LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

ENVIRONMENTAL HEALTH DIVISION

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 96380140101

Issued 03/04/96
Expires 09/04/96
Revenue Code 18754

Establishment
BRAD SOUTHWICK
T9N R6E SEC 13
8700 S 14 STREET

FEES: $150.00

TOTAL $150.00

Permittee
BRAD SOUTHWICK
17201 S 72 ST
HICKMAN NE 68372

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $ 150.00

FILE NO. _____

DATE: 2-22-96

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 R6E ; Section 13 ;
   Block _____ : Lot 13 I.T. : Addition _____
   Street Address 6700 So. 14

2. Property Use: Residential ☐ ; Commercial ☒ Other Use ☐
   No. of Bedrooms _____. Describe Cemetery
   LINCOLN MEMORIAL CEMETERY

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

4. Distance to public sewer: NA ft.

Brad Southwick
Signature of Applicant (Owner or Lessee)
Southwick Sewer + Drain
17201 S. 72
Address
Hickman, Ne 68372

(Do not write below this double line)

1. Health Department: Date Rec'd. 2/29/96. Date Frwd. 3/1/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 3.1.96. Date Frwd. 3.1.96. ACTION: Approved ☒ Disapproved ☐ Signature: _____

3. City or County Engineer: Date Rec'd. 3-1-96. Date Frwd. 3-1-96. ACTION: Approved ☒ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 2/22/96 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 3/15/96 By: Jerrold C. Hood

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

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
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 10-27 to 10-28. Weather: Precip. _____ Temp. _____.

OWNER: Lincoln Memorial Park
Address: 6700 So 14 68502

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	10/27	10:00	10/28	8:00	10/28	12:00	27½	12:30	28 ¾	30	1 ¼	24
2			AM		AM		Noon	28¾	PM	29 ¼		1	30
3								28¾		29		¾	40
4								30½		31 ¾		1¼	24
5								31		32½		1½	20
6								27¾		28½		¾	40
7								31		33		2	
8	↓							30½		33¾		2¾	

Lincoln Memorial staff did test Brad Saffin recorded the readings
Signature of Person Conducting Test

Address 7201 So 72 Hickman Phone 475-2462

Sum of Percolation Rates: 178
Average of Rates: 29
Mean of Rates: _____

(Do not write below this line) #748 Not when lateral installed!

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: February 29, 1996

Approved Percolation Rate (a)
A. 30 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold 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 Dept.
3140 "N" Street
Lincoln, NE 68510

D

DATE: 2-22-96

FILE NO: _____

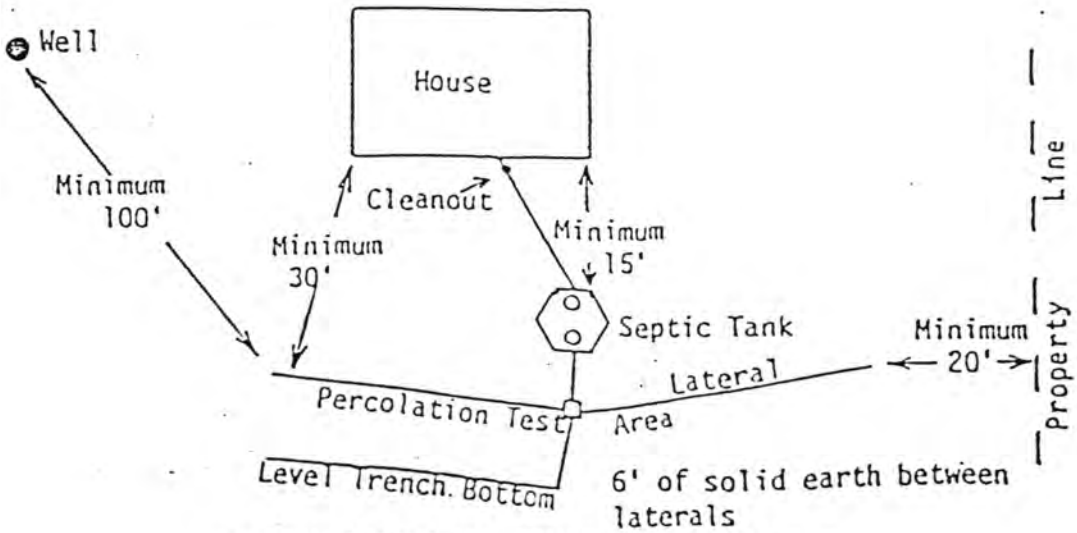
SPECIFICATIONS AS BUILT

A. BUILDING SEWER: PVC
1. Material Sch 40; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 36 in.
3. Distance between dwelling and septic tank 84 ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line NA ft.; Stream NA ft.; Pressure Line > 30 ft.; Property Line > 20 ft.

B. SEPTIC TANK:
1. Material C-Crete; No. of compartments 1.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre Cast Products)
4. Manholes: Over Inlet; diam. 9 in.
Over Outlet; diam. 15 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 6 in.
8. Distances to:
Well or Suction Line NA ft.; Stream NA ft.; Pressure Line > 30 ft.; Property Line > 20 ft.

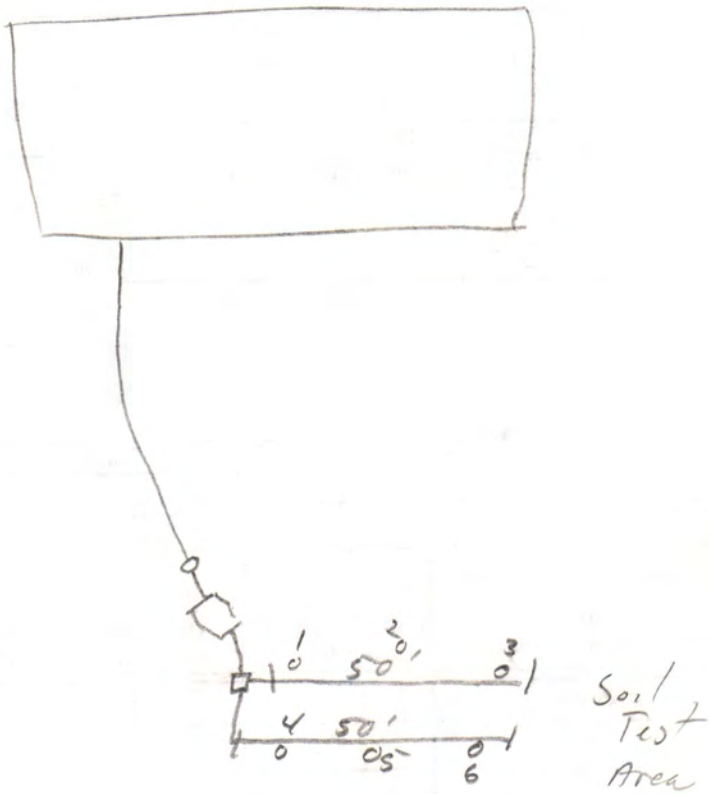
C. DISTRIBUTION BOX:
1. Material PVC; Number - available outlets 5.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank ____ ft.

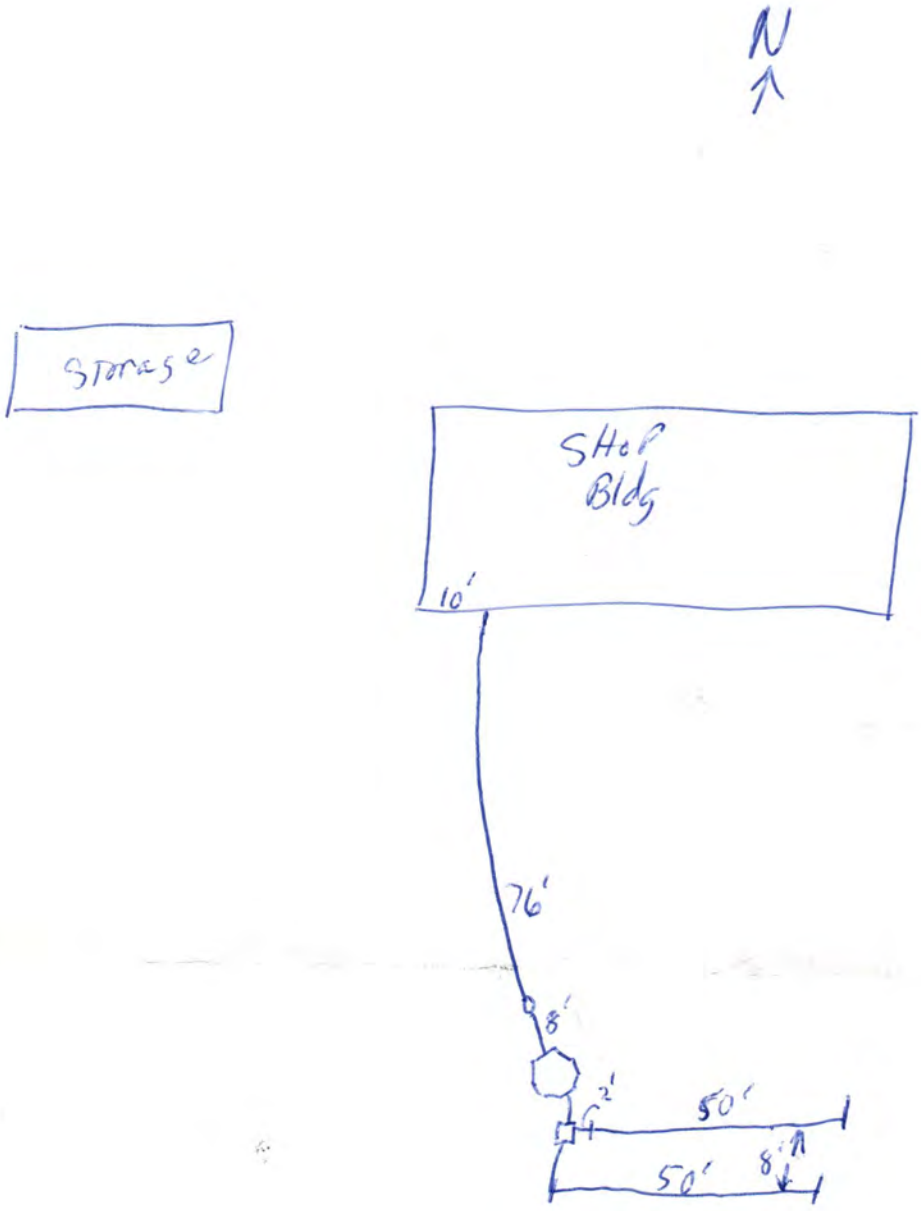
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round ____ or Perforated Pipe 4".
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other ____.
2. Lateral Lines:
Number 2; Length of each line 50, 50, ____, ____, ____ ft.;
Total length of laterals 100 ft.;
Distance between lateral lines 8 ft.
3. Trench dimensions: Width 3-3½ ft.; Slope 3 in/100 ft.; Average Depth 37 in.
4. Filter Material: Road Gravel
Depth of Material 14 in.
5. Distances to:
Well or Suction Line NA ft.; Stream NA ft.; Pressure Line > 30 ft.; Property Line > 20 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

N
E




N
Storage
Shop
Bldg
10'
76'
8'
2'
50'
50'
8'