LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1467-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

May 20, 1979 — THIS PERMIT EXPIRES

William P. Guenther — ISSUED TO

Route 2, Ceresco, NE 68017 — ADDRESS

T12N, R6E, Section 2 NW¼NW¼ — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

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

RECEIPTED BY — DATE — AMOUNT

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: 474-1541

FILING FEE: $ 30.00

FILE NO. 1467-C

DATE: Nov. 17, 1978

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. 12 ; Range 6E ; Section SEE ATTACHED 2 NW¼NW¼
   Block _____ : Lot _____ : Addition _____
   Street Address 1st. Ashland Road SE Corner

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

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

4. Distance to public sewer: _____ ft.

Wm. P. Guenther
Signature of Applicant (Owner or Lessee)

RFD 2 Ceresco Nebr.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 11-17-78. Date Frwd. 11-17-78. ACTION: Approved ☒ Disapproved ☐ Signature: Ronald Morgan

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. 11-20-78. ACTION: Approved ☐ Disapproved ☐ Signature: ERR

3. City or County Engineer: Date Rec'd. 11-20-78. Date Frwd. 11-20-78. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11-28-78 by: jw
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-28-78 By: James Wesselby

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: 474-1541

B

FILE NO. 1467-C

PROPERTY WHERE SOIL TESTED:

Location: Township 12 ; Range 6E ; Section & ¼ Section 2 - N.W.4 - N.W.4.
Property Dimensions: N.626.1 ft. x W.417.4 ft. Area: 6 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 11/14/78 to _____. Weather: Precip. None Temp. 32°.

OWNER: _____

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"	11/14	10:00 AM	11/14	2:01 PM	11/16	1:50	6 1/8	2:20	4 7/8	30	1.25	24
2	36"	11/14	10:02 AM	11/14	2:03 PM	11/16	1:52	6	2:22	4 1/2	30	1.5	20
3	36"	11/14	10:05 AM	11/14	2:05 PM	11/16	1:54	6	2:24	4 5/8	30	1.375	22
4	36"	11/14	10:08 AM	11/14	2:09 PM	11/16	1:56	6 1/4	2:26	5	30	1.25	24
5	36"	11/14	10:10 AM	11/14	2:11 PM	11/16	1:57	6	2:28	4 1/2	31	1.5	21
6	36"	11/14	10:15 AM	11/14	2:13 PM	11/16	1:59	6	2:30	4 1/2	31	1.5	21
												8.375	
												1.4	

Sum of Percolation Rates: 132
Average of Rates: 22
Mean of Rates: _____

Signature of Person Conducting Test

Address RFD 2 Ceresco Nebr. Phone 665-2169

2' = 321 feet (Do not write below this line)

3' = 214 feet
4' = 160 feet

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): Mr D Morrill Clay loam

Date: _____

160/44 4' - 116

214/44 3' 170

Approved Percolation Rate (a)
A. 21 min./inch
B. _____ min./inch
C. _____ min./inch

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 ☐

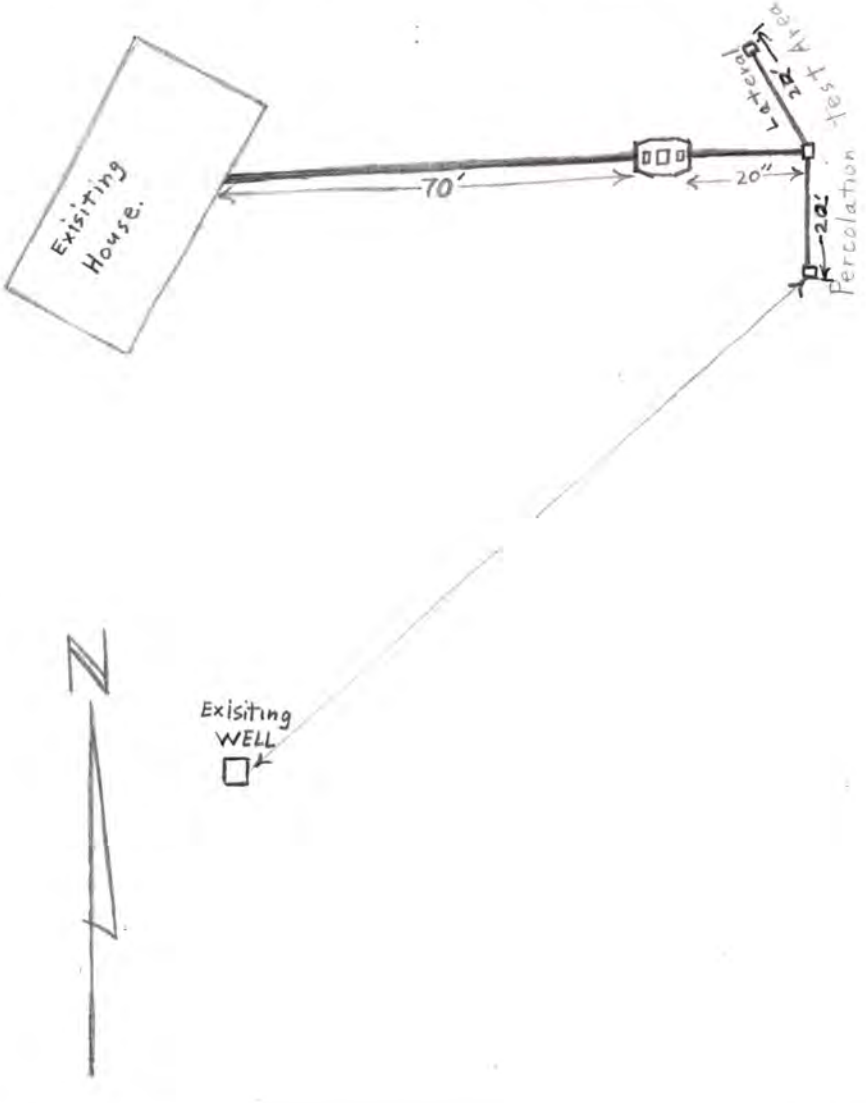
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

FILE NO. 1467-C

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



REVIEWING ACTION

Remarks: * Credit for 44 feet can be given because of previous installation

Date:

* Need 170 feet of 3" wide

Minimum Design Requirement

1. Capacity of Septic Tank 1000 gals.
2. * Total Length of Laterals 214 ft.
3. With a Trench Width of 3' in.
4. Total Area of Lateral needed ___ sq.ft.

Ronald Bryant
Signature of Reviewing Official

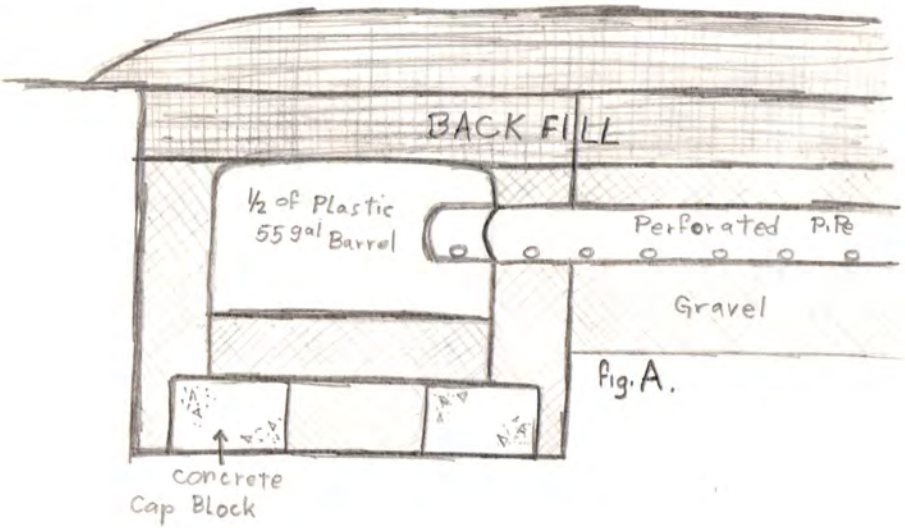

BACK FILL
½ of Plastic 55 gal Barrel
Perforated Pipe
Gravel
Concrete Cap Block

fig. A.

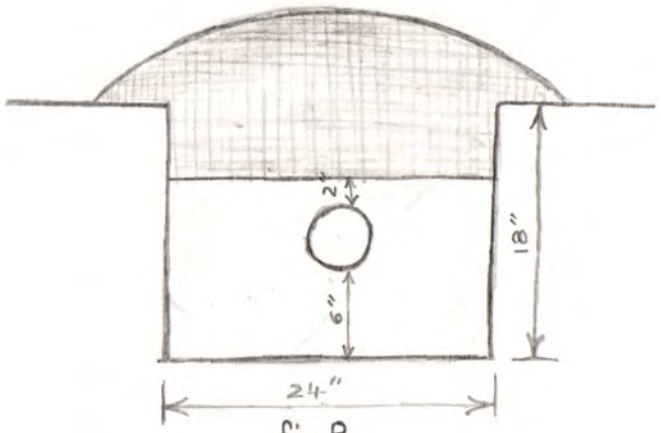
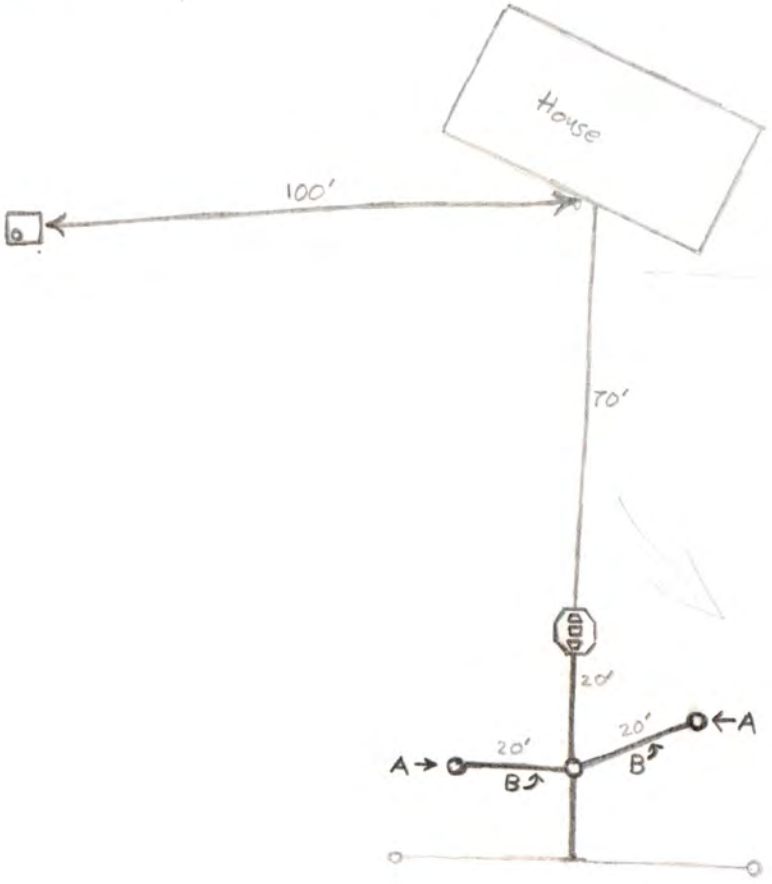

2"
6"
18"
24"

fig. B.


House
100'
70'
20'
20'
20'
A
A
B
B

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: 474-1541

D

DATE: _____

FILE NO. 1467-C

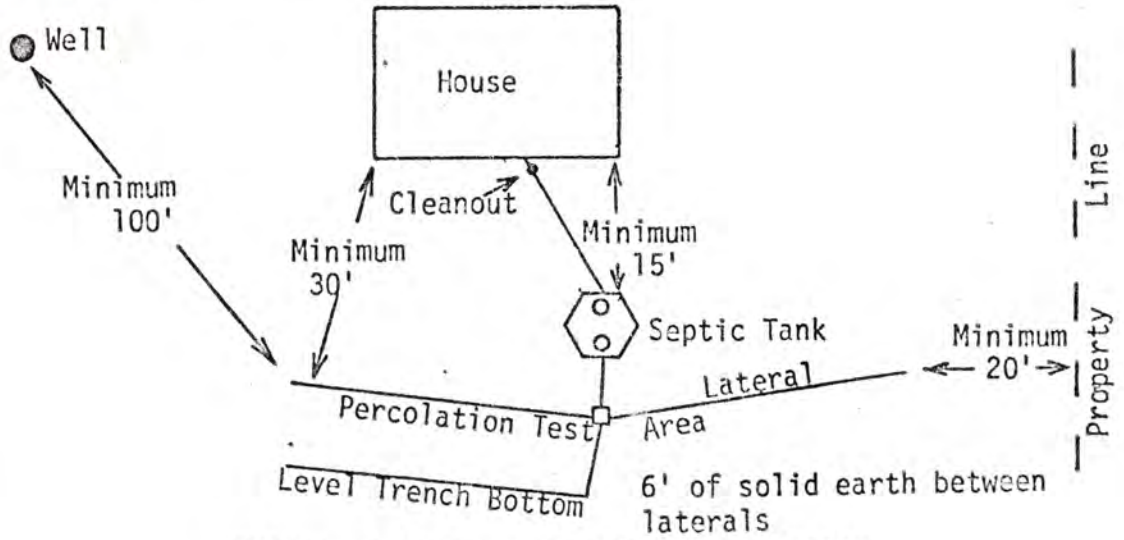
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic; Diameter 3 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 62 ft.
4. Number of clean-outs _____.
5. Distances to:
Well or Suction Line 100 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 160 ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments 1.
2. Capacity 1,000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre-cast Steps)
4. Manholes: Over Inlet; diam. 6-8 in.
Over Outlet; diam. 6-8 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 24 in.
8. Distances to:
Well or Suction Line 120 ft.; Stream _____ ft.; Pressure Line 100 ft.; Property Line 158 ft.

C. DISTRIBUTION BOX:
1. Material Plastic; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☒
(Company _____)
3. Distance from Septic Tank 20 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 __ ; Length of each line 20', 20', _____, _____, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines ___ ft.
3. Trench dimensions: Width 2 ft.;
Slope _____ in/100 ft.; Average Depth 24-30 in.
4. Filter Material: Gravel
Depth of Material 12 in.
5. Distances to:
Well or Suction Line 123 ft.; Stream _____ ft.; Pressure Line 90 ft.; Property Line 143 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

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

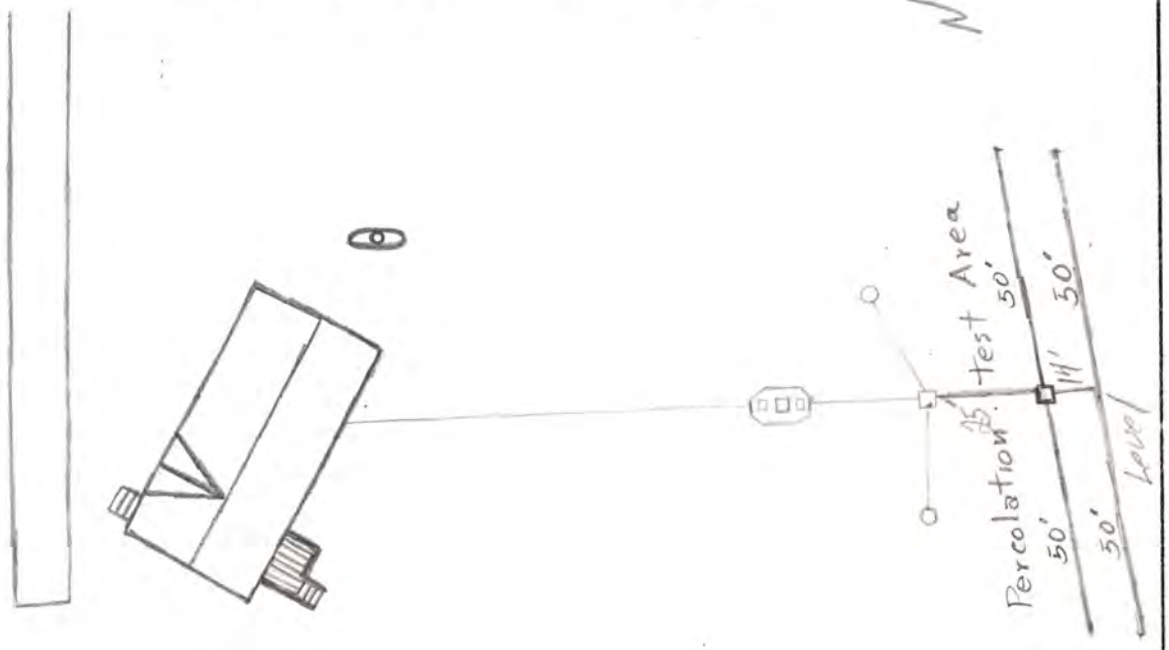
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

FILE NO._____

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



As Built Drawing

11-28-77

☐

REVIEWING ACTION

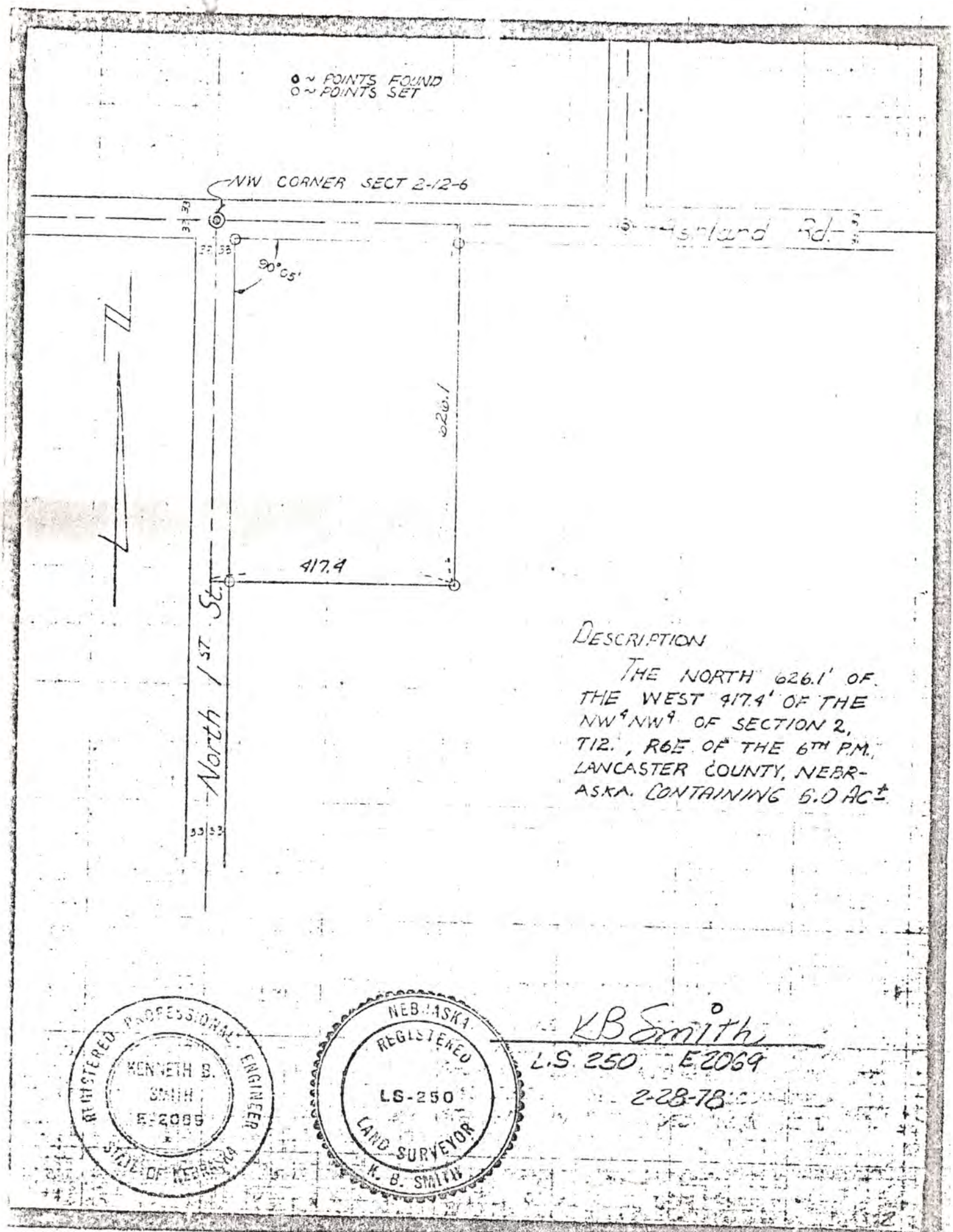
Remarks:_____

_____

Date:_____

Minimum Design Requirement
1. Capacity of Septic Tank_____gals.
2. Total Length of Laterals_____ft.
3. With a Trench Width of_____in.
4. Total Area of Lateral needed_____sq.ft.

_____
Signature of Reviewing Official



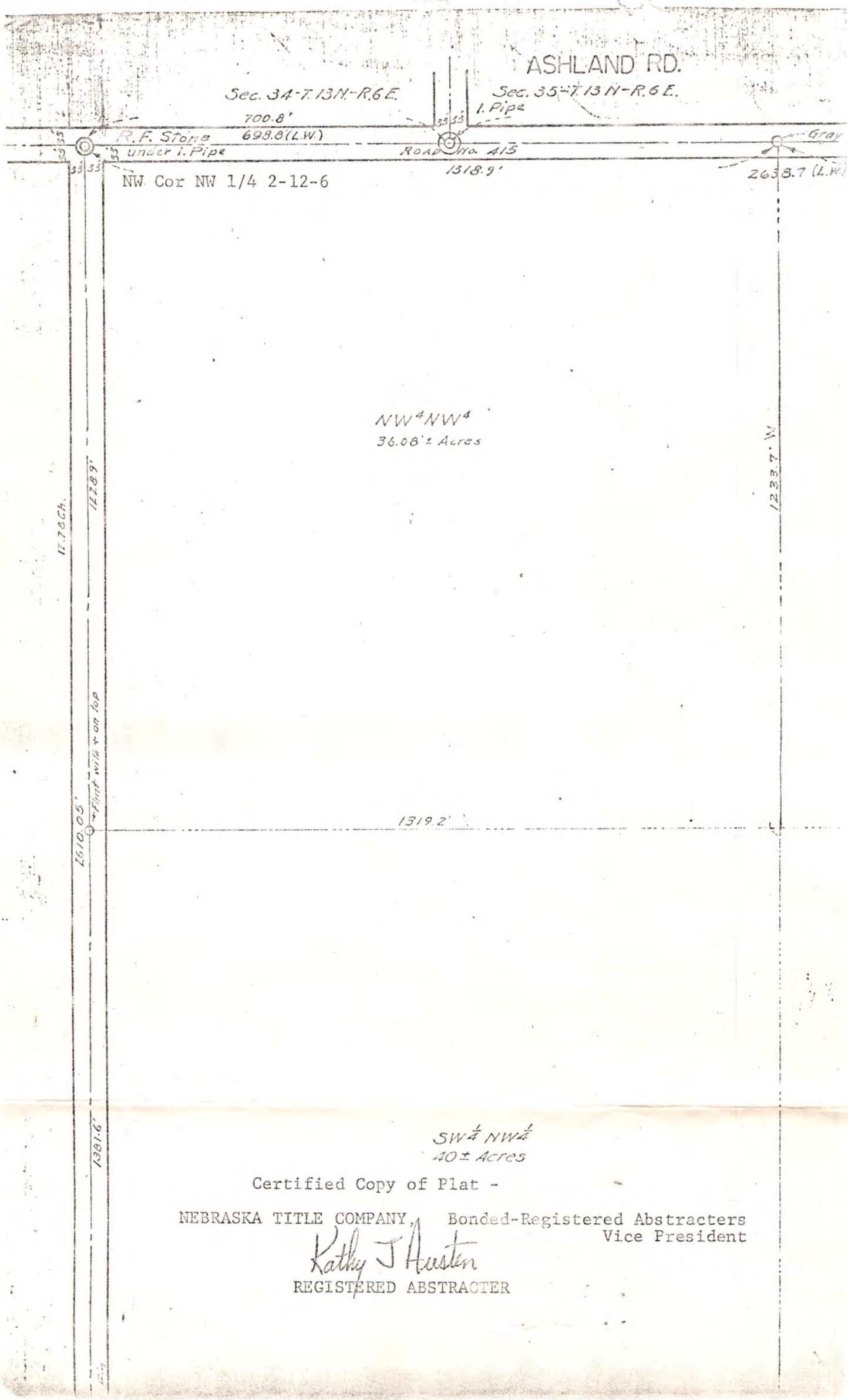
DESCRIPTION

THE NORTH 626.1' OF THE WEST 417.4' OF THE NW¼NW¼ OF SECTION 2, T12., R6E OF THE 6TH P.M., LANCASTER COUNTY, NEBRASKA. CONTAINING 6.0 Ac±

REGISTERED PROFESSIONAL ENGINEER
KENNETH B. SMITH
E-2069
STATE OF NEBRASKA

NEBRASKA
REGISTERED
LS-250
LAND SURVEYOR
K. B. SMITH

K B Smith
L.S. 250 E2069
2-28-78



Certified Copy of Plat -

NEBRASKA TITLE COMPANY, Bonded-Registered Abstracters

Kathy J Austen
Vice President

REGISTERED ABSTRACTER

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: 11-17-78

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☒ Evaluation of the Individual Water Supply

☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 12 ; Range 6E ; Section 2 NW¼NW¼;

Block ; Lot ; Addition .

Street Address 1st Ashland Road SE corner .

Directions on how to get to property .

.

Location of well 79' S of House .

Where is tap: Inside ☐ Outside ☒ .

	NAME	ADDRESS	PHONE
Present Owner:	Merlin Rose	RFD 2 Ceresco Nebr.	665-2162
Tenant:	William P Guenther	RFD 2 Ceresco Nebr.	665-2169
Lending Agency:			

(Do not write below double lines)

Health Department: Date Received 11-17-78

Received $45.00 Check ☒ Cash ☐

Site Visits: Date 11-16-78 by [illegible]
Date 11-28-78 by [illegible]
Date [illegible] by [illegible]

Signature of Applicant

RFD 2 Ceresco Nebr.
Address

PRELIMINARY STATUS -- DATE 11-17-78

Water System:
Approved ☒ Disapproved ☐

Sewage Disposal System:
Approved ☒ Provisional Approval ☐
Disapproved ☐

Corrections Required or Reasons for Disapproval .

☐ See Attached Letter.

FINAL APPROVAL -- DATE 11-28-78

Water System ☒ . Sewage Disposal System ☒ .

BY James Wawrka, R.S.

Form Number 20215-0878