CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 32

INDIVIDUAL SEWAGE DISPOSAL SYSTEM (Septic Tank)
TYPE OF LICENSE OR PERMIT

May 28, 1968
THIS LICENSE OR PERMIT EXPIRES

Janet Whitehead
LICENSEE OR PERMITTEE

4248 "A" Street
ADDRESS

NAME OF ESTABLISHMENT, IF ANY

T 9N; R 7E; Block 2; Lot 3; Sec. 27; Walnut Heights
Legal 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
02095	NOV 28 67	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-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. 32

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 27;
Block 2; Lot 3; Addition WALNUT HEIGHTS;
Street Address _____.

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

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

4. Distance to public sewer: _____ ft.

Samuel W Liebelood by E T
Signature of Applicant (owner or lessee)

4248 A St
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 11/28/67. ACTION: Approved [X] Disapproved [ ]
Date Frwd. 11/28/67. Signature: Gerald C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 11/28/67. ACTION: Approved ___ [X] Disapproved [ ]
Date Frwd. 11/28/67. Signature: Chas L Lewis (2d)

3. City Engineer: Date Rec'd. 11/28/67. ACTION: Approved [X] Disapproved [ ]
Date Frwd. " . Signature: K. L. Chase

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. 32

DATE: November 28, 1967

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 27;
Block 2; Lot 3; Addition WALNUT HEIGHTS
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.)

Janet Whitehead By E T
Signature of Applicant (owner or lessee)

H248a St
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance _____

3. Site Visits:
Date: 6/19/68 by: J. C. H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved X; Disapproved ___: Nov 28, 1967
by: Jerrold E. Wood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ by: _____

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. 32

PROPERTY WHERE SOIL TESTED:
Location: Township 9N
Section & ¼ Sect. NW¼ 27
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: Janet Whitehead
Address 4248 A St

Dates of Tests: Nov 24th to 25th. Weather: Precip. no Temp. 40 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)
	36"	11-24	11:30	11-25	11:30	11-25	11:30		330		Hours		
1								6"		1/2		5 1/2	
2								6"		1/4		5 3/4	
3								6"		1 1/2		4 1/2	
4								6"		3/4		5 1/4	
5								6"		1/2		5 1/2	
6								6"		1 1/2		4 1/2	

Elmer C Tamer
Signature of Person Conducting Test

Address 3625 Adams St
Phone: 466-2462

Sum of Percolation Rates: 31 ~~55~~
Average of Rates:
Mean of Rates: 60 min/in

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: November 28, 1967

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. 32

SPECIFICATIONS

DATE: November 28, 1967

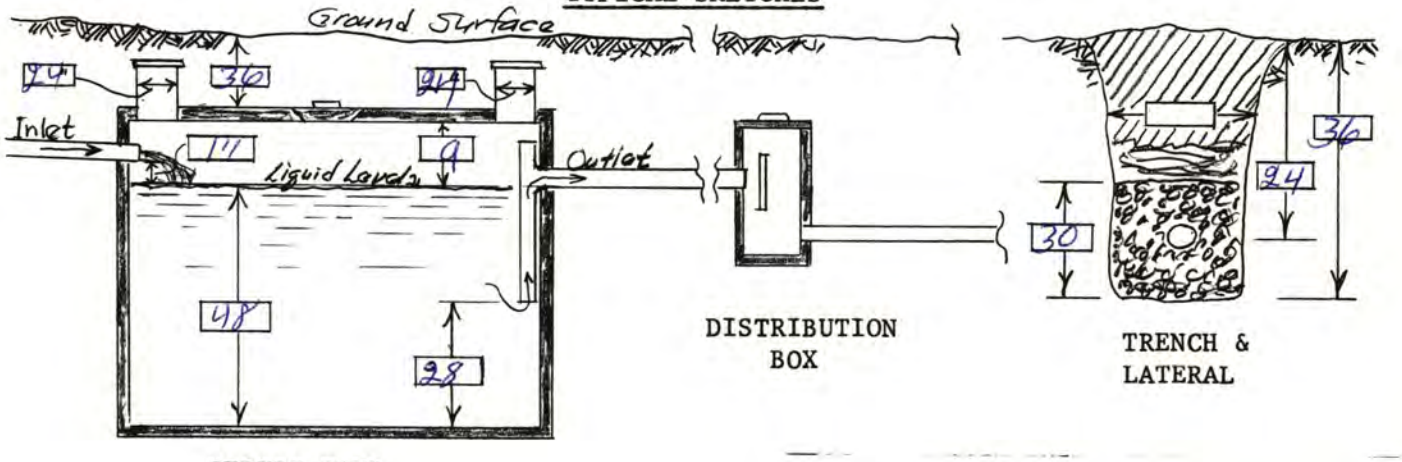
A. BUILDING SEWER:
1. Material TILE & CAST IRON; Diameter 4 in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 48 in.
3. Factory Built: Yes [ ] (Company CORRIGATED FIBERGLASS
No [X]
4. Manholes: Over Inlet; diam. 16" in.
Over Outlet; diam. ____in.
Below Grade 18" in.
5. Inlet: Baffle [ ]; or Tee [ ]
6. Outlet: Baffle [ ]; or Tee [X]
Depth of outlet below inlet 1" in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line 60 ft.;
Stream 600 ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRICTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes [X], (Company ____
No [ ]
3. Dimension: Length 20 in.; Width 13 in.
Depth 14 in.
4. Distance from Septic Tank 3 ft.
5. Serial Distribution: Yes [X], No [ ]
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ~~Concrete~~ FIBERGLASS Half round
2. Lateral Lines: Depth below grade ____in.
Number 4; Length of each line 64 ft
Total length of Laterals 250 ft.;
Slope 6 in/100 ft. Diameter of pipe 24 in.; Shape ⌒
Material: concrete [X]; fiber asbestos [ ]; clay [ ]; other ____
Distance between lateral lines 8 ft.
3. Trench Dimensions: Depth 36 in.;
Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 30 in.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: 60 minutes/inch

TYPICAL SKETCHES

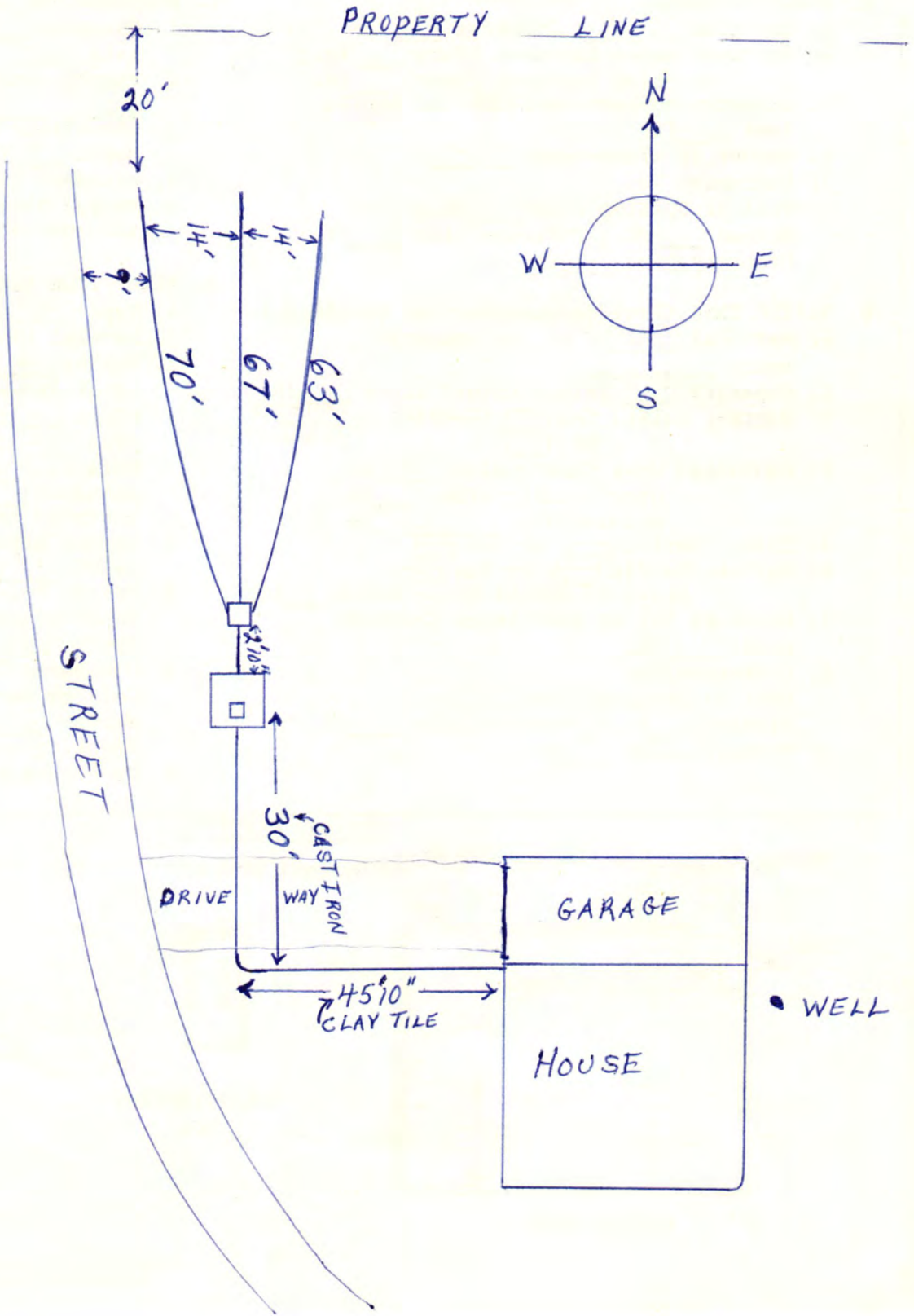


SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

Signature of Applicant


PROPERTY LINE
20'
N
W
E
S
14'
14'
9'
70'
67'
63'
STREET
2'10"
30'
CAST IRON
DRIVE
WAY
GARAGE
45'10"
CLAY TILE
WELL
HOUSE