LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 94380113201

Issued 03/17/94
Expires 09/17/94
Revenue Code 18754

Establishment
RICHARD OHARE
T12N R6E SEC 22
LOT 13

FEES: $150.00

TOTAL $150.00

Permittee
RICHARD OHARE
7035 PLATTE AV
LINCOLN NE 68507

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
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

A

FILING FEE: $ ~~$150.00~~

FILE NO. _____

DATE: 3/14/94

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 6E; Section 22;
   Block _____: Lot 13 I.T.: Addition _____
   Street Address 300 W. ROCK CREEK RD.

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

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

4. Distance to public sewer: _____ ft. WILL INSTALL WHATEVER SOIL PERCOLATION TEST INDICATES

Perk test to be done yet

Richard Ohare (466-2649)
Signature of Applicant (Owner or Lessee)

7035 Platte Ave.
Address
Linden, NE 68507

(Do not write below this double line)

1. Health Department: Date Rec'd. 3/16/94. Date Frwd. 3/16/94. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 3/17/94. Date Frwd. 3/17/94. ACTION: Approved ☒ Disapproved ☐ Signature: Gary Spa

3. City or County Engineer: Date Rec'd. 03/17/94. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Roger K. Hammond

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10-94 by: rm need drawing look like to buy corner lot
Date: 1-25-96 by: rm
Date: _____ by: _____

PROVISIONAL
INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 1-29-96 By: Ron Magnuson

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

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED: Lot 13

Location: Township 12 ; Range 6 ; Section & ¼ Section 22.
Property Dimensions: _____ ft. x _____ ft. Area: 20± acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 9/9/94 to 9/10/94. Weather: Precip. _____ Temp. _____.

OWNER: Richard Ohare

Address: NW 2nd & Rock Creek Rd.

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	30"	9/9/94	10:00	9/10/94	10:00	9/10/94	12:00	6	12:30	4½	30	1½	20
2	"	9/9/94	10:00	9/10/94	10:00	9/10/94	12:00	6	12:30	4¾	30	1¼	24
3	"	9/9/94	10:00	9/10/94	10:00	9/10/94	12:30	6	12:40	4	30	2	15
4	"	9/9/94	10:00	9/10/94	10:00	9/10/94	12:45	6	12:50	4¼	30	1¾	17
5	"	9/9/94	10:00	9/10/94	10:00	9/10/94	1:05	6	1:05	4½	30	1½	20
6	"	9/9/94	10:00	9/10/94	10:00	9/10/94	1:10	6	1:10	4⅞	30	1⅛	27
												6	123/20

John Stuhmyer
Signature of Person Conducting Test

Address 9811 NW 40th Phone 430-6023

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

Approved Percolation Rate (a)
A. 20 min./inch
B. _____ min./inch
C. _____ min./inch

105 ft at each end

_____
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. _____

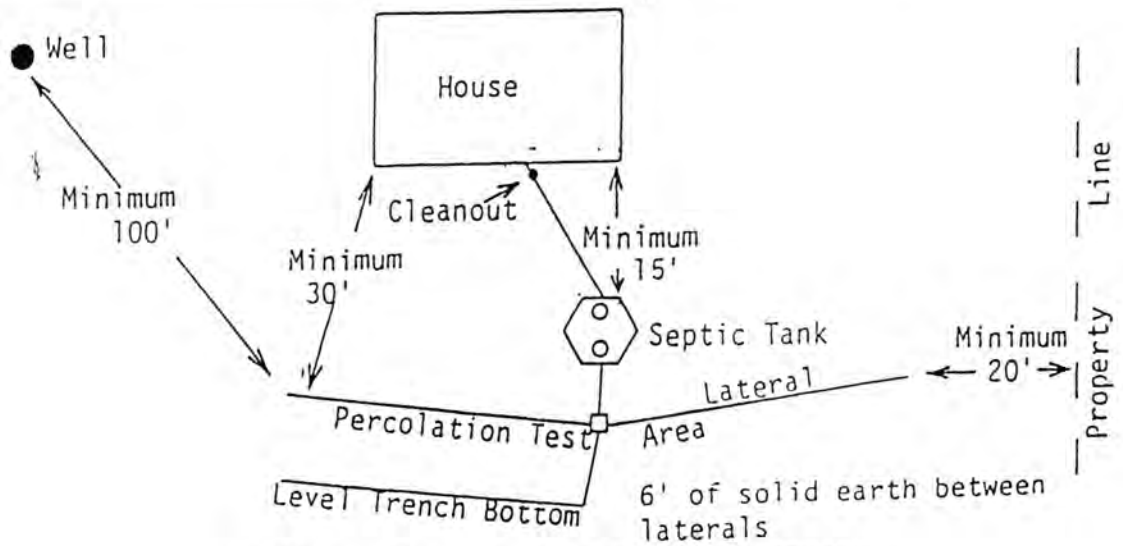
SPECIFICATIONS AS BUILT Rich OHare

A. BUILDING SEWER:
1. Material CPVC ; Diameter 4" in.
2. Distance above basement floor ____ in., or below basement floor 60 in.
3. Distance between dwelling and septic tank 83 ft.
4. Number of clean-outs 2 .
5. Distances to:
Well or Suction Line 100' + ft.; Stream — ft.; Pressure Line — ft.; Property Line — ft.

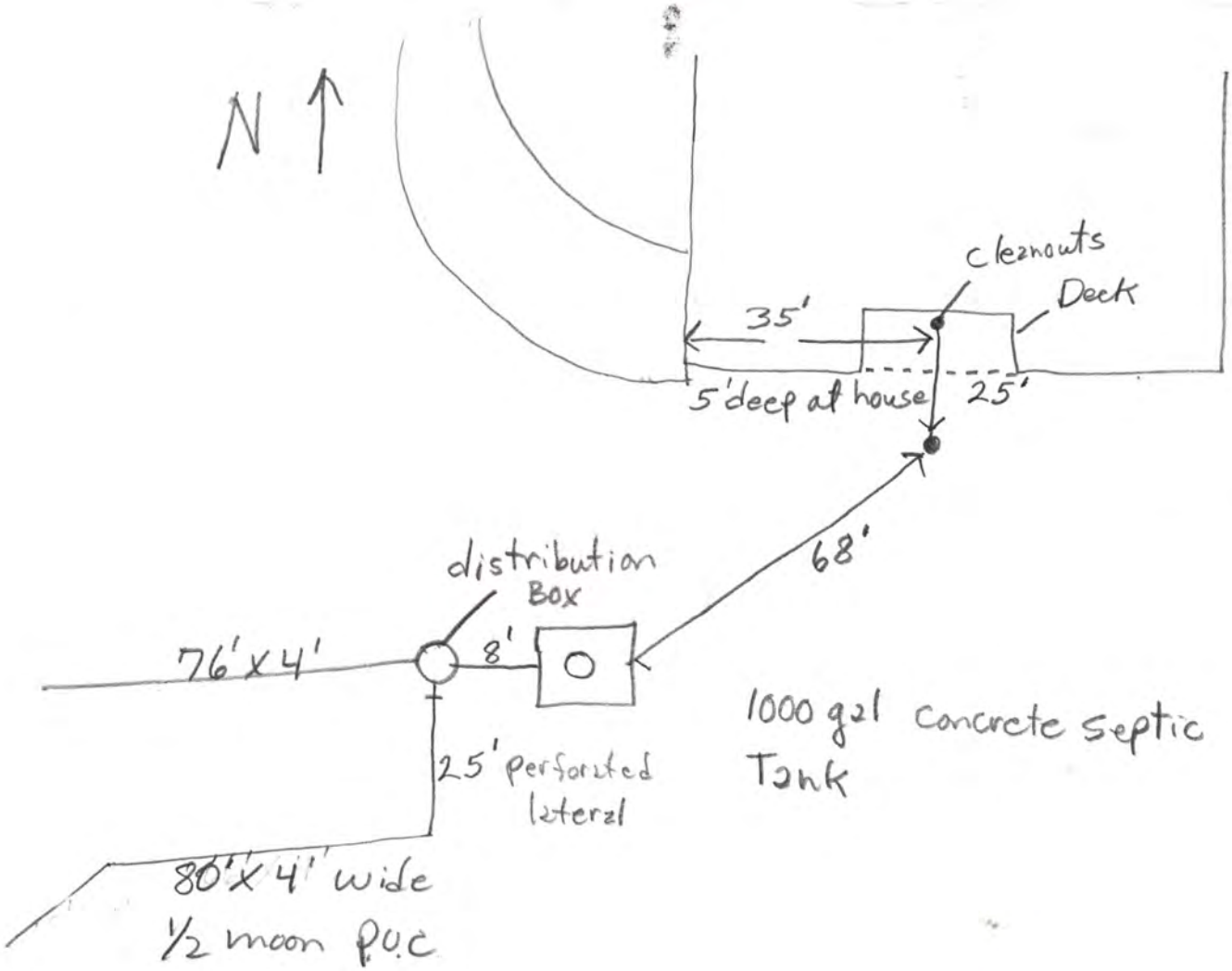
B. SEPTIC TANK:
1. Material concrete ; No. of compartments ____.
2. Capacity ____ gals.;
3. Factory Built: Yes ☑ No ☐
(Company Pre-cast)
4. Manholes: Over Inlet; diam. ____ in.
Over Outlet; diam. ____ in.
Riser Above ☑ Below ☐ Grade ____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 6 in.
8. Distances to:
Well or Suction Line 100'+ ft.; Stream — ft.; Pressure Line — ft.; Property Line — ft.

C. DISTRIBUTION BOX:
1. Material Concrete ; Number available outlets ____.
2. Factory Built: Yes ☑ No ☐
(Company Pre-cast)
3. Distance from Septic Tank 8 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☑
Diameter of Half Round 18" or Perforated Pipe 4" .
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other Poly u .
2. Lateral Lines:
Number 2 ; Length of each line 76 , 85 , 25 , ____ , ____ ft.;
Total length of laterals 161 ft.;
Distance between lateral lines 15 ft.
3. Trench dimensions: Width 4 ft.;
Slope 1-3 in/100 ft.; Average Depth 32 in.
4. Filter Material: Road Gravel
Depth of Material 18 in.
5. Distances to:
Well or Suction Line 100'+ ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


N
cleanouts
Deck
35'
5' deep at house
25'
68'
distribution Box
8'
76' x 4'
1000 gal concrete septic Tank
25' perforated lateral
80' x 4' wide
½ moon P.V.C

Cute