CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 44

INDIVIDUAL SEWAGE DISPOSAL SYSTEM — October 12, 1968

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

Donald Magee (for Wayne Beans) — Rt. 8

LICENSEE OR PERMITTEE — ADDRESS

T 9N; R. 7E; Sec. 22; Block 1; Lot 3; Clarendon Hills Add

NAME OF ESTABLISHMENT, IF ANY — 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
12809	APR 12 68	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. 44

DATE: 11 April 68

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 22;
Block 1; Lot 3; Addition ____;
Street Address Clarendon Hills.

2. Property Use: Residential ____ [✓]; Commercial ____ [ ]
No. of Bed Rooms 3 Describe: ____

Other Use ____ [ ]
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.)

Darrell Magee for Wayne Beams
Signature of Applicant (owner or lessee)

Rt 8
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance ____

3. Site Visits:
Date: 5/28/68 by: L.C.H.
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved [X]; Disapproved [ ]: 4/12/68
by: Jerrold E. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 5/28/68 by: Jerrold E. Hood

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. 44

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 22 ;
Block 1 ; Lot 3 ; Addition _____ ;
Street Address Claude Hill .

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.

Donald Mayer for Wayne Blomenberg
Signature of Applicant (owner or lessee)

RR 8
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 4/12/68 . ACTION: Approved ☒ Disapproved ☐
Date Frwd. 4/12/68 . Signature: Jerrold C. Hoak

2. Supt. Bldg. Insp.: Date Rec'd. 4/12/68 . ACTION: Approved ☑ Disapproved ☐
Date Frwd. 4/12/68 . Signature: Chas Seale R.S.

3. City Engineer: Date Rec'd. _____ . ACTION: Approved ☐ Disapproved ☑
Date Frwd. 4-12-68 . Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

FINAL ACTION ON SITE CLEARANCE: Approved ☐ Disapproved ☐

Date Applicant Notified: _____ Signature _____

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. 44

PROPERTY WHERE SOIL TESTED:
Location: Township 9N, 7E, 22, B/Lot 3
Section & ¼ Sect. _____
Property Dimensions: 300 ft. x 440 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 ☐

Owner: Wayne Beams
Address 5016 Randolf

Dates of Tests: 11 april 68 to _____. Weather: Precip. None Temp. 70 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	36	11 April	830	11 April	530	11 April	530	30	540	29	10	1	10/1
2	36	11 April	830	11	530	11 April	530	30	540	29	10	1	10/1

Sum of Percolation Rates _____
Average of Rates: 10
Mean of Rates: _____

Donald Hagen
Signature of Person Conducting Test

Address RR 8
Phone: 488-8099

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 10 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: April 12, 1968

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. 44

SPECIFICATIONS

DATE: 11 April 68

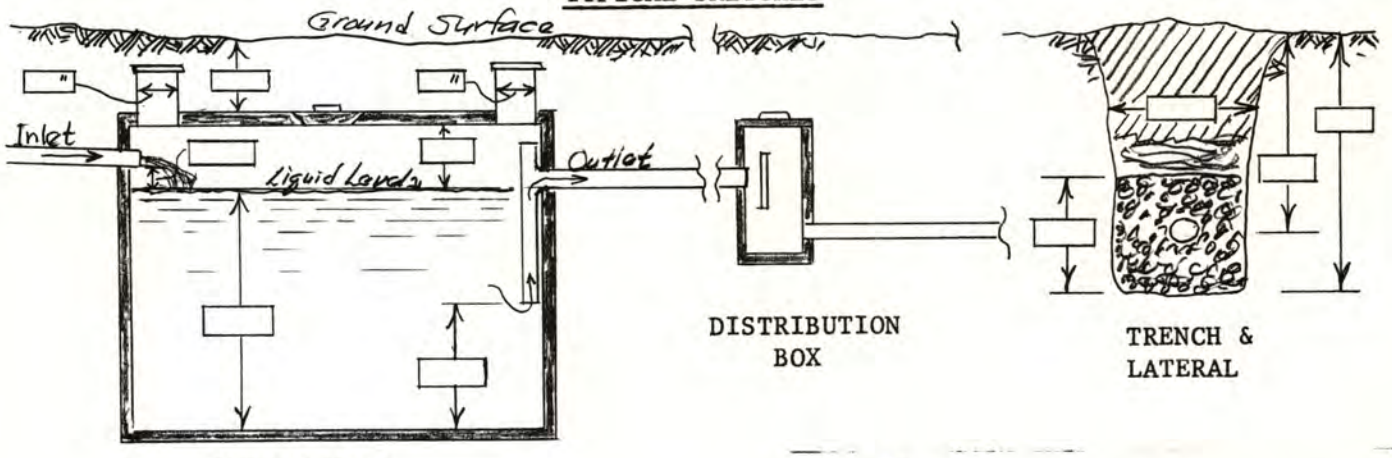
A. BUILDING SEWER:
1. Material Clay tile; Diameter 4 in.
2. Distance above basement floor 18 in.; or below basement floor ___ in.
3. Distance between dwelling and septic tank 40 ft.
4. Number of clean-outs ___.
5. Distances To:
Well or Suction Line 150 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 100 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Tile; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 48 in.
3. Factory Built: Yes ☐ (Company ___)
No ☐ Corrugated
4. Manholes: Over Inlet; diam. 16 in.
Over Outlet; diam. ___ in.
Below Grade 20 in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet 2 in.
7. Depth of top of tank below finished grade 20 in.
8. Distances To:
Well or Suction Line 150 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 100 ft.

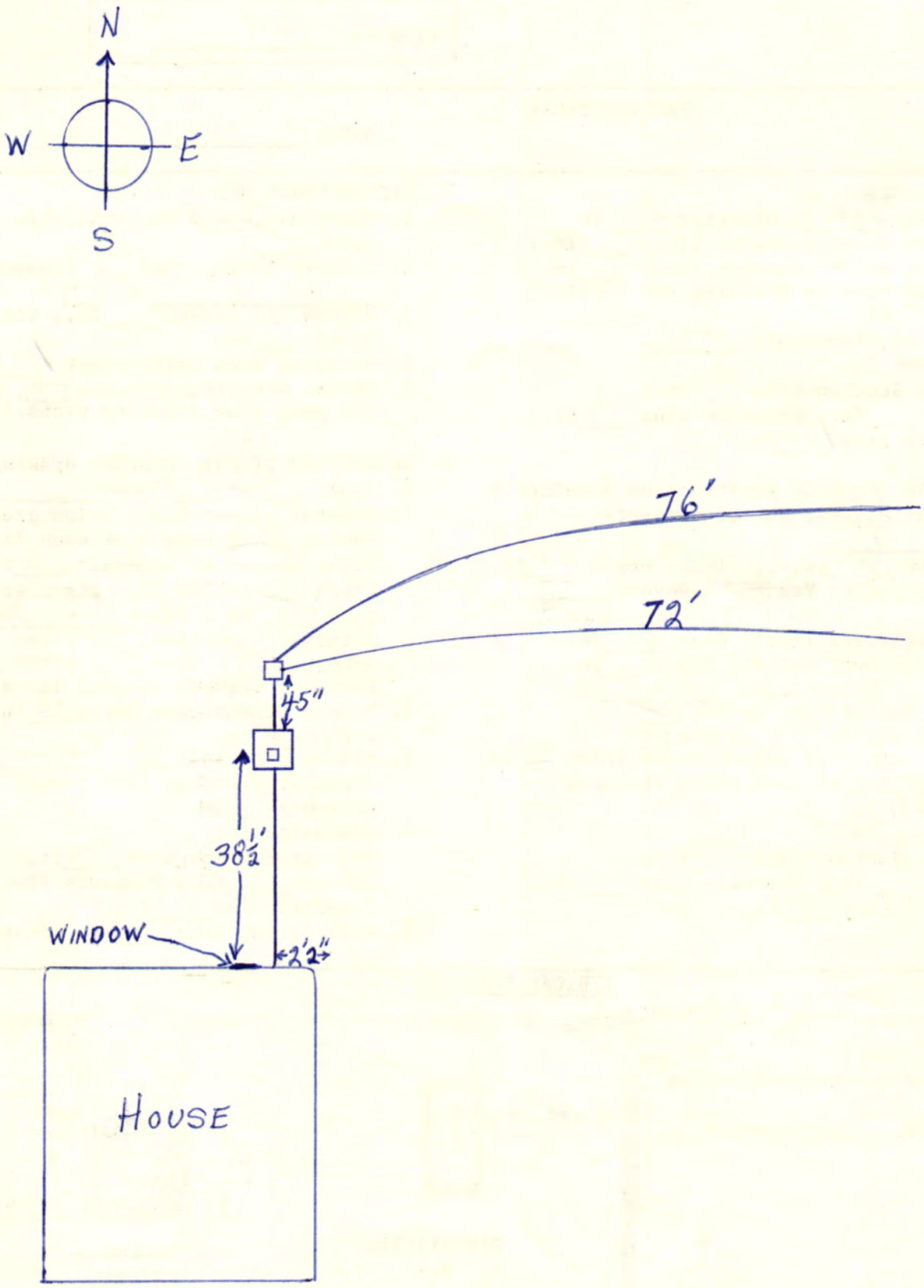
C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes ☐, (Company ___) No ☐ Precast
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☒, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half moon
2. Lateral Lines: Depth below grade 18 in. Number 2; Length of each line 75 ft Total length of Laterals 150 ft.; Slope 2 in/100 ft. Diameter of pipe 6 in.; Shape Half Moon Material: concrete ☐; fiber asbestos ☐; clay ☐; other ___ Distance between lateral lines 15 ft.
3. Trench Dimensions: Depth 34 in.; Width 48 in.
4. Filter Material: Gravel. Depth of material from trench bottom 18 in.
5. Distances To:
Well or Suction Line 50 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line 100 ft.
6. Percolation Rate: 10/1 minutes/inch

TYPICAL SKETCHES



Donald Wagner for Wayne Barnes
Signature of Applicant


N
W
E
S
76'
72'
45"
38½"
WINDOW
2'2"
HOUSE