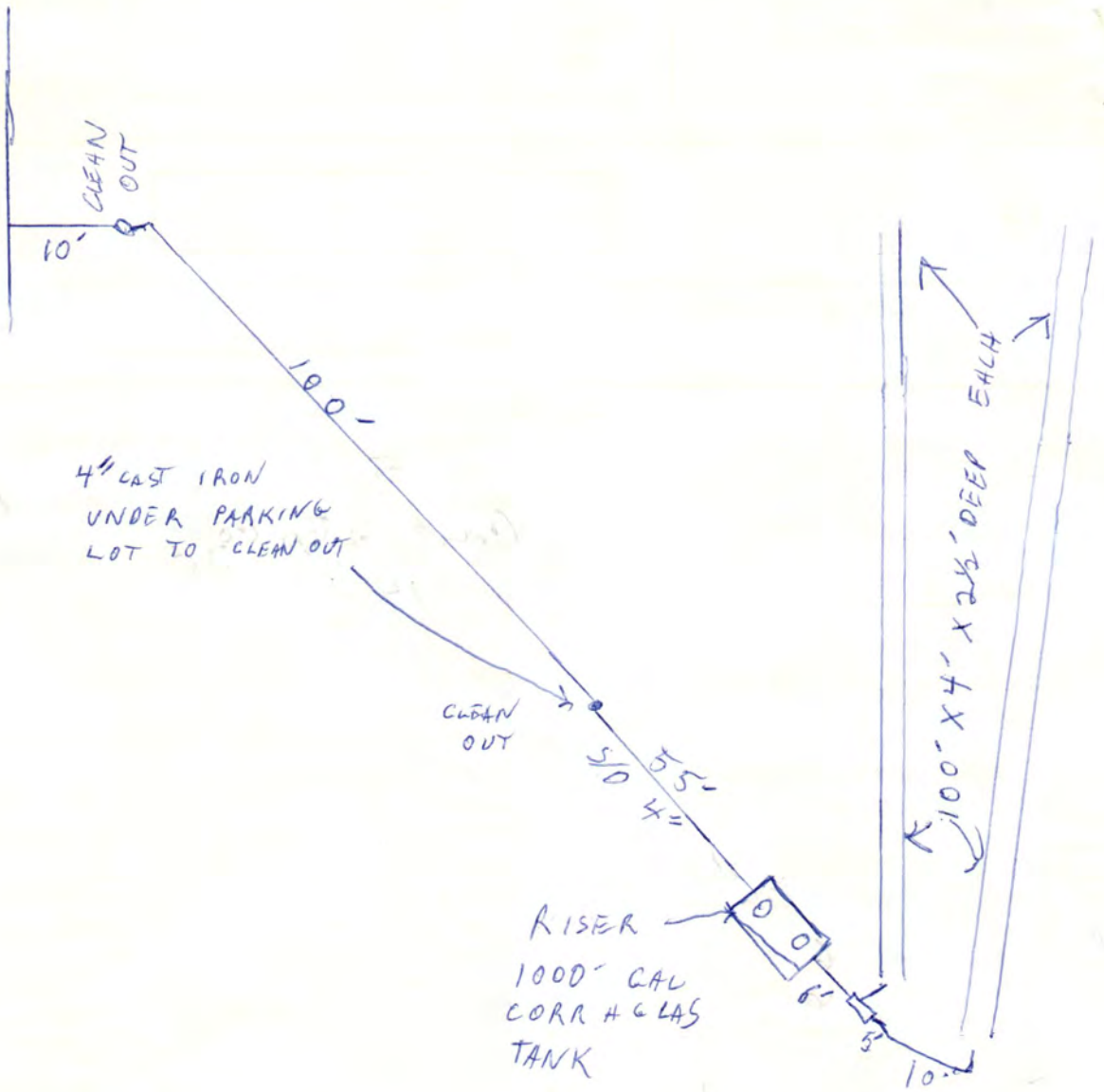
C. DISTRIBUTION BOX
1. Material CONCRETE No. available outlets 5.
2. Factory Built: Yes [✓], (Company Lee Cast Step Co) No [ ]
3. Dimension: Length 20 in.; Width 14 in. Depth 14 in.
4. Distance from Septic Tank 180' ft.
5. Serial Distribution: Yes [ ], No [ ] (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: CONCRETE 1/2-MOON
2. Lateral Lines: Depth below grade 10 in. Number 2; Length of each line 100 ft Total length of Laterals 200' ft.; Slope 12" in/100 ft. Diameter of pipe NONE in.; Shape 1/2 MOON Material: concrete [ ]; fiber asbestos [ ]; clay [ ]; other Fiberglass Distance between lateral lines 4' 0 ft.
3. Trench Dimensions: Depth 24" in.; Width 48" in.
4. Filter Material: ROAD GRAVEL. Depth of material from trench bottom 8" in.
5. Distances To:
Well or Suction Line 360 ft.;
Stream NONE ft.; Pressure Line 360' ft.
Property Line 40' ft.
6. Percolation Rate: 7 Min./1 inch Minutes/inch

TYPICAL SKETCHES



Signature of Applicant



NOV 17-77

Norma Benjamin

NORTH