LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2147-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

APRIL 29, 1985 — THIS PERMIT EXPIRES

WILLIAM P. NORDSTROM — ISSUED TO

RT #1 WAVERLY, NE 68462 — ADDRESS

T12N; R7E; Sec E½, SE¼ 2 — LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE 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
JM	10-30-84	60.00

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. 2147-C

DATE: 10-21-84

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 7E ; Section 2 ; E½SE¼
   Block _____ : Lot _____ : Addition _____
   Street Address _____
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.

William B. Nordstrom
Signature of Applicant (Owner or Lessee)

Rt. 1 Waverly
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/29/84. Date Frwd. 10/29/84. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Reed
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 10/30/84. Date Frwd. 10/30/84. ACTION: Approved ☒ Disapproved ☐ Signature: Roy F. Thenwood
3. City or County Engineer: Date Rec'd. 10/30/84. Date Frwd. 10/30/84. ACTION: Approved ☐ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11-14-84 by: mm (inadequate sewer pipe)
Date: 11-16-84 by: mm (correction made)
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-16-84 By: Ron Mayard

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

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

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B

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PROPERTY WHERE SOIL TESTED:

Location: Township 12 ; Range 7 ; Section & ¼ Section 2 E1/2 SE1/4
Property Dimensions: 150 ft. x 206 ft. Area: 1 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 10-24-84 to 10-25-84 . Weather: Precip. .10 Temp. 48° F.

OWNER: Bill Nordstrom

Address: Box 164A Waverly Ne. 68462

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./ Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36	10-24	11:00 AM	10-24	3:00	10-25	11:00	6"	3:00		30	3/4	
2	36	"	"	"	"	"	"	6"	"		30	1/2	
3	36	"	"	"	"	"	"	6"	"		30	3/4	
4	36	"	"	"	"	"	"	6"	"		30	7/8	
5	36	"	"	"	"	"	"	6"	"		30	1 1/8	
6	36	"	"	"	"	"	"	6"	"		30	7/8	

W. Nordstrom
Signature of Person Conducting Test

Address Box 164A Waverly Ne. 68462 Phone not looked up

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): Sharpsburg Silty Clay Loam

Date: October 29, 1984

Approved Percolation Rate (a)
A. 37 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hoe
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

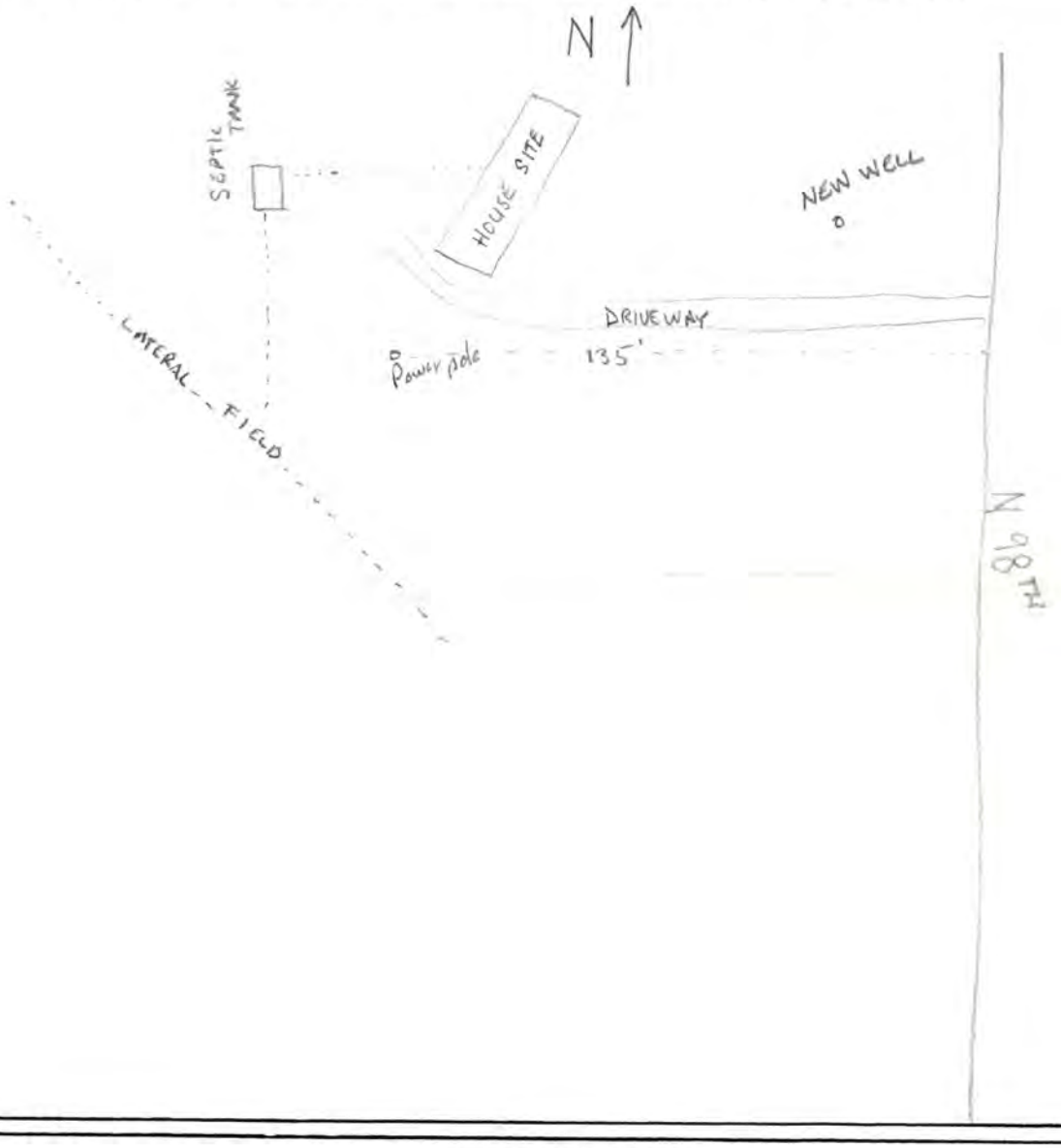
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

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Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: October 30, 1984

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 139 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 555 sq.ft.

Jerrold C. Hoos
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: Nov. 14, 1984

FILE NO. _____

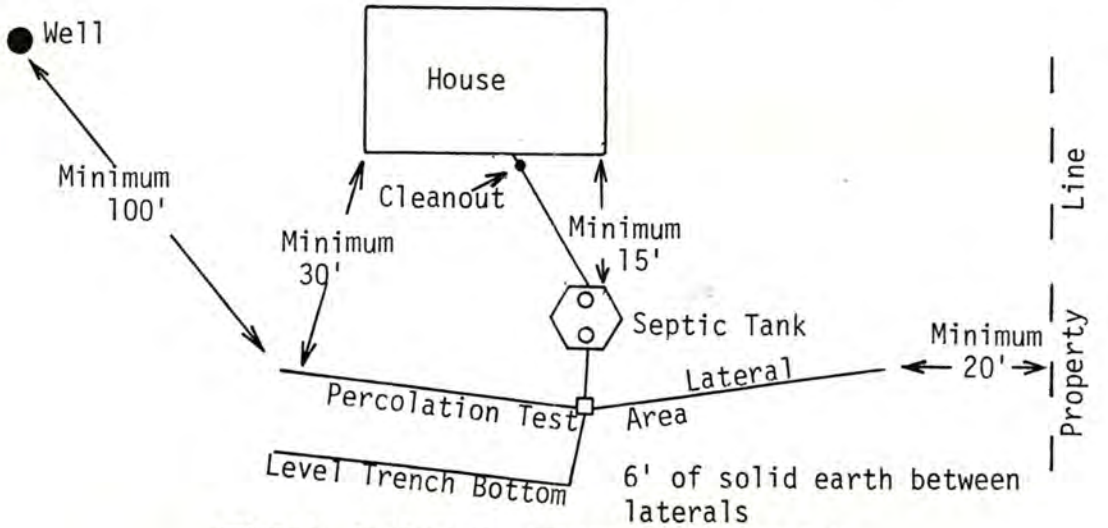
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Sch 40 ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 65 ft.
4. Number of clean-outs 1 .
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 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company PRE-CAST)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☒ Grade 4 in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 24 in.
8. Distances to:
Well or Suction Line 100 + 135' ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line [redacted] ft.

C. DISTRIBUTION BOX:
1. Material CONCRETE ; Number - available outlets 4 .
2. Factory Built: Yes ☒ No ☐
(Company PRECAST)
3. Distance from Septic Tank 45 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 110 , 110 , _____ , _____ , _____ ft.;
Total length of laterals 220 ft.;
Distance between lateral lines 7 ft.
3. Trench dimensions: Width 3 ft.;
~~Slope~~ LEVEL in/100 ft.; Average Depth 24 in.
4. Filter Material: ROAD GRAVEL
Depth of Material 14 in.
5. Distances to:
Well or Suction Line 105 ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line 50 ft.

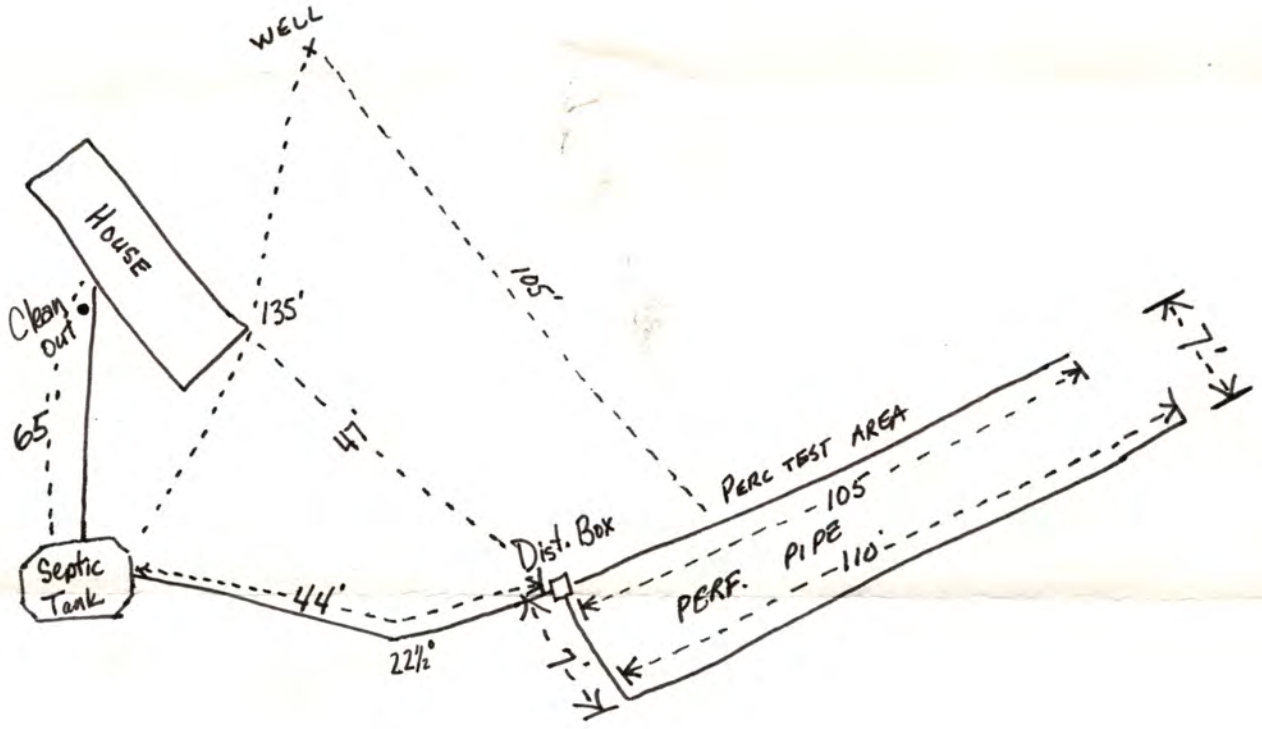


TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE Nov 14, 1984 INSTALLER Bill Nordstrom

OWNER



N