LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 612-C

INDIVIDUAL SEWAGE DISPOSAL SYSTEM — November 7, 1975

TYPE OF PERMIT — THIS PERMIT EXPIRES

Jerry L. Barger — Greenwood, Nebraska

ISSUED TO — ADDRESS

T12N; R8E; Sec. 22-NE¼

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 3832

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 612-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: MAY-7-75

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

1. Legal description of property: Twp. 12N ; Range 8E ; Section NE¼ 22
   Block _____; Lot _____; Addition _____
   Street Address _____

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.

Jerry L. Barger
Signature of Applicant (Owner or Lessee)
by Mrs. Gerald Barger
Greenwood, Nebraska
Address 68366

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 4/29/75 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 5-7-75 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

3. City or County Engineer: Date Rec'd. 5-7-75 . Date Frwd. 5-7-75 . ACTION: Approved ☒ Disapproved ☐ Signature: Allen R. Hillegass

REMARKS OR REASONS FOR DISAPPROVAL _____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT 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: 475-6221)

FILE NO. 612-C

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 appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 12N ; Range 8E ; Section NE¼ 22 ; Block _____; Lot _____; Addition _____.
Street Address _____.

2. Property Use: Residential _____ ☐; Commercial _____ ☐
No. of Bedrooms 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-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Jerry L. Barger
Signature of Applicant (owner or lessee)
by Donald Barger

Address
68366

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: May-16-75 by: RM
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐
by: Jerrold C. Hood (Ron Magnuson)

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: May-16-75 by: Ronald Magnuson

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM

(Annex to Application)
City Ordinance No. 9150 [X]
County Resolution No. 2832 [X]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 612-C

SPECIFICATIONS

DATE: _____

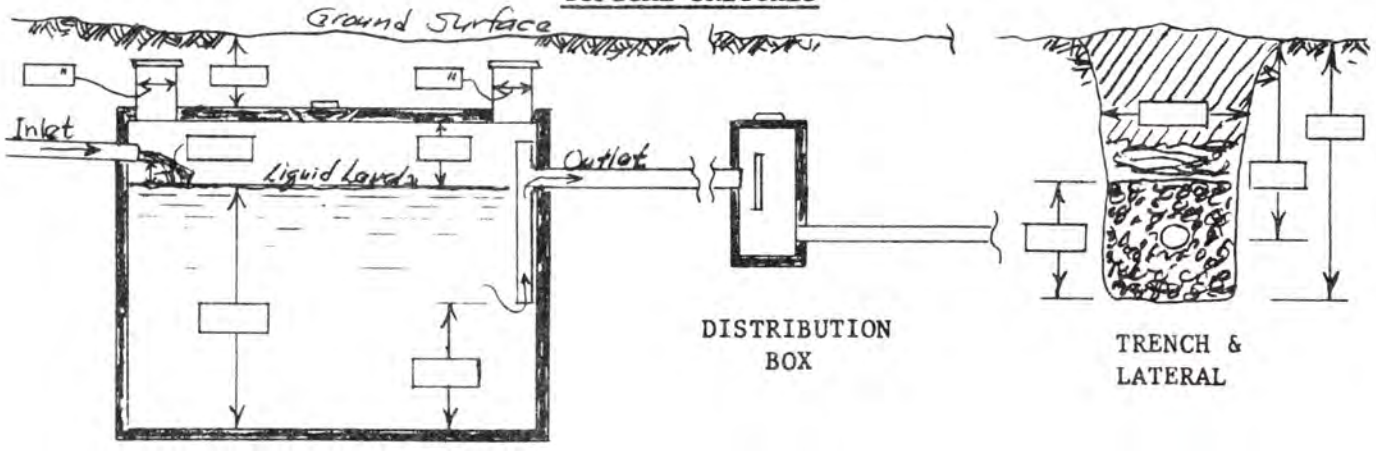
A. BUILDING SEWER:
1. Material PVC; Diameter 4 in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank 43½ ft.
4. Number of clean-outs none.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 51 in.
3. Factory Built: Yes [X] (Company Precast Step Co No [ ]
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade _____in.
5. Inlet: Baffle [ ]; or Tee [ ]
6. Outlet: Baffle [X]; or Tee [ ]
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes [X], (Company Precast Step Co No [ ]
3. Dimension: Length 20 in.; Width 13 in. Depth 14 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 moon
2. Lateral Lines: Depth below grade 2'-5" in. Number 3; Length of each line 100 97 33 ft Total length of Laterals 223 ft.; Slope ____in/100 ft. Diameter of pipe 24 in.; Shape Half moon Material: concrete [X]; fiber asbestos [ ]; clay [ ]; other _____ Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: road gravel. Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Signature of Applicant

FORM HD- 43(73) 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 475-6221)

FILE NO. 612-C

PROPERTY WHERE SOIL TESTED:
Location: Township _____; Range _____
Section & ¼ Sect. _____
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: _____
Address _____

Dates of Tests: 4-17 75 to 4-18-75. Weather: Precip. rain 3/4" Temp. 30° 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"	4/17	7 PM	4/18	5 PM	4/18	5 PM	12"	9 PM	9	30	3/4	
2										10		1/2	
3										8 3/4		1/4	
4										10		1/2	
5										10		1/2	
6										8			

Robert D Johnson
Signature of Person Conducting Test

Address 7618 no 3rd
Phone: 432 3595

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

(Do not write below this line)

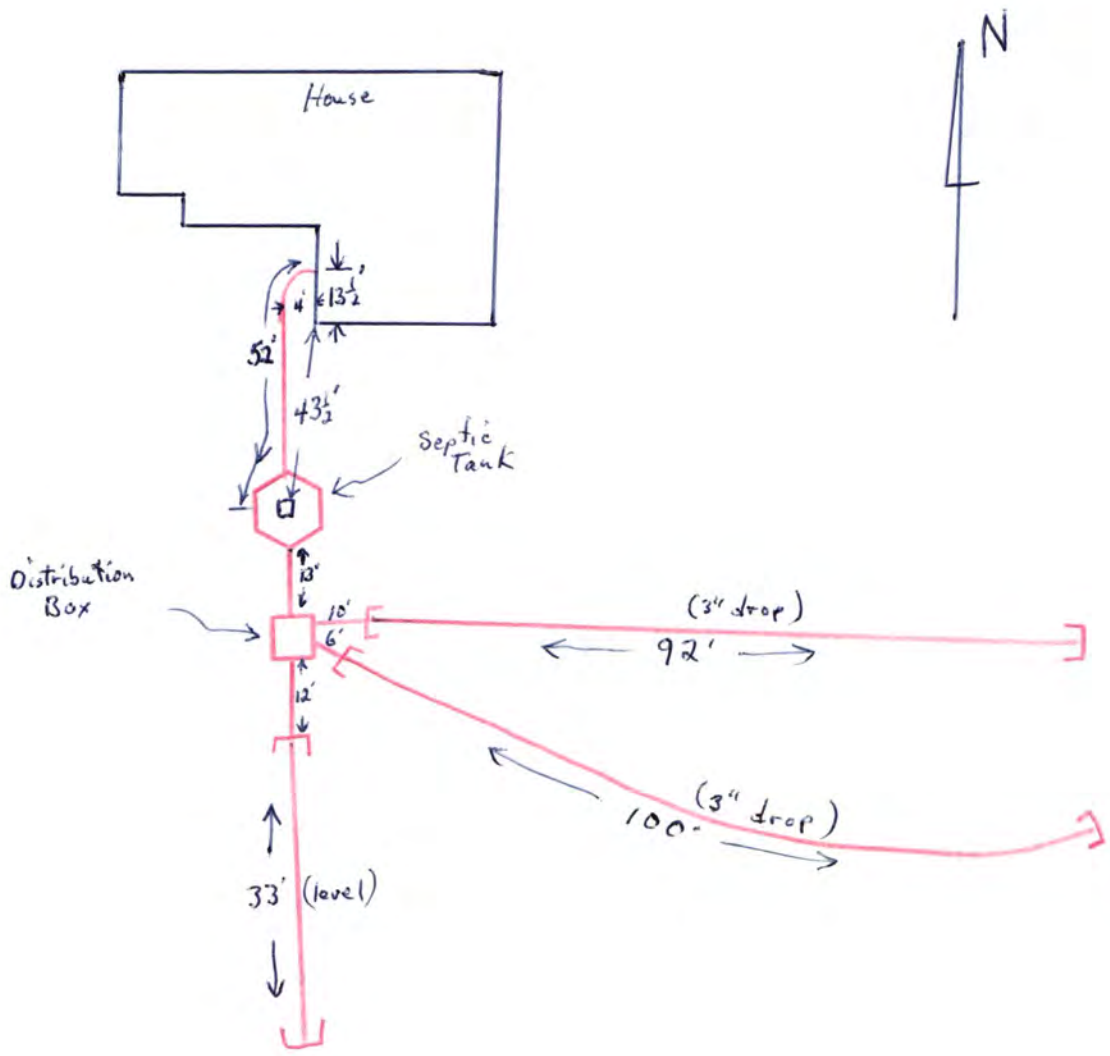
REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 44 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: April 29, 1975

Jerrold C. Hood
Signature of Reviewing Official


N
House
4'
13½'
52'
43½'
Septic Tank
13'
Distribution Box
10'
6'
12'
(3" drop)
92'
(3" drop)
100'
33' (level)