LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 91380073301

Issued 07/31/91
Expires 01/31/92

ESTABLISHMENT

CHARLES LEININGER
T9N R7E SEC 28 QTR N
YANKEE RIDGE BLK 5 LOT 4
9141 S 64 CIRCLE

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

CHARLES LEININGER
4000 NORMAL BLVD
LINCOLN NE 68506

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
8/2/91	PAID

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

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 471-7800

A

FILING FEE: $ 150.00

FILE NO. _____

DATE: 7-31-91

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9 N ; Range 7 E ; Section N½ 28
   Block 5 : Lot 4 : Addition Yankee Ridge
   Street Address 9141 S. 64 Circle

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: _____ ft.

Charles Leininger LEININGER
Signature of Applicant (Owner or Lessee)

4000 Normal Blvd.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/31/91. Date Frwd. 8/2/91. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: Mel Schmidt
3. City or County Engineer: Date Rec'd. 8-2-91. Date Frwd. 8-2-91. ACTION: Approved ☒ Disapproved ☐ Signature: BEMichaelson

REMARKS OR REASONS FOR DISAPPROVAL _____

TANK ALSO 250 TOO SMALL

Site Visits:
Date: 9/4/92 by: J.C.H.
Date: / / by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 9/8/92 By: Jerrold C. Nood

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

* EXPERIMENTAL SYSTEM HENCE PROVISIONAL APPROVAL

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 7 ; Section & ¼ Section North ½ 28
Property Dimensions: _____ ft. x _____ ft. Area: 3 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 7-26-91 to 7-27-91 . Weather: Precip. 0 Temp. 80°s.

OWNER: Charles A Lemings
Address: 4000 Normal Blvd.

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./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36	7-26	9:30a	7-27	11:30a	7-27	11:30a	6	3:30p	1 ⅛"	30	¼"	~~120~~ min
2	36	"	"	"	"	"	"	6	"	½"	30	⅝	~~25~~
3	36	"	"	"	"	"	"	6	"	¼"	30	⅞	~~35~~
4	36	"	"	"	"	"	"	6	"	½"	30	1"	~~30~~
5	36	"	"	"	"	"	"	6	"	⅛"	30	⅝	~~25~~
6	36	"	"	"	"	"	"	6	"	⅛"	30	⅝	25
7	36	"	"	"	"	"	"	6	"	0"	30	⅜	85 min

Chuck Pearson
Signature of Person Conducting Test

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

Address Wellman Plumbing Phone 434-2400

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: July 31, 1991

Approved Percolation Rate (a)
A. 48 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

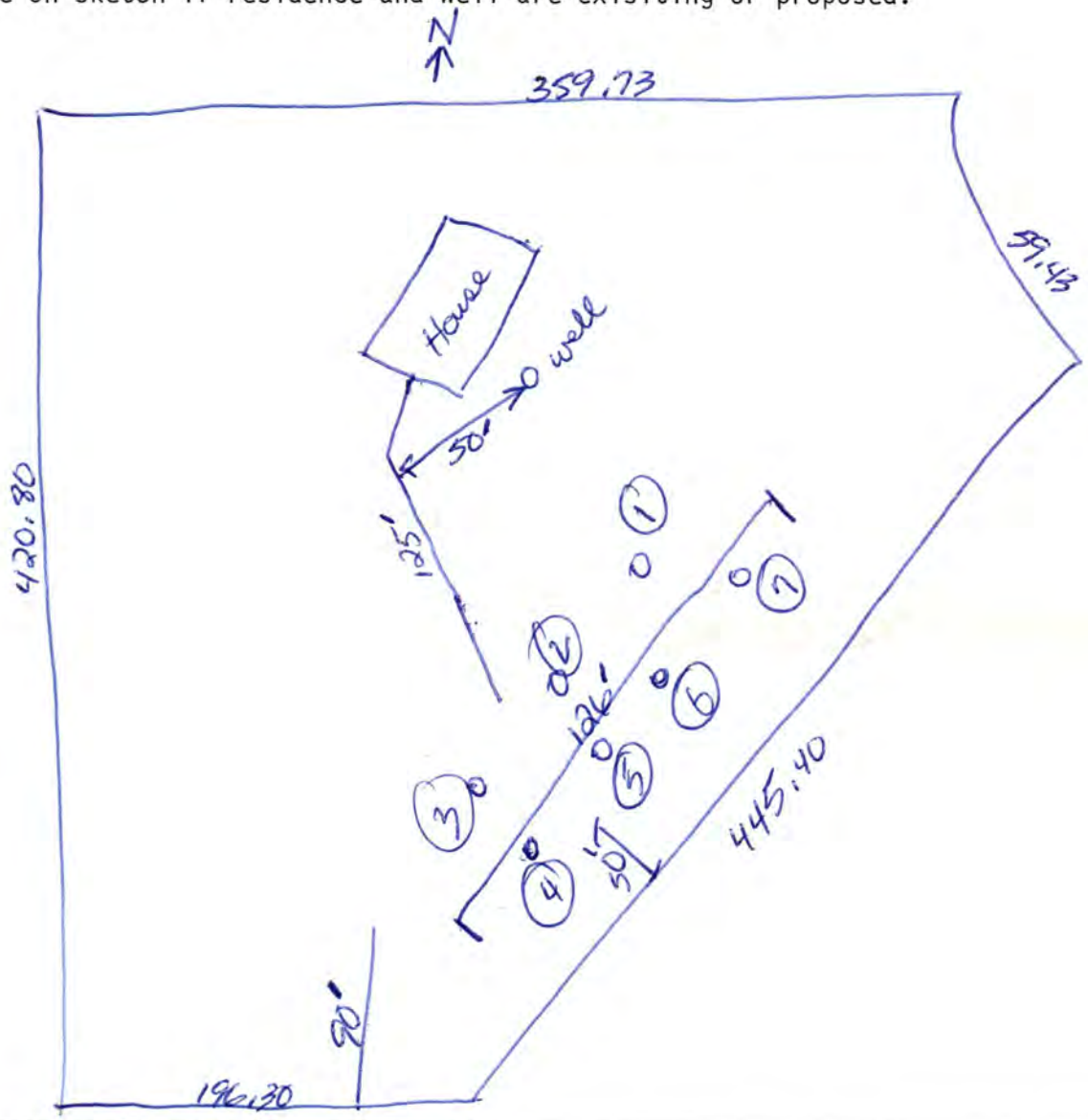
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO._____

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks:_____

Date: July 31, 1991

Minimum Design Requirement
1. Capacity of Septic Tank 1250 gals.
2. Total Length of Laterals_____ ft.
3. With a Trench Width of_____ in.
4. Total Area of Lateral needed 1222 sq.ft.

Jerrold C. Hoop
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
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D

DATE: Sept. 92

FILE NO. _____

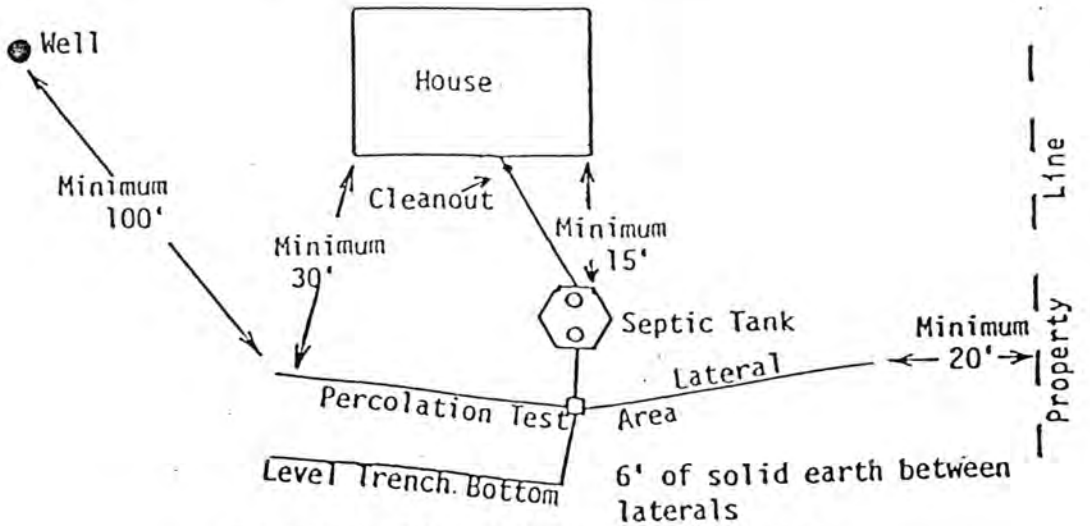
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; 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 2 .
5. Distances to:
Well or Suction Line 100 + ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

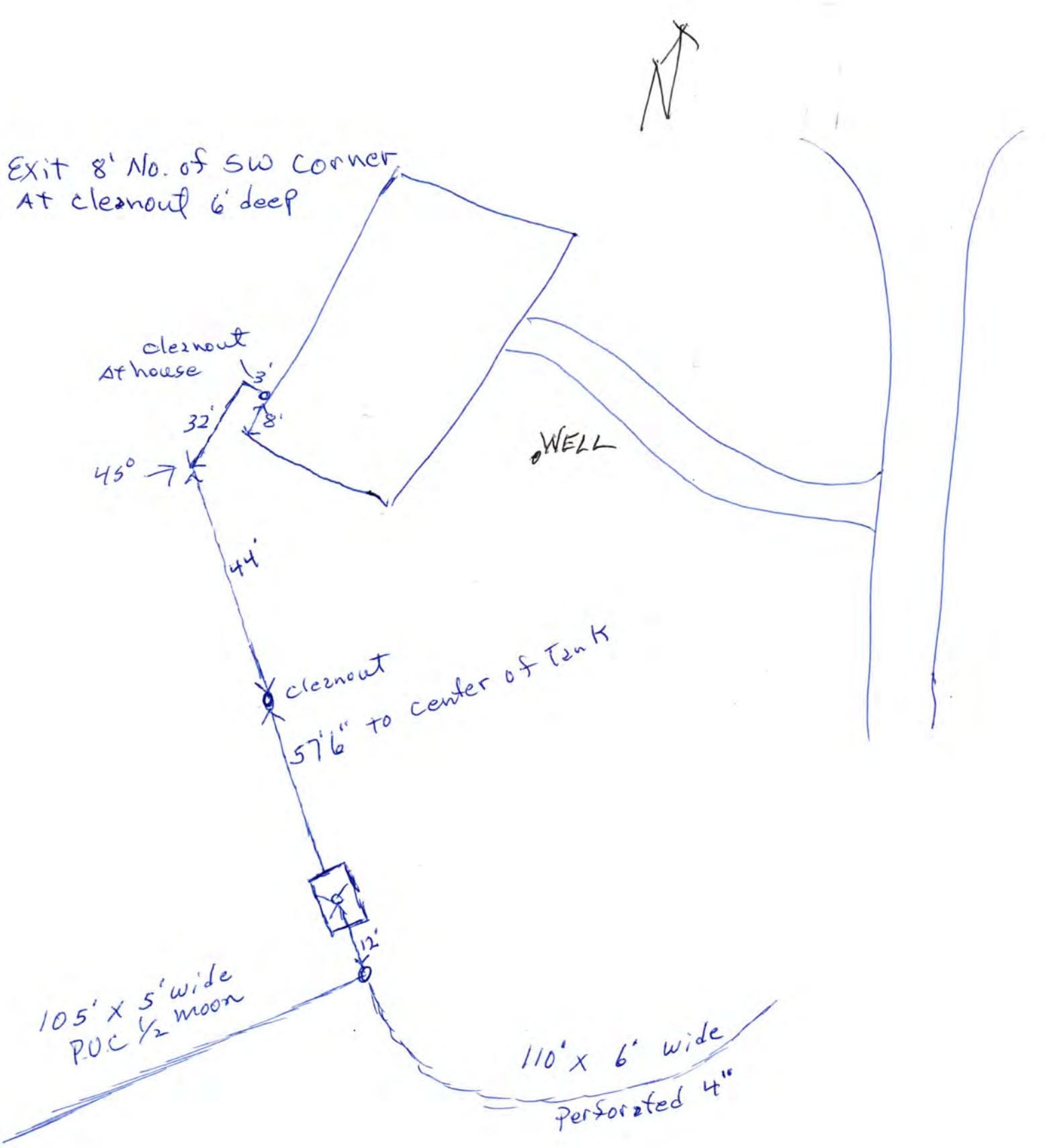
B. SEPTIC TANK:
1. Material concrete ; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Pre cast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☑ Below ☐ Grade 8 in.
5. Inlet: Baffle ☑ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
7. Depth of top of tank below finished grade 10 in.
8. Distances to:
Well or Suction Line 100 + ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material concrete ; Number - available outlets _____.
2. Factory Built: Yes ☑ No ☐
(Company Pre-cast)
3. Distance from Septic Tank 12 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☐
Diameter of Half Round 105' or Perforated Pipe 4" 110' .
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other PVC .
2. Lateral Lines:
Number 2 ; Length of each line 105 , 110 , _____ , _____ , _____ ft.;
Total length of laterals 215 ft.;
Distance between lateral lines / ft.
3. Trench dimensions: Width 5 ft.;
Slope 4 in/100 ft.; Average Depth _____ in.
4. Filter Material: Road gravel .
Depth of Material 18 in.
5. Distances to:
Well or Suction Line 100'+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


Exit 8' No. of SW corner
At cleanout 6' deep
cleanout
At house
3'
32'
8'
45°
WELL
44'
cleanout
57'6" to center of Tank
12'
105' x 5' wide
P.V.C ½ moon
110' x 6' wide
Perforated 4"