CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 48

INDIVIDUAL SEWAGE DISPOSAL SYSTEM
TYPE OF LICENSE OR PERMIT

November 1, 1968
THIS LICENSE OR PERMIT EXPIRES

Donald Magee (for Fred Bienka)
LICENSEE OR PERMITTEE

Rt. 8, Lincoln
ADDRESS

T 9N; R 7E; Sec. 22; Block 3; Lot 10; Clarendon Hills
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
12855	MAY 3 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. 48

DATE: 1 May 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 3; Lot 10; Addition ____;
Street Address Clover 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.)

Donald Wagner for Jerrel Brenbar
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: 5/7/68 by: J.C.H.
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved [✓]; Disapproved [ ]: 5/1/68
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: June 7, 1968 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. 48

PROPERTY WHERE SOIL TESTED: Owner: Fred Bienko
Location: Township 9N 7E Sec 22 Blk 3 Lot 10 Chula Hills Address 4500 Pioneers
Section & ¼ Sect. _____
Property Dimensions: 300 ft. x 320 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: 1 May 68 to 1 May 68. 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	40	~~1 May 68~~	0600	0900	3 hr	~~0900~~	0900	34	916	33	16	1	16/1
2	40	1 May 68	0600	0900	3 hr	~~0900~~	0900	34	918	33	18	1	18/1

Sum of Percolation Rates 17/1
Average of Rates:
Mean of Rates:

Daniel Meyer
Signature of Person Conducting Test

Address RR 8
Phone: ~~Lin~~ 488-8089

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 17 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: May 1, 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. 48

SPECIFICATIONS

DATE: 1 May 68

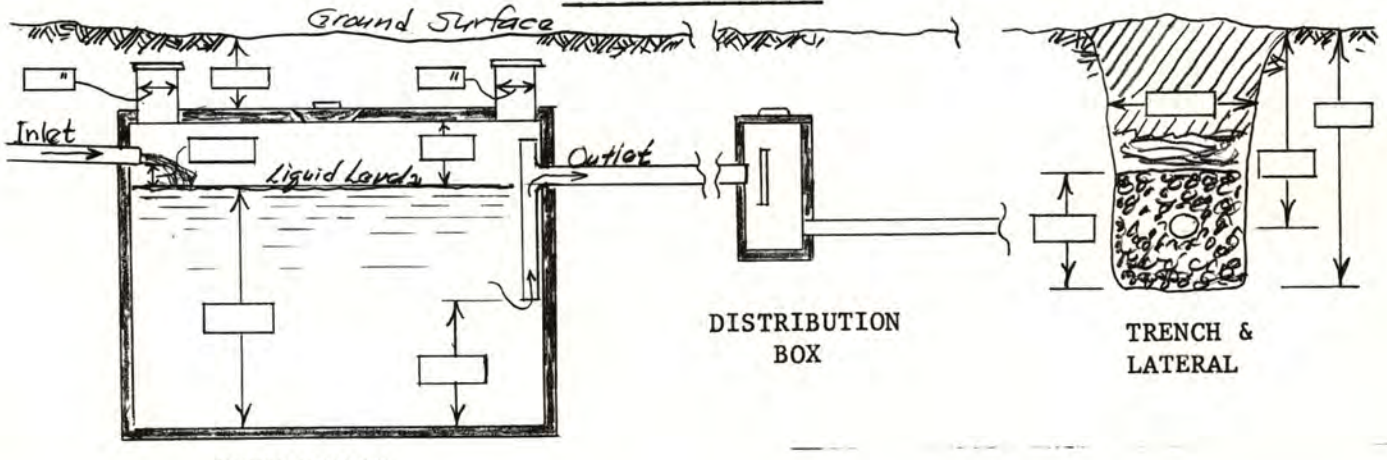
A. BUILDING SEWER:
1. Material Clay; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 18 in.
3. Distance between dwelling and septic tank 40 ft.
4. Number of clean-outs ___.
5. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material Fiber Glass; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 50 in.
3. Factory Built: Yes ☑ (Company Corrugated Fiber Glass)
No ☐
4. Manholes: Over Inlet; diam. 18 in.
Over Outlet; diam. ___ in.
Below Grade 18 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 12 in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 150 ft.

C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes ☑, (Company Pre Cast) No ☐
3. Dimension: Length 14 in.; Width 12 in. Depth 8 in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☑, No ☐ (If yes, show detailed plans.)

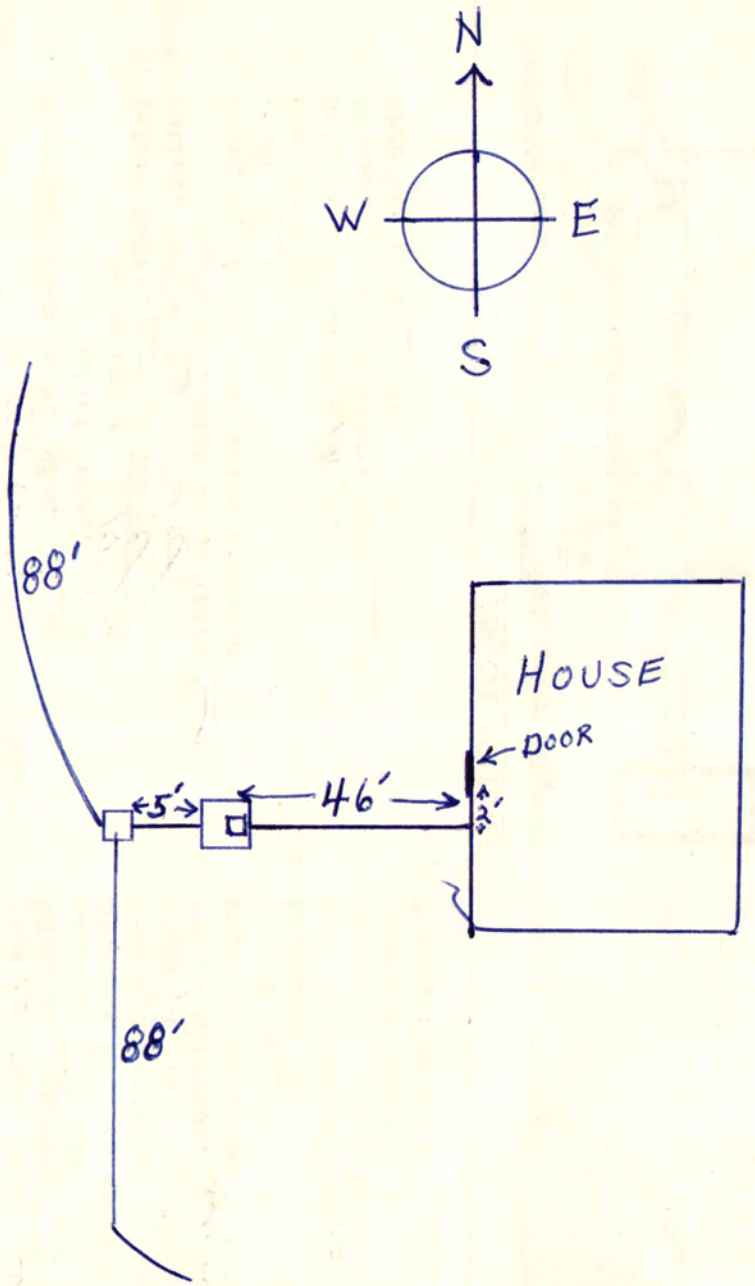
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half Moon
2. Lateral Lines: Depth below grade 18 in.
Number 2; Length of each line 88 ft
Total length of Laterals 176 ft.;
Slope 2 in/100 ft. Diameter of pipe 16 in.; Shape Half Moon
Material: concrete ☐; fiber ☑ asbestos ☐; clay ☐; other ___
Distance between lateral lines 20 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 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line 150 ft.
6. Percolation Rate: ___ minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

Signature of Applicant


N
W
E
S
88'
HOUSE
DOOR
5'
46'
3'
88'

FILE #N-234

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL WATER WELL CONSTRUCTION — TYPE OF LICENSE OR PERMIT

SEPTEMBER 14, 1986 — THIS LICENSE OR PERMIT EXPIRES

ELIZABETH SPOSATO — LICENSEE OR PERMITTEE

7155 SO. 75 STREET, LINCOLN, NE 68516 — ADDRESS

T9N; R7E; Sec 22 NW¼; Bk 3; Lot 10; Clarendon Hills — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 45.00	018851	$ 45.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. Date and Amount

45.00

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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

FORM: 20222-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN, NEBRASKA 68502
PHONE: 471-7800

FILING FEE $ _____

FILE NO. W-134

DATE: 3-14-86

The undersigned hereby requests: Site Clearance and Permit to construct a new individual water well ☒ ; Permit existing well ☐ ; well repair or alteration involving opening of well ☐ ; in conformance with appropriate ordinance, as described herein:

1. Legal description of property: Twp. 9N : Range 7E : Section 22 nw 1/4
   Block 3 : Lot 10 : Addition Clarendon Hills
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: _____ Ft.
4. Intended use of well Domestic

Elizabeth Spenato
Signature of Applicant (owner or lessee)

7155 S.75th, Lincoln, NE 68516
Address

Sewage Permit Applied For Yes ☐ No ☐ Not Applicable ☒

1. Health Department: Date Rec'd 3/14/86. Action: Approved ☒ Disapproved ☐
   Date Frwd. 3/14/86. Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 3/14/86. Action: Approved ☒ Disapproved ☐
   Date Frwd. 3/14/86. Signature: [illegible]
3. City or County Engineers: Date Rec'd 3/14/86. Action: Approved ☒ Disapproved ☐
   Date Frwd. 3/14/86. Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 3/31/86 by J. C. Hood
Date: 4-2-86 by [illegible]
Date: _____ by _____

Nitrate Level 0.26 PPM
Bacteriological Analysis Satisfactory
Yes ☒ No ☐

INSTALLATION FINAL WRITTEN APPROVAL
Date: 4/17/86 By: J. C. Hood

Health Department copy: White
Engineers Copy: Light Green
Building Inspectors Copy: Light Blue

FORM 23-13

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. W-134

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN NE 68502
Phone: 471-7800

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 22 T. 9 R. 7 Block 3 Lot 10 Addition Clarendon Hills
NW 1/4
Owner Richard & Elizabeth Sposato Address 7155 S. 75th, Lincoln NE 68516

LOG OF WELL	
Depth Ft. to	Description
0-3	Top soil
3-30	Tan clay
30-53	Yellow clay
53-54	Loose rock
54-64	Yellow clay
64-65	Sand
65-95	Yellow & blue clay
95-97	Sandy clay
97-100	Blue clay
100-115	Sandy lt. blue clay
115-139	Sandy dark blue clay
139-166	Soft sandrock
166-172	Yellow clay
172-251	Hard sandrock
251-252	Blue clay

WELL COMPLETION RECORD

Drilling Method:

Depth (from ground level), Ft. 252
Date Completed 3-26-86

Casing: Length, Ft. 252 ;Dia.In. 5
Wall Thickness, Inc. .200# ;type PVC

Screen: Length, Ft. 20 Dia.In. 5
Type PVC ,slot Size .016

Drop Pipe: Length, Ft. 200 Dia.In. 1 1/4

Water Level, Surface to top of water, Ft.:
Static 167', Pumping 200'

Yield: 80 ggm, Measured ☒ ,Est. ☐
Chlorination Completed Yes ☒ No ☐

The above information including "Log of Well" is a true record of the job performed by me.

Driller Blue Valley Drilling - Alan Strader
(Signed)
B & R Pump Service set the pump and log sheet submitted by B & R Pump

Address

Date 4-17-86

REMARKS NITRATE NITROGEN 0.26 ppm.
BACTERIOLOGICAL O.K.

DO NOT WRITE BELOW THIS DOUBLE LINE

Health Department forwarded copy of record to Nebraska Conservation and Survey Department for Scientific Record ☒

FORM 23-4

AS BUILT DRAWING OF INSTALLATION IN RELATION TO BUILDINGS, PROPERTY LINES, OTHER WELLS, AND SOURCES OF CONTAMINATION. INDICATE NORTH.

