LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2280-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

MAY 25, 1986 — THIS PERMIT EXPIRES

DALE LILYHORN — ISSUED TO

ROUTE #1, BOX 200-C RAYMOND, NE 68428 — ADDRESS

T12N; R6E; Sec SE¼ of 29; Lot 7 I.T.; Rt #1, Box 200-C, Raymond — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
MFC	11-26-85	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

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. 2280-C

DATE: 11/25/85

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. 12N ; Range ~~6 East of the 6th P.M.~~ ; Section SE¼ of 29;
   Block _____ : Lot T.I.T. : Addition _____
   Street Address Rt. 1 Box 200c Raymond Ne 68428

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

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

4. Distance to public sewer: _____ ft.

Lot Seven, located in the East Half (E ½) of the West Half (W ½) of the Southeast Quarter (SE¼) of Section 29, Township 12 North Range 6 East of the 6th P.M. Lancaster County, Ne

Signature of Applicant (Owner or Lessee)

Rt. 1 Box 200c
Address
Raymond Ne 68428

(Do not write below this double line)

1. Health Department: Date Rec'd. 11/25/85 . Date Frwd. 11/26/85 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 11-26-85 . Date Frwd. 11-26-85 . ACTION: Approved ☒ Disapproved ☐ Signature: Paul Baum

3. City or County Engineer: Date Rec'd. 11-26-85 . Date Frwd. 11-26-85 . ACTION: Approved ☒ Disapproved ☐ Signature: David C. Cotton

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 1/16/86 by: DS
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 1/16/86 By: DS

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. 2280-C

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: 11-23-85 to 11-24-85. Weather: Precip. 0 Temp. 10°.

Holes 1-2-4-5-6 still had water in From pre-test

OWNER: Dale Lilyhorn

Address:_____

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"	11-23	8:30 AM	11-24	7:30 AM	11-24	7:30 AM	6"	8:30 AM	5 7/8"	30m	1/8"	
2	36"	11-23	8:30 AM	11-24	7:30 AM	11-24	7:30 AM	6"	8:30 AM	5 7/8"	30m	1/8"	
3	36"	11-23	8:30 AM	11-24	7:30 AM	11-24	7:30 AM	6"	8:30 AM	5 1/2"	30m	1/2"	
4	36"	11-23	8:30 AM	11-24	7:30 AM	11-24	7:30 AM	6"	8:30 AM	5 7/8"	30m	1/8"	
5	36"	11-23	8:30 AM	11-24	7:30 AM	11-24	7:30 AM	6"	8:30 AM	6"	30m	0"	
6	36"	11-23	8:30 AM	11-24	7:30 AM	11-24	7:30 AM	6"	8:30 AM	5 7/8"	30m	1/8"	

William Hoagland
Signature of Person Conducting Test

Address 2701 N 27th Phone 464-0638

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

(Do not write below this line)

REVIEWING ACTION

Remarks: TOO SLOW FOR CONVENTIONAL SYSTEM
Soil Type (SCS):_____
Date: NOVEMBER 25, 1985

Approved Percolation Rate (a)
A._____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 DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

D

DATE: _____

FILE NO. _____

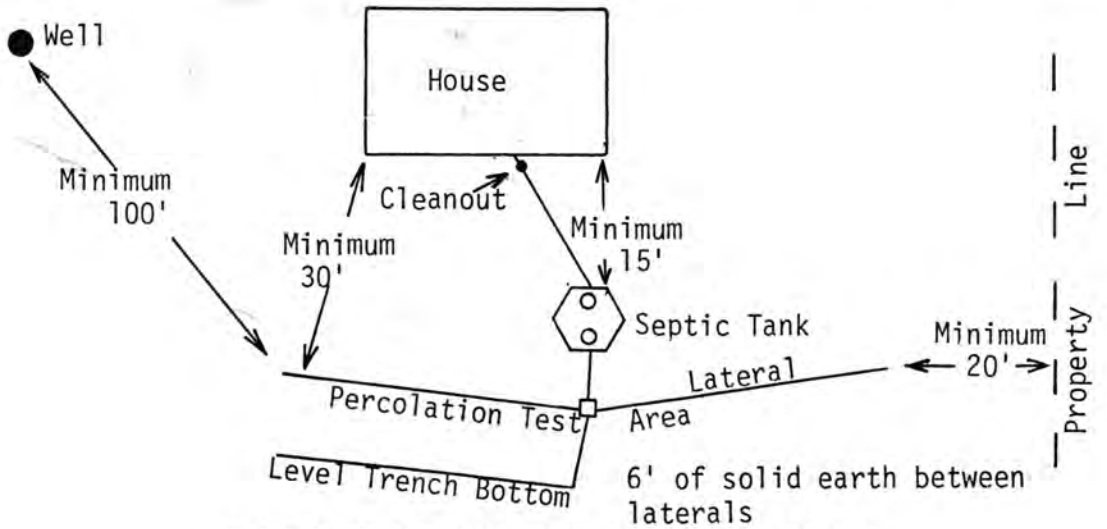
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 33' 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:
1. Material CON ; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Precast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☑ Grade 12 in.
5. Inlet: Baffle ☑ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
7. Depth of top of tank below finished grade 12 in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Concrete ; Number - available outlets 5 .
2. Factory Built: Yes ☑ No ☐
(Company Precast)
3. Distance from Septic Tank 2 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 6" .
Material: fiberglass ☐ ; plastic ☑ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line _____, _____, _____, _____, _____ ft.; Total length of laterals _____ ft.; Distance between lateral lines _____ ft.
3. Trench dimensions: Width _____ ft.; Slope _____ in/100 ft.; Average Depth _____ in.
4. Filter Material: _____
Depth of Material _____ in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 1-15-86 INSTALLER Capital City Trenching

