CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

File No. 68

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — February 16, 1969

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

Donald Magee for Rapp Construction — 6331 Burlington

LICENSEE OR PERMITTEE — ADDRESS

Sec. 22
T 9N; R 7E; Blk. 3; Lot 1; Clarendon Hills First Addition

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
110.15	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
143-1535	10.0116	24.0114
14316	MR10 68	30.00 -

APPLICATION

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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

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. 68

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. 9; Range 7; Section 22;
Block 3; Lot 1; Addition Trust;
Street Address Chamberlain Hills.

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 Meyer for Rapp Const
Signature of Applicant (owner or lessee)

6331 Burlington
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/16/68. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 8/19/68. Signature: Jerrold C. Head

2. Supt. Bldg. Insp.: Date Rec'd. 8/19/68. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 8/19/68. Signature: Chas E Neal

3. City Engineer: Date Rec'd. 8-19-68. ACTION: Approved ☐ Disapproved ☐
Date Frwd. ____. Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL ____

FINAL ACTION ON SITE CLEARANCE: Approved ☐ Disapproved ☐

Date Applicant Notified: ____ Signature ____

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. 68

DATE: 12 Aug 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. _____; Range ____; Section _____;
Block 3; Lot 1; Addition Trent;
Street Address _____.

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 Mogee for Rapp Const
Signature of Applicant (owner or lessee)

6331 Burlington
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance _____

3. Site Visits:
Date: 8/22/68 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 8/19/68
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 8/22/68 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. 68

PROPERTY WHERE SOIL TESTED: Blod 3 Lot 1 Owner: Rapp Const
Location: Township _____ Section & ¼ Sect. Clandon Hill Address 6331 Burlington
Property Dimensions: 400 ft. x 400 ft. Plat
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: ~~8~~ 5 Aug 68 to 6 Aug 68. Weather: Precip. 0 Temp. 85 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)
		~~8~~											
		5/8/68	0830	6/8/68	0830	6/8/68	0830	30	0844	29	14	1	14/1
		5/8/68	0830	6/8/68	0830	6/8/68	0830	30	0844	29	14	1	14/1

Donald Mogee
Signature of Person Conducting Test

Address 6331 Burlington
Phone: 488-5099

Sum of Percolation Rates
Average of Rates: 14/1
Mean of Rates:

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 14 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: August 19, 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. 68

SPECIFICATIONS

DATE: 12 Aug 68

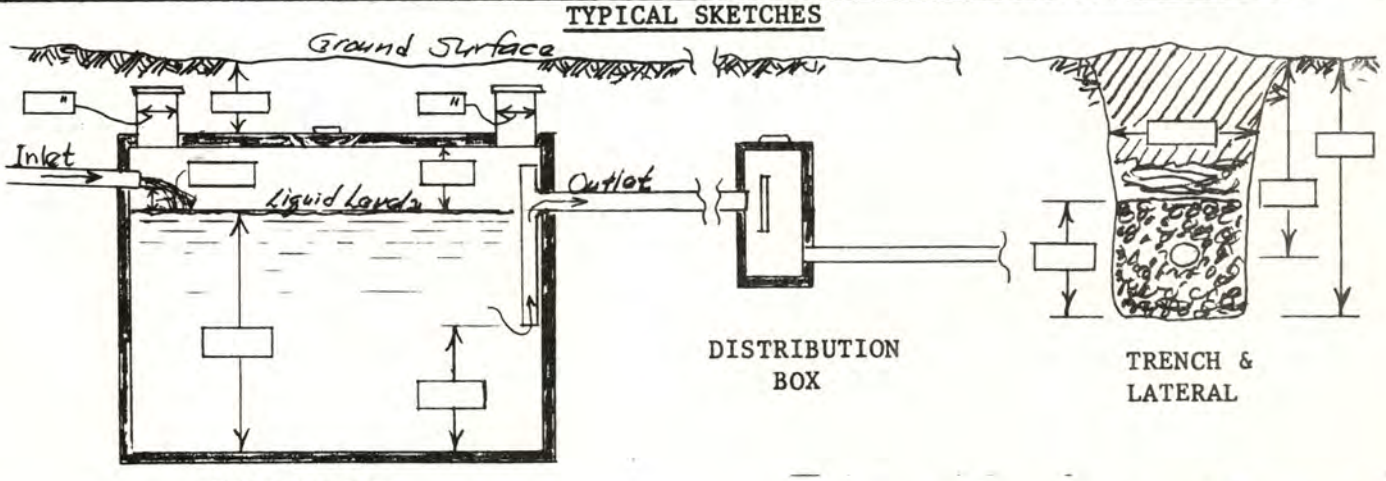
A. BUILDING SEWER:
1. Material Clay tile; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 18 in.
3. Distance between dwelling and septic tank 100 ft.
4. Number of clean-outs ___.
5. Distances To:
Well or Suction Line 75 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 200 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material ~~Tile~~ Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 48 in.
3. Factory Built: Yes ☐ (Company ~~Concrete~~) No ☐
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 200 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 175 ft.

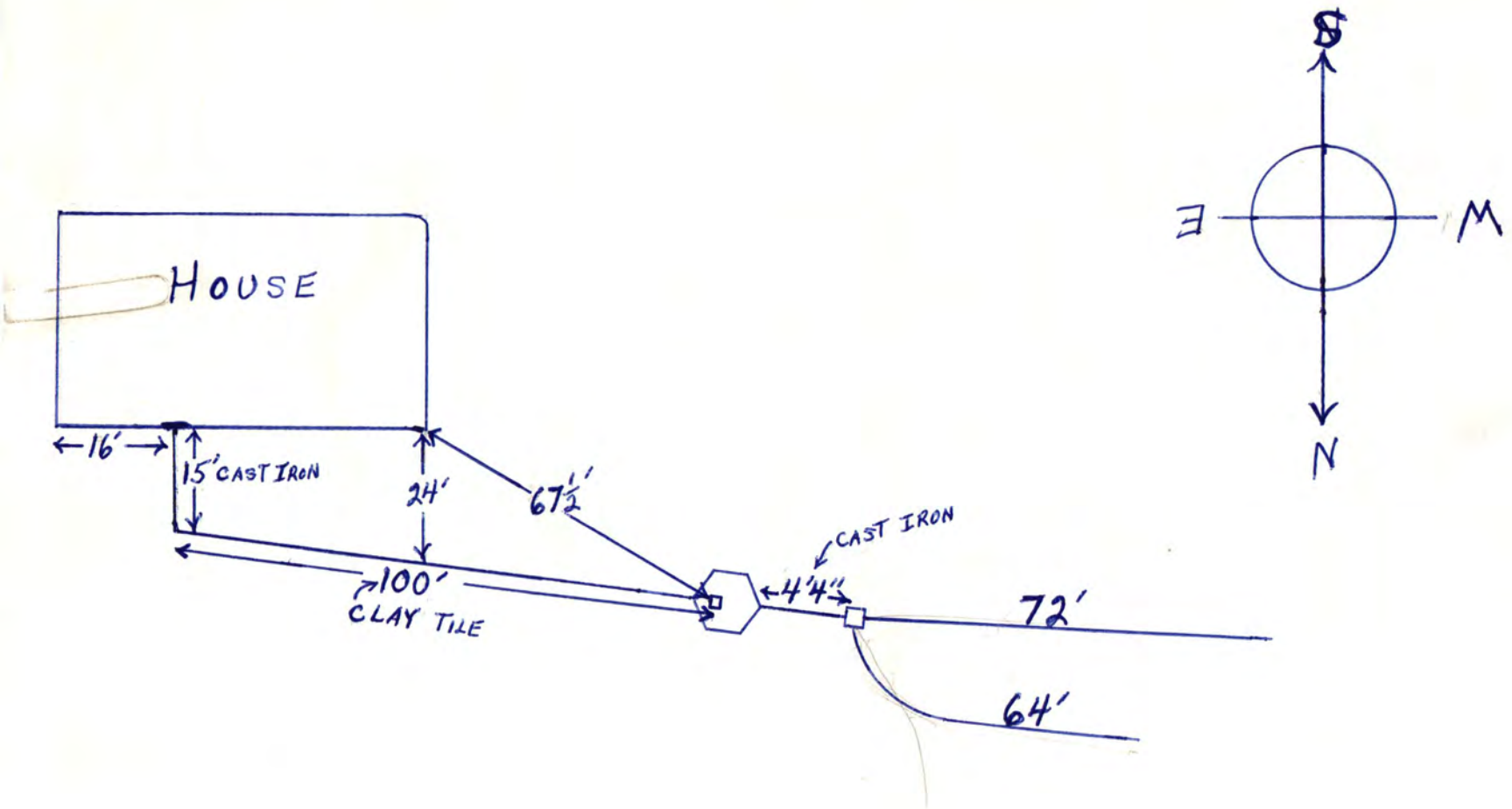
C. DISTRIBUTION BOX
1. Material Concrete No. available outlets 5.
2. Factory Built: Yes ☑, (Company Lee Cast) No ☐
3. Dimension: Length 13 in.; Width 4 in. Depth 8 in.
4. Distance from Septic Tank 7 ft.
5. Serial Distribution: Yes ☑, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half moon
2. Lateral Lines: Depth below grade 20 in. Number 2; Length of each line ___ ft Total length of Laterals 136 ft.; Slope 4 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 36 in.; Width 48 in.
4. Filter Material: Gravel. Depth of material from trench bottom 18 in.
5. Distances To:
Well or Suction Line 210 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line 150 ft.
6. Percolation Rate: 14 minutes/inch

TYPICAL SKETCHES



Donald Mayo for Rapp Const
Signature of Applicant


S
E
W
N
HOUSE
16'
15' CAST IRON
24'
67½'
100'
CLAY TILE
CAST IRON
4'4"
72'
64'