# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 924-0

INDIVIDUAL SEWAGE SYSTEM CONTRUCTION — TYPE OF PERMIT

March 28, 1977 — THIS PERMIT EXPIRES

Dr. Brad Williams — ISSUED TO

900 Coachman Drive — ADDRESS

T12N: R6E: Section 32 — 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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 924-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: Sept 10, 1976

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein: East 300' of S. 920' of SE¼ SE¼ Sec 32 T12N R6E of 6th PM. Except So. 420.00' 3.44 Acres

1. Legal description of property: Twp. 12 N ; Range 6E ; Section 32
Block _____; Lot _____; Addition _____
Street Address _____

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

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

4. Distance to public sewer: _____ ft.

Dr. Brad Williams
Signature of Applicant (Owner or Lessee)

900 Coachman Dr.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 9/28/76 . Date Frwd. 9/28/76 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____ . Date Frwd. _____ . ACTION: Approved ☐ Disapproved ☐ Signature: _____

3. City or County Engineer: Date Rec'd. 9/28/76 . Date Frwd. 9/28/76 . ACTION: Approved ☒ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL Approved for sewage stabilization pond only.

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

Sally S. Grant Clerk
Village of Raymond

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT 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: 475-6221)

FILE NO. 924-C

DATE: Sept 10. 1976

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 12N ; Range 6E ; Section 32 ; Block ; Lot ; Addition .
Street Address .

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

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

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Dr. Brad Williams
Signature of Applicant (owner or lessee)

900 coachman Dr
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;
Filing Fee: $ 30.00

2. Site Visits:
Date: 12-21-76 by: jm
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 9/29/76
by: Jerrold C. Hoos
Provisional Approval Only.

4. INSTALLATION ~~FINAL WRITTEN APPROVAL~~
Date: 12-21-76 by: James Neverka

FORM HD- 43(73) 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 475-6221)

FILE NO. 924-C

PROPERTY WHERE SOIL TESTED:
Location: Township 8N ; Range 6E
Section & ¼ Sect. _____
Property Dimensions: ____ ft. x ____ ft.
Area: 3.44 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Dr. Brad Williams
Address 900 Coachman Dr.

Dates of Tests: Sept. 8 to Sept. 9. Weather: Precip. Hot + Dr X Temp. ___°

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 | | | | |
| Hole 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./inch) |
| 1 | 30 | 9/8 | 10:00 | 9/9 | 10:00 | 9/9 | 10:00 | 6" | 10:30 | 3 | 30 | 3 | |
| 2 | " | | " | " | " | | | | | 3 | | 3 | |
| 3 | " | | " | " | " | | | | | 5 | | 1 | |
| 4 | " | | " | " | " | | | | | 2½ | | 3½ | |
| 5 | " | | " | " | " | | | | | 3 | | 3 | |
| 6 | " | | " | " | " | | | | | 4 | | 2 | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

Sum of Percolation Rates 15.5
Average of Rates: 2.583
Mean of Rates: _____

John Strohmyer
Signature of Person Conducting Test

Address 401 Teakwood Dr.
Phone: 489-2510

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

DATE: _____

Approved Percolation Rate(s)
A. 12 min./inch
B. _____ min./inch
C. _____ min./inch

Signature of Reviewing Official

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

NAME John Strohmeyer DATE

| TIME | DESCRIPTION OF ACTIVITY | HOURS | CODE |
|---|---|---|---|
| | #1(pd) 13½" 12½" 1½ #2(pd) 13¾" 12" 1½ #3(pd) 18½" 18" 1¼ #4(pd) 12½" 12" 1½ #5(pd) 15¾" 15" 1⅜ #6(pd) 7" 6" 1 #7(pd) 12¾" 12" 1 #8(pd) 13¾" 12" 1¼ | 10.50 | |

Not pre-soaked

4.625

Ave O. 5781

53 M/M

1 MCH

Ron said holes were not pre-soaked

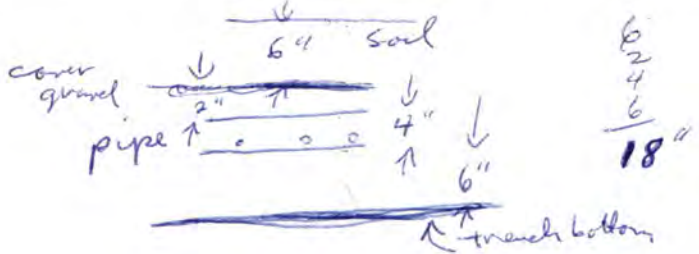
Ave 53 MIN/INCH

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

| | BUSINESS TRAV. | | PERSONAL TRAV. | |
|---|---|---|---|---|
| 4:30 PM | END | END | TOTAL | |
| 8:00 AM | START | START | PERSONAL | |
| MILES | MILES | MILES | BUSINESS | |

BUSINESS EXPENSES:

MEALS: $_____ PARKING: $_____ OTHER: $_____ TOTAL: $_____



FORM HD- 43(73) 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 475-6221)

FILE NO. _____

PROPERTY WHERE SOIL TESTED:
Location: Township _____; Range _____
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Dr. Brad Williams 488 8001
Address _____

Dates of Tests: _____ to _____. Weather: Precip. _____ Temp. ___F

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 | | | | |
| Hole 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./inch) |
| | | | | | | | | | | | | | |
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Sum of Percolation Rates _____
Average of Rates: _____
Mean of Rates: _____

_____
Signature of Person Conducting Test

Address _____
Phone: _____

(Do not write below this line)

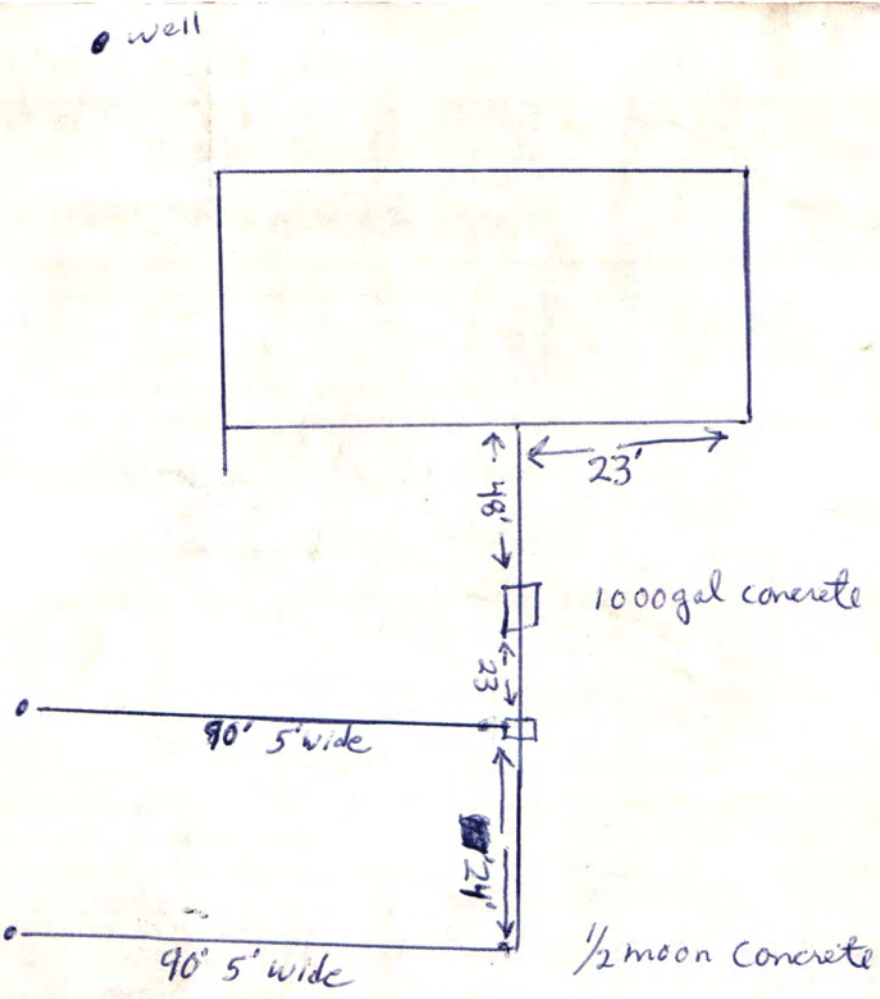
REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. _____min./inch
B. _____min./inch
C. _____min./inch

DATE: _____

_____
Signature of Reviewing Official




this is a system that is extremly oversized, shallow, and aerated, with only black loam for a cover over the laterals. I feel that because of these factors this system will succeed where the normal depth and width would have failed.

a written guantee will accompany this system in the event of ~~failure~~ failiar that another system will be installed free of charge.

Dec. 21, 1976

John Strutmeyer

Give To John

BRAD WILLIAMS

SITE #3

The East 300 feet of the S. 920 feet of the $SE^4$ $SE^4$ Sec. 32, T12N, R6E of 6th P.M. Lancaster County, except the south 420.00' thereof and containing a calculated area of 3.44 acres, more or less