LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

P E R M I T

Permit
SEWAGE INSTALLATION

No. 94380119701

Issued 07/13/94
Expires 01/13/95
Revenue Code 18754

Establishment
DENNIS FREY
T12N R6E SEC 29
LOT 12

FEES: $150.00

TOTAL $150.00

Permittee
DENNIS FREY
RR0001
BOX 0088A
HICKMAN NE 68372

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: 7-11-94

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. 12 N ; Range 6E ; Section 29 ;
   Block _____ : Lot 18, I.T. : Addition _____
   Street Address _____

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.

Dennis Long 560-2211
Signature of Applicant (Owner or Lessee)

RT#1 Box 88A Hickman
Address 68372

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/11/94. Date Frwd. 7/12/94. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 7-12-94. Date Frwd. 7-12-94. ACTION: Approved ☒ Disapproved ☐ Signature: Mary Lynn

3. City or County Engineer: Date Rec'd. 07/11/94. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7-18-94 by: mm will send drawing
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

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
2200 St. Marys Avenue
Lincoln, Nebraska 68502
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 12 N ; Range 6E ; Section & ¼ Section 29 .
Property Dimensions: 660 ft. x 1362 ft. Area: 21 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☑ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 6-10-94 to 6-11-94 . Weather: Precip. 0 Temp. 98° .

OWNER: Mike Unverferth

Address: 2800 NW Branched Oak 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	36	6-10	10 AM	6-11	11 AM	6-11	11:30	6	12-15	4.25	45	1.75	
2	36	6-10		6-11				6		4.25	45	1.75	
3	36	6-10		6-11				6		4.50	45	1.50	
4	36	6-10		6-11				6		4.75	45	1.25	
5	36	6-10		6-11				6		4.50	45	1.50	
6	36	6-10		6-11				6		4.75	45	1.25	

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

Signature of Person Conducting Test

Address RT #1 Box 88A Nickman Phone 560-2211

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): Malcolm Silt Loam

Date: July 11, 1994

Approved Percolation Rate (a)
A. 32 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hood
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.

FILE NO._____

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

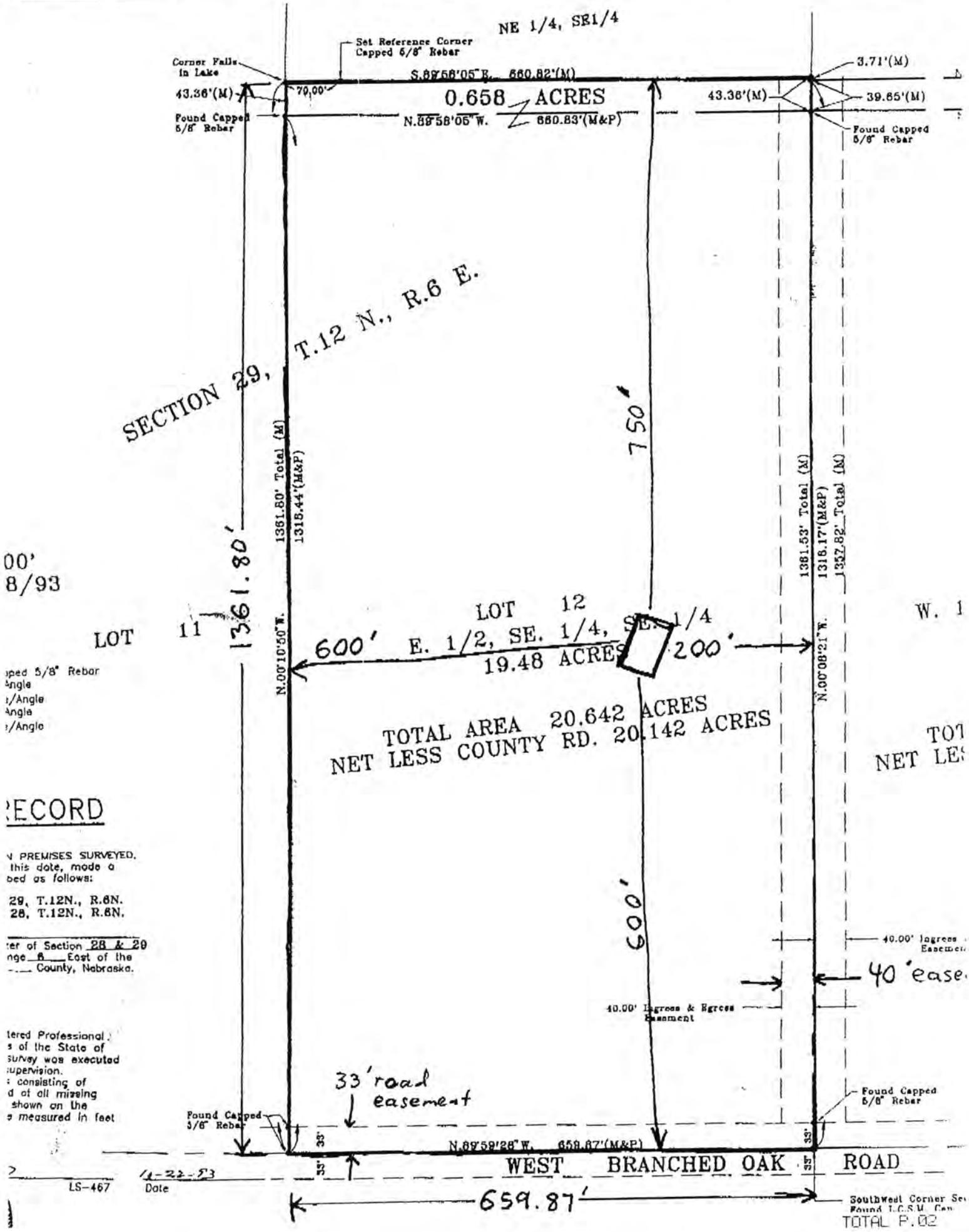
REVIEWING ACTION

Remarks: _____

Date: July 11, 1994

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 194 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 774 sq.ft.

Gerrold C. Hood
Signature of Reviewing Official


NE 1/4, SE1/4
Set Reference Corner Capped 5/8" Rebar
Corner Falls in Lake
43.36'(M)
70.00'
S.89°56'05"E. 660.82'(M)
0.658 ACRES
N.89°56'05"W. 660.83'(M&P)
3.71'(M)
43.36'(M)
39.65'(M)
Found Capped 5/8" Rebar
Found Capped 5/8" Rebar
SECTION 29, T.12 N., R.6 E.
1361.80'
1361.80' Total (M)
1318.44'(M&P)
750'
1361.53' Total (M)
1318.17'(M&P)
1352.82' Total (M)
LOT 11
LOT 12
600' E. 1/2, SE. 1/4, SE. 1/4
19.48 ACRES
200'
N.00°10'50"W.
N.00°08'21"W.
TOTAL AREA 20.642 ACRES
NET LESS COUNTY RD. 20.142 ACRES
600'
40.00' Ingress & Egress Easement
40' ease
33' road easement
Found Capped 5/8" Rebar
Found Capped 5/8" Rebar
N.89°59'26"W. 659.87'(M&P)
33'
33'
33'
WEST BRANCHED OAK ROAD
659.87'
Southwest Corner Se
Found I.C.S.M. Cap
TOTAL P.02
00'
8/93
LOT 11
RECORD
PREMISES SURVEYED,
this date, made a
bed as follows:
29, T.12N., R.6N.
28, T.12N., R.6N.
ter of Section 28 & 29
nge 6 East of the
County, Nebraska.
tered Professional
s of the State of
survey was executed
supervision.
consisting of
d of all missing
shown on the
e measured in feet
LS-467
11-22-93
Date