CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 249

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

September 27, 1972 — THIS LICENSE OR PERMIT EXPIRES

Philip Cooper — LICENSEE OR PERMITTEE

5133 W. Wilkins, Lincoln, Nebraska — ADDRESS

T9N;R7E; Sec 33; Lot 2, Blk 2, Nealrene Acres — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

LEGAL DESCRIPTION

REMARKS: Non-Transferable

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624110.15 1535	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT

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-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. 249

DATE: _____

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 33; Block 2; Lot 2; Addition NEAL RENE ACRES
Street Address _____.

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. of Bed Rooms 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-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.)

By Roger Bailey — Philip Cooper
Signature of Applicant (owner or lessee)

5133 W Wilkins
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance _____

3. Site Visits:
Date: 7/21/72 by: O.D.D.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 3/27/72
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 7/31/72 by: Jerrold C. Hood

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. 249

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. T9N; Range R7E; Section Sec 33;
Block 2; Lot 2; Addition _____;
Street Address Nealtene Acers.

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.

By Roy Bailey Philip Cooper
Signature of Applicant (owner or lessee)

5133 W Wilkins
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 3/23/72. Date Frwd. 3/27/72.
ACTION: Approved ☒ Disapproved ☐
Signature: Jerrold C. Hood R.S.

2. Supt. Bldg. Insp.: Date Rec'd. 3/27/72. Date Frwd. 3/27/72.
ACTION: Approved ☐ Disapproved ☒
Signature: Chas Seale B.I.

3. City Engineer: Date Rec'd. _____. Date Frwd. 3-27-72.
ACTION: Approved ☐ Disapproved ☑
Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

FINAL ACTION ON SITE CLEARANCE: Approved ☐ Disapproved ☐

Date Applicant Notified: _____ Signature _____

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. 249

PROPERTY WHERE SOIL TESTED:
Location: Township T9N R7E
Section & ¼ Sect. 33
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: Phill Cooper
Address _____

Soil Type: Silty Clay [X]; Silty Clay Loam [ ]; Sandy Loam [ ]
Silty Loam [ ]; Clay Loam [ ]; Sandy Clay [ ]

Dates of Tests: _____ to _____. Weather: Precip. _____ Temp. ___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)
1	36	3/24	11:00	3/25	11:00	3/25	11:00	30	3/11:00	27	1 Hours	3	
2	〃									28		2	
3	〃									29		1	
4										26½		3½	
5										28½		1½	
6										28½		1½	

Roger Bailey
Signature of Person Conducting Test

Address 4131 C L F Ford D
Phone: 489 8208

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

groundwater wet
1" every 30 min

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 29 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: March 27, 1972

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. 249

SPECIFICATIONS

DATE: _____

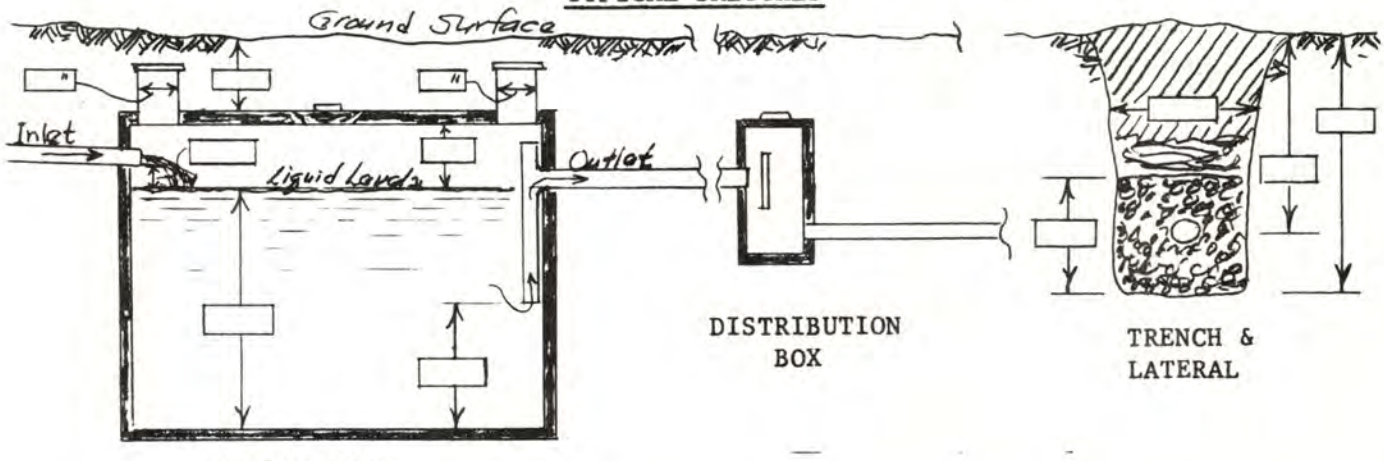
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material CON; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 50 in.
3. Factory Built: Yes ☒ (Company PRE-CAST STEP) No ☐
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☒
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade 24 in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material CON; No. available outlets 6.
2. Factory Built: Yes ☒ (Company PRE-CAST STEP) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☒ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: HALF Round
2. Lateral Lines: Depth below grade 8 in. Number 2; Length of each line ___ft Total length of Laterals 184 ft.; Slope 6 in/100 ft. Diameter of pipe 16 in.; Shape _____
Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth 48 in.; Width 48 in.
4. Filter Material: Gravel. Depth of material from trench bottom 8 in.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES

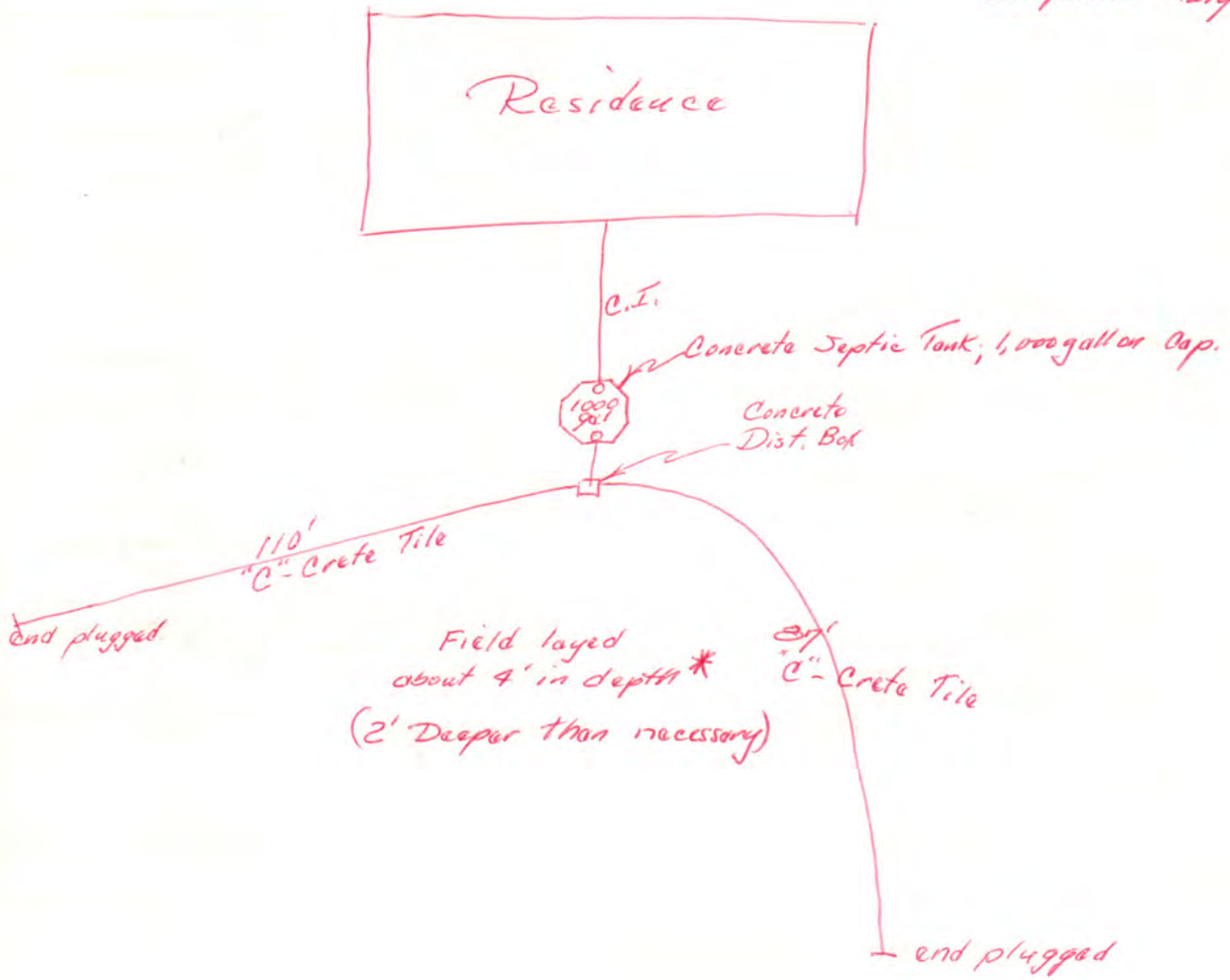


SEPTIC TANK

_____
Signature of Applicant

North

Installed By Don Tanner (Field) and builder Al Anderson.
Inspected July 21st, 1972



* Even though this system was approved it is believed that with better coordination of effort among those involved this same system could have been installed 2' closer to ground surface which not only would have been less costly but would also have permitted better use of soil as a leaching area.