CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 1235

TYPE OF LICENSE OR PERMIT: INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION

THIS LICENSE OR PERMIT EXPIRES: JUNE 6 1970

LICENSEE OR PERMITTEE: Chris Grabenstein

ADDRESS: 6329 South 83 Street, Lincoln, NE

NAME OF ESTABLISHMENT, IF ANY: T9N, R7E, Section 22

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
624-1535		

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

HEALTH

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. 1235

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

DATE: DEC 5

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: SEE ATTACHED
Twp. 9N; Range 7E; Section 22
Block _____; Lot _____; Addition _____
Street Address _____

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.

CHRIS GRABENSTEIN
Signature of Applicant (Owner or Lessee)

6329 S 83
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 12/5/77. Date Frwd. 12/6/77.
ACTION: Approved ☒ Disapproved ☐
Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 12-6-77. Date Frwd. 12-6-77.
ACTION: Approved ☒ Disapproved ☐
Signature: Gary M. Steward

3. City ~~or County~~ Engineer: Date Rec'd. 12-6-77. Date Frwd. 12-6-77.
ACTION: Approved ☒ Disapproved ☐
Signature: [illegible]

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. 1235

DATE: Dec 5-77

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. SEE ATTACHED

1. Legal description of property: Twp. 9 N ; Range 7 E ; Section 22 ; Block ; Lot ; Addition .
Street Address .

2. Property Use: Residential [X]; Commercial [ ]
No. of Bedrooms 3
Describe:
Other Use
Describe:

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).

CHRIS GRABENSTEIN
Signature of Applicant (owner or lessee)

6329 S 83
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 5-11-78 by:
Date: by:
Date: by:

3. Date: Approved [X]; Disapproved [ ] 12/5/77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 5-11-78 by: James Waverka

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 474-1541)

FILE NO. 1235

PROPERTY WHERE SOIL TESTED:
Location: Township 9N : Range 7E
Section & ¼ Sect. 22
Property Dimensions: ____ft. x ____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: CHRIS GRABENSTEIN
Address: 6329 S 83

Dates of Tests: _____ to _____. Weather: Precip.____ Temp.____

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				
Hold 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	25	Nov 29	7:00	Nov 30	7:00	Nov 30	8:35	15	9:05	16½	30	1½	
2								17½		18½		1	
3								15⅝		17⅛		1½	
4								15⅜		16⅜		1	
5								13¾		14¾		1	
6								14¼		15¾		1	

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

Norm Beyhan
Signature of Person Conducting Test

Address 3300 N 53
Phone 466 5210

(Do not write below this line)

REVIEWING ACTION

REMARKS: Steinauer Loam (S.C.S.)

DATE: December 5, 1977

Approved Percolation Rate (a)
A. 25 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hood
Signature of Reviewing Official

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
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: 474-1541

D

DATE: May 11 78

FILE NO. _____

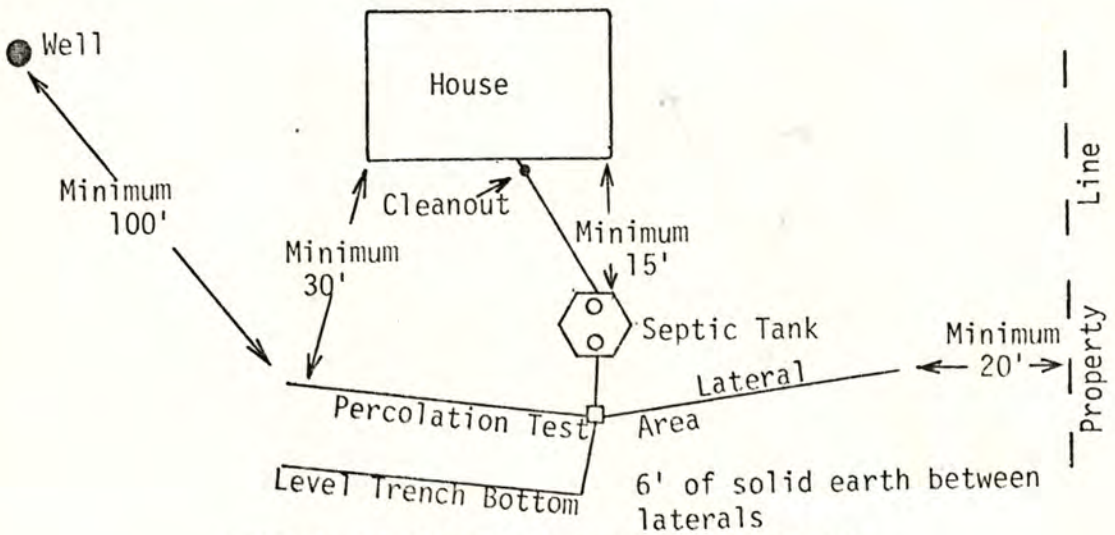
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material S+D ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 36" in.
3. Distance between dwelling and septic tank 200 ft.
4. Number of clean-outs _____.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material FIBER GLAS; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company CORA-A GLAS)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ___ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade _____ in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material PLASTIC ; Number - available outlets 7 .
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank 10 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 12 or Perforated Pipe _____.
Material: fiberglass ☒ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 4 ; Length of each line 28, 50, 46, 46, _____ ft.;
Total length of laterals 172 ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 4 ft.;
Slope 2 in/100 ft.; Average Depth ~~2~~ 30 in.
4. Filter Material: GRAVEL
Depth of Material 16 in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: 1/10/79

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☐ Evaluation of the Individual Water Supply

☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 9N ; Range R7E ; Section 22 ;
Block ; Lot 31 ; Addition .
Street Address 7420 YANKEE HILL RD, LINCOLN, NB.
Directions on how to get to property TO 56TH AND YANKEE HILL RD THEN EAST 1 1/3 miles. PROPERTY IS ON NORTH SIDE OF ROAD — WHITE RAIL FENCE
Location of well RURAL WATER DISTRICT
Where is tap: Inside ☐ Outside ☐

	NAME	ADDRESS	PHONE
Present Owner:	DAVID LIVINGSTON	7420 YANKEE HILL RD	423-4477
Tenant:			
Lending Agency:	FIRST FEDERAL SAVINGS	1235 N ST, LINCOLN	475-0521

(Do not write below double lines)

Health Department: Date Received 1-10-79
Received $45.00 Check ☒ Cash ☐

Site Visits: Date by
Date by
Date by

Signature of Applicant 474-4909
7420 YANKEE HILL RD.
Address

PRELIMINARY STATUS -- DATE 1-10-79

Water System:
Approved ☒ Disapproved ☐
Rural Water Dist. #1

Sewage Disposal System:
Approved ☒ Provisional Approval ☐
Disapproved ☐

Corrections Required or Reasons for Disapproval

☐ See Attached Letter.

FINAL APPROVAL -- DATE 1-11-79

Water System ☒ . Sewage Disposal System ☒ .

BY Ronald Morgan

Form Number 20215-0878

AS BUILT DRAWING OF SYSTEM

DATE May 11-78 INSTALLER NORM BERGHUIS

