LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1212-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

MAY 4, 1978 — THIS PERMIT EXPIRES

Donald Stewart — ISSUED TO

1114 North 45 Street, Lincoln, NE — ADDRESS

T10N, R5E, Section 28 E½ of SW¼ — 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

East ½ of the Southwest ¼ Section 28, T 10 N, R 5

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. 1212-C

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

DATE: Nov. 3, 1977

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 10 N ; Range 5 E ; Section 28 E½ OF SW¼
   Block _____; Lot _____; Addition _____
   Street Address _____

2. Property Use: Residential _____ ☐ ; Commercial _____ ☐
   No. of Bedrooms 2 . Describe: _____
   Other Use FARM ☒
   Describe: 80 acres

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

4. Distance to public sewer: 6 miles ~~ft.~~

Donald A Stewart
Signature of Applicant (Owner or Lessee)

1114 North 45th St.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 11/4/77. Date Frwd. 11/4/77. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd. 11/4/77. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: _____
3. City or County Engineer: Date Rec'd. 11/4/77. Date Frwd. 11/4/77. ACTION: Approved ☒ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

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

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. 1212-C

DATE: _____

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. 10N ; Range 5F ; Section 28 E½ OF SW¼ ; Block ; Lot ; Addition
Street Address .

2. Property Use: Residential ☒ Commercial ☐
No. of Bedrooms 2 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).

Donald A Stewart
Signature of Applicant (owner or lessee)

Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 11-9-77 by: jw
Date: 11-15-77 by: jw
Date: by:

3. Date: Approved ☒ Disapproved ☐ 11/14/77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 12-14-77 by: James Wenker

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 474-1541)

FILE NO. 1213-C

PROPERTY WHERE SOIL TESTED:
Location: Township 10 N : Range 5E
Section & ¼ Sect. 28
Property Dimensions: ____ft. x ____ft.
Area: 80 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; (Sandy Clay)

Owner: Donald A Stewart
Address: 1114 No. 45th St.

Dates of Tests: 10-27-77 to _____. Weather: Precip.____ 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				
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./inch)
1	30"	10/27/77	24 hr	10/28/77		10/27/77	2:30pm	1 ft	6:30	8 in	4 hr	4 in	4 hours
2	30"	10/27/77	24 hr	10/28/77		10/28/77	3:00pm	1 ft	7:00	8 in	4 hr	4 in	4 hours
3	30"	10/27/77	24 hr	10/28/77		10/28/77	4:00pm	1 ft	5:00	8 in	4 hr	4 in	4 hours

Donald A Stewart
Signature of Person Conducting Test

Address 1114 No 45
Phone 464-5823

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: Shelby Clay Loam. (S.C.L.)

DATE: November 4, 1977

Approved Percolation Rate (a)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hood
Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. 1212-C

SPECIFICATIONS

DATE: _____

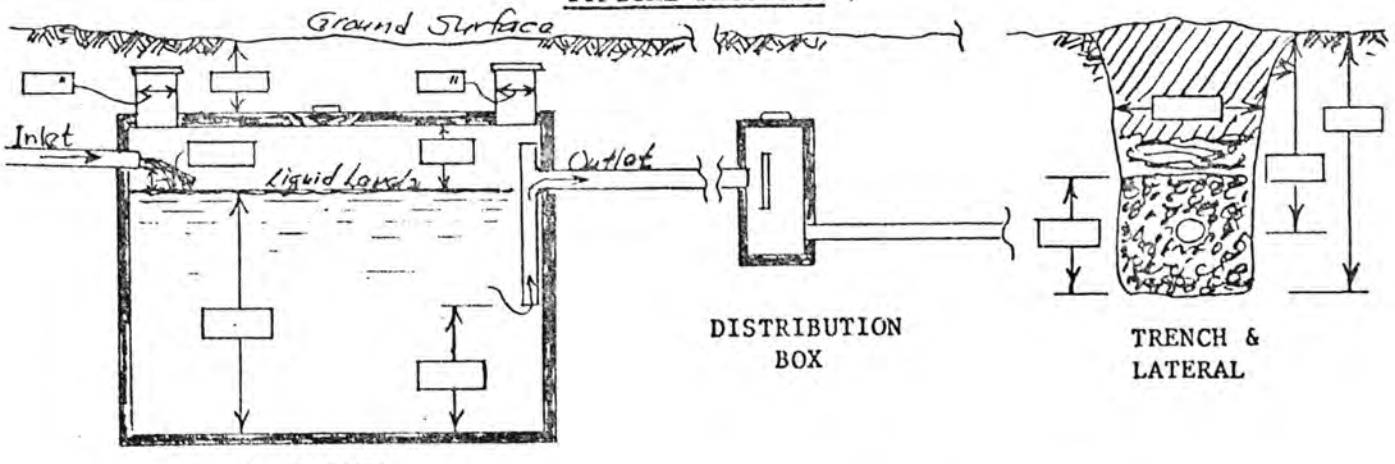
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 750 gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade __in. Number ____; Length of each line ___ft Total length of Laterals 165 ft.; Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: _____.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

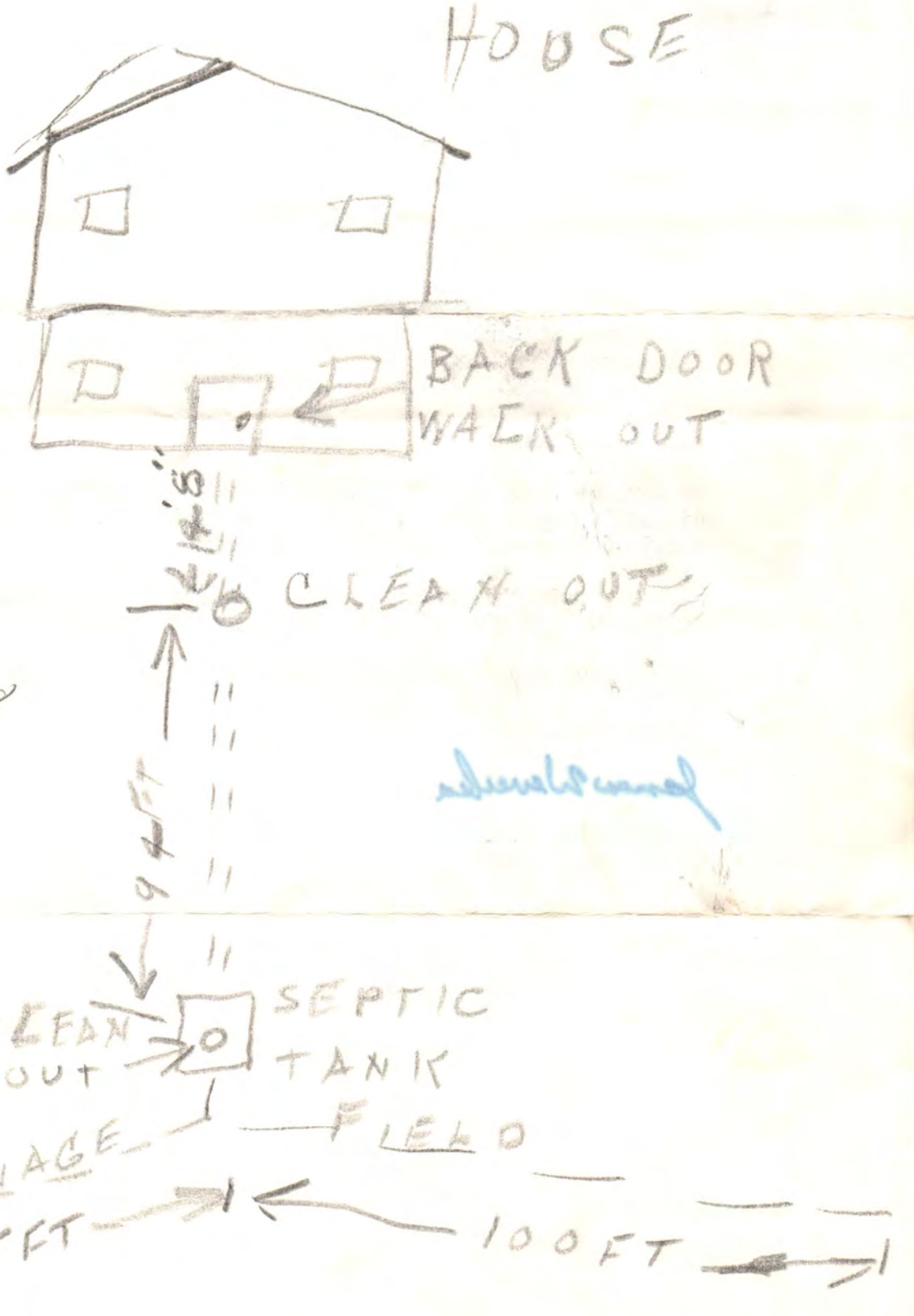
TYPICAL SKETCHES



SEPTIC TANK

_____
Signature of Applicant

DEC 13 1977.


HOUSE
BACK DOOR
WALK OUT
CLEAN OUT
T 10N R 5E Sec 28
CLEAN OUT
SEPTIC TANK
DRAINAGE FIELD
65 FT
100 FT