FILE #2419

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

MAY 3, 1987 — THIS LICENSE OR PERMIT EXPIRES

MARLYN SCHWARTZ CONST. — LICENSEE OR PERMITTEE

5300 OLD CHENEY ROAD LINCOLN, NE 68516 — ADDRESS

T9N; R7E; Sec S 28; Bk 5; Lot 9; 9151 So. 66 Street, Yankee Ridge Estates — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	018754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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: $60.00

FILE NO. 2419

DATE: 11/03/86

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. 9N ; Range 7E ; Section S 28 ;
   Block 5 : Lot 9 : Addition YANKEE RIDGE ESTATES
   Street Address 9151 So. 64th

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe 1643 SQ FT. HOUSE, FM. ROOM, KITCHEN, LIVING RM., GARAGE, 1½ BATH

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

4. Distance to public sewer: PRIVATE ft.

Signature of Applicant (Owner or Lessee)

5300 OLD CHENEY RD.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 11/3/86. Date Frwd. 11/4/86. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 11/4/86. Date Frwd. 11/4/86. ACTION: Approved ☒ Disapproved ☐ Signature: Gary Sherwood

3. City or County Engineer: Date Rec'd. 11/4/86. Date Frwd. 11/4/86. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 2-10-87 by: [illegible]
Date: 2-11-87 by:
Date: by:

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: Feb-11-87 By: Ken Maynard

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. 2419

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 7E ; Section & ¼ Section S28 NE-45.
Property Dimensions: 275 ft. x 450 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: 10/29 to 10/30 . Weather: Precip. SUN Temp. 55 .

OWNER: Marlyn Schwartz

Address: 9151 S. 66th

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	10/29	10:00	10/30	10:00	10/30	10:30	6	11:00 10/30	4	30 MIN	2	30/2
2	36	"	"	"	"	"	"	6	"	4	"	2	30/2
3	36	"	"	"	"	"	"	6	"	3	"	3	30/3
4	36	"	"	"	"	"	"	6	"	1	"	5	30/5
5	36	"	"	"	"	"	"	6	"	0	"	6	30/6

Marlyn Schwartz
Signature of Person Conducting Test

Sum of Percolation Rates: 18
Average of Rates: 3.6
Mean of Rates: 4

Address 5300 Old Cheney Rd. Phone 423-2511

(Do not write below this line)

REVIEWING ACTION

Remarks: Seems to fast for ↓
Soil Type (SCS): Wymore Silty Clay Loam
Date: NOVEMBER 3, 1986

Approved Percolation Rate (a)
A. 8 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 ☐

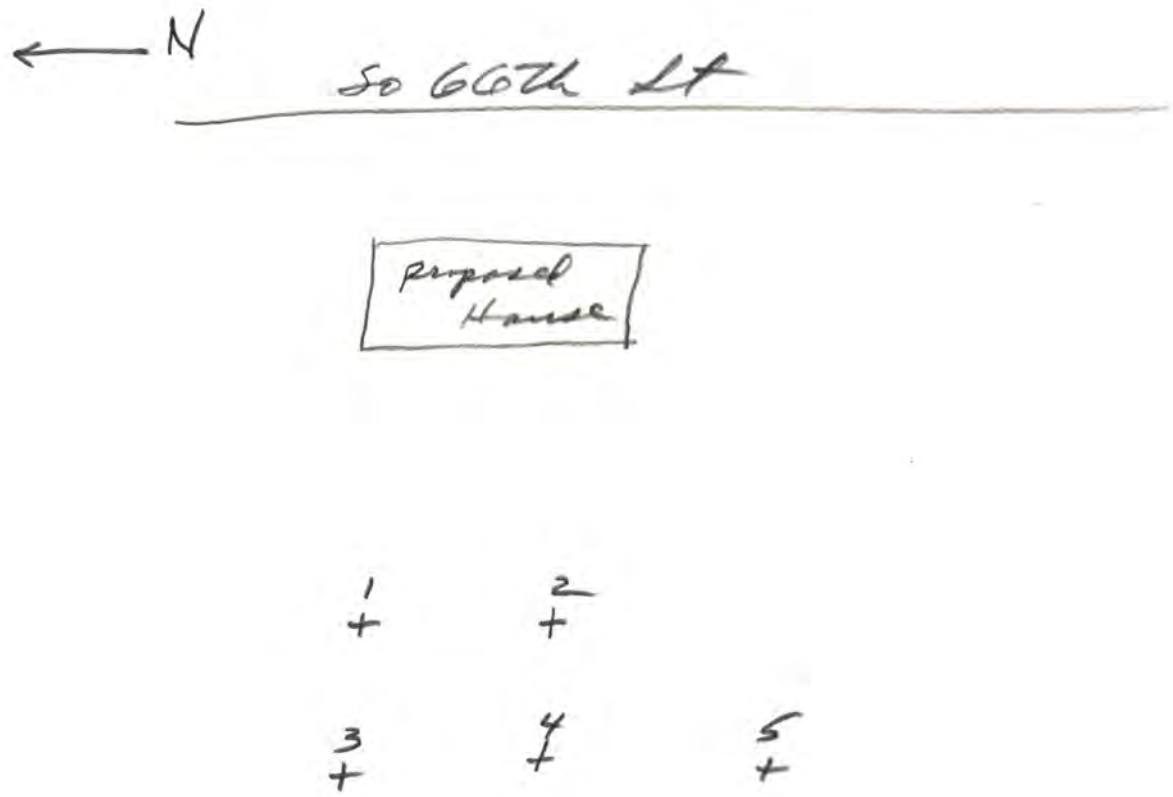
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

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

FILE NO. 2419

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



REVIEWING ACTION

Remarks: _____

Date: ~~October~~ November 3, 1986

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 455 sq.ft.

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
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D

DATE: 2-10-87

FILE NO. 2419

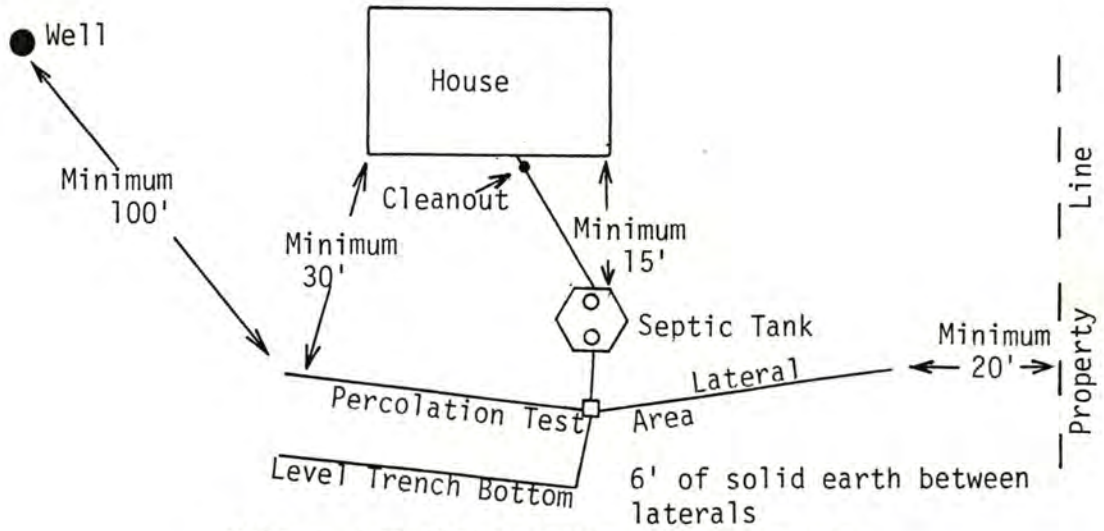
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 36 in.
3. Distance between dwelling and septic tank 56 ft.
4. Number of clean-outs ____.
5. Distances to:
Well or Suction Line none ft.;
Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

B. SEPTIC TANK:
1. Material Conc. ; No. of compartments 1 .
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company PRECAST STEP CO.)
4. Manholes: Over Inlet; diam. 4 in.
Over Outlet; diam. 4 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 16 in.
8. Distances to:
Well or Suction Line none ft.;
Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

C. DISTRIBUTION BOX:
1. Material Concrete ; Number - available outlets 4 .
2. Factory Built: Yes ☒ No ☐
(Company PRECAST STEP CO)
3. Distance from Septic Tank 11' ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 20" or
Perforated Pipe ____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other ____.
2. Lateral Lines:
Number 2 ; Length of each line 100', ____, ____, ____, ____ ft.;
Total length of laterals 200 ft.;
Distance between lateral lines 10' ft.
3. Trench dimensions: Width 4' ft.;
Slope 4" in/100 ft.; Average Depth 28 in.
4. Filter Material: Rock gravel
Depth of Material 24" in.
5. Distances to:
Well or Suction Line none ft.;
Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 2 - 10 - 87 INSTALLER Marlyn Schwartz

