LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1604-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

APRIL 5, 1980 — THIS PERMIT EXPIRES

Melvin Gagner — ISSUED TO

240 O Street, Box 81221, Lincoln, NE 68501 — ADDRESS

T10N, R5E SW¼ SW¼, Section 31, Lot 13 (Extend and Repair) — 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

2832

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. _____

20109-0977

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1604-C

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

DATE: 10-4-79

The undersigned hereby applies for a permit to ALTER ☐, EXTEND ☒, or REPAIR ☒ an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 10N ; Range 5E ; Section 31 (SW¼ SW¼)
Block ; Lot 13 ; Addition
Street Address SW 140th & West VAN DORN

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

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

4. Description of proposed alteration, extension or repair: 3/0 LATERAL, 3ft wide + 1000 GAL TANK.

5. Work to be done by: Owner ☐ ; or Contractor ☒, LAGNER CONST
Contractor's Name

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$2500 00

Melvin F Lagner
Signature of Applicant (owner or lessee)

Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: 10-4-79
Filing Fee: $ 30 00

2. Site Visits:
Date: 10/9/79 by: J.C.H.
Date: by:
Date: by:

Need Drawing

3. Date: Approved ☒; Disapproved ☐
by: Jerald C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/10/79 by: J.C. Hood

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. _____

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: Oct 2 to Oct 3. Weather: Precip. 0 Temp. 75.

OWNER: Mike Eger

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	30"	Oct 2	7 AM	Oct 2	12 AM	Oct 3	7 AM	6	11 AM	4 1/2	30	1 1/2	
2	"	"	"	"	"	"	"	"	"	4 3/8	"	1 1/8	
3	"	"	"	"	"	"	"	"	"	4 3/8	"	1 1/8	
4	"	"	"	"	"	"	"	"	"	4 5/8	"	1 3/8	
5	"	"	"	"	"	"	"	"	"	5 1/8	"	7/8	
6	"	"	"	"	"	"	"	"	"	5	"	1	

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

Signature of Person Conducting Test

Address R 1 Lincoln Phone 797-2365

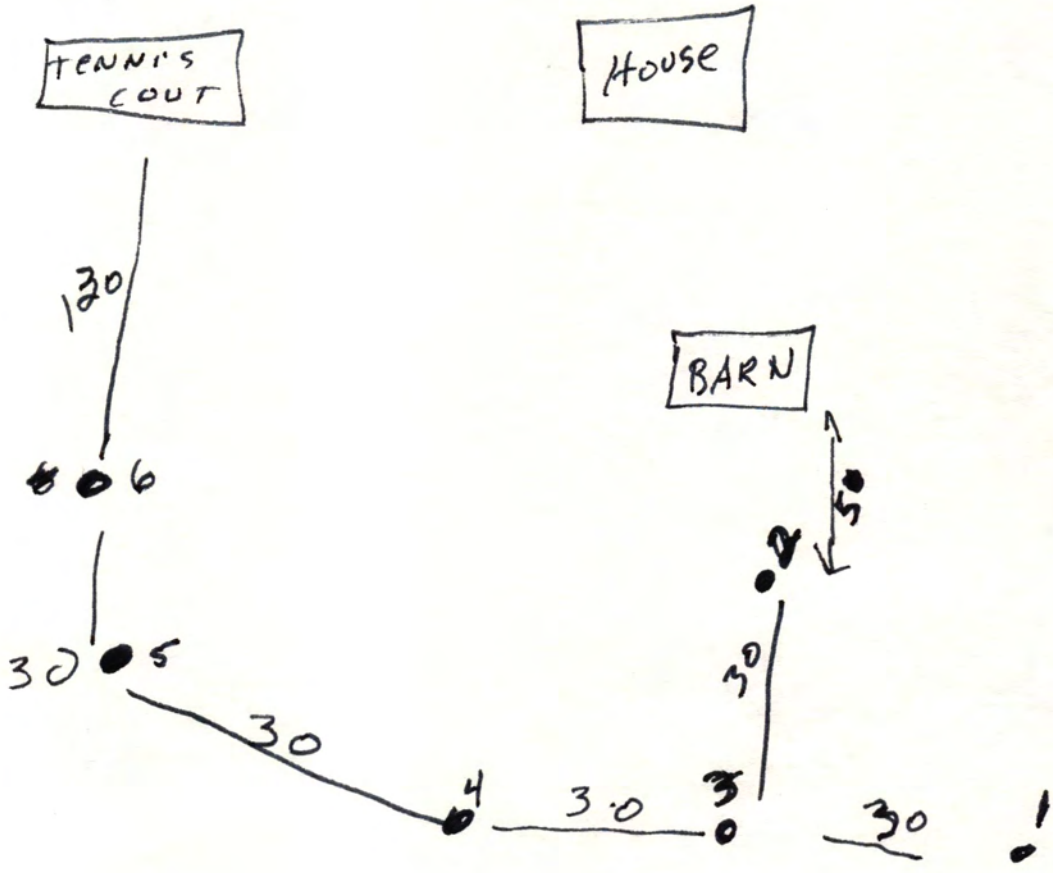
(Do not write below this line)

REVIEWING ACTION

Remarks: Rocks apparent
Soil Type (SCS): Burchard Clay Loam
Date: October 9, 1979

Approved Percolation Rate (a)
A. 25 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official


TENNIS COUT
House
BARN
120
6
30
5
30
4
30
3
30
2
5
30
!

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: 90CT 79

FILE NO. _____

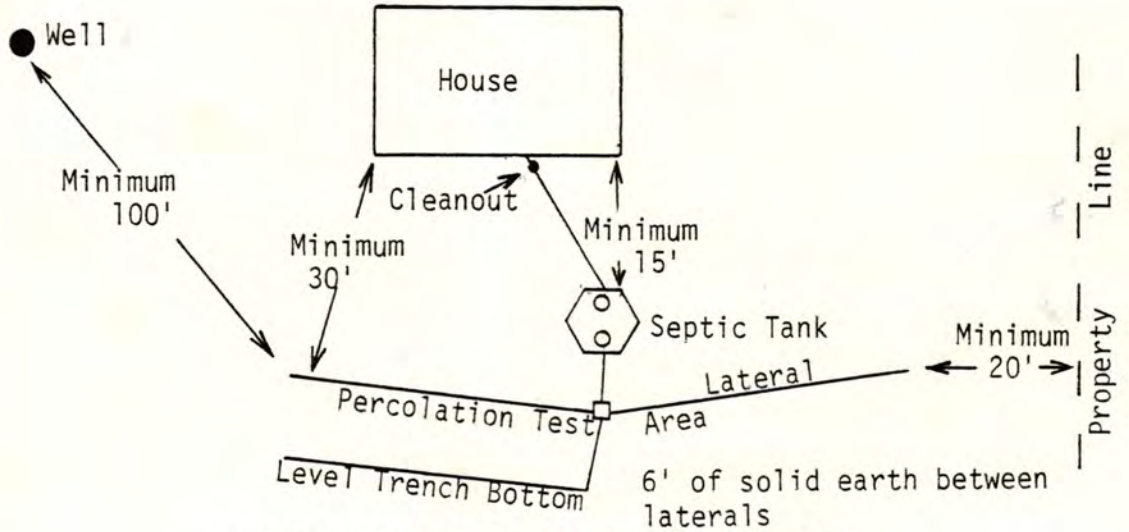
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PLASTIC; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 20 ft.
4. Number of clean-outs 3.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line [illegible] ft.

B. SEPTIC TANK:
1. Material CONCRET; 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 _____ in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 6 in.
8. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material PLASTIC; Number - available outlets _____.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank _____ ft.

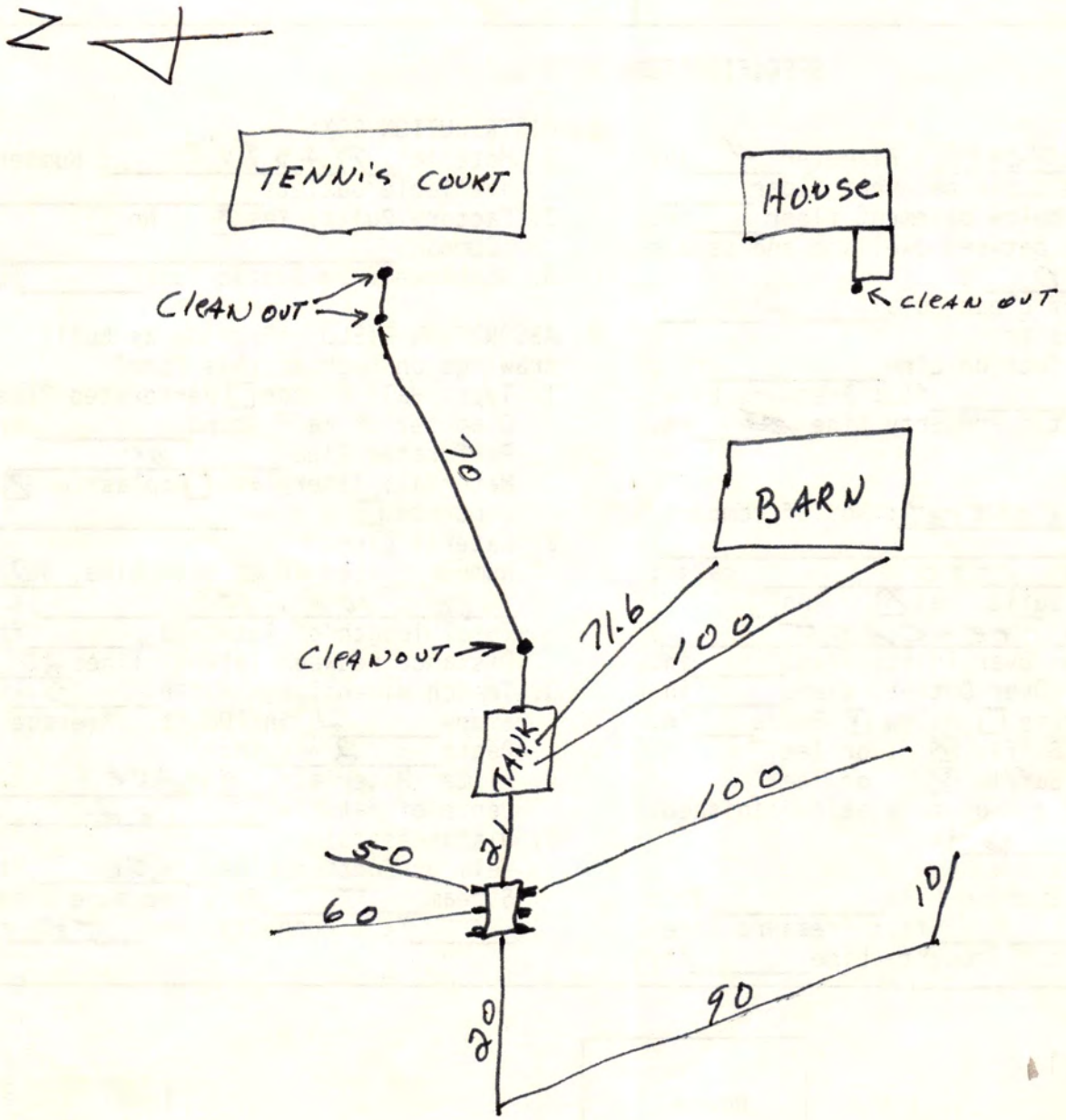
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or
Perforated Pipe 4" .
Material: fiberglass ☐ ; plastic ☒ ;
concrete ☐ ; other _____.
2. Lateral Lines:
Number 4 ; Length of each line 50, 60, 100, 100, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines 20 ft.
3. Trench dimensions: Width 3 ft.;
Slope 2 in/100 ft.; Average Depth 24 in.
4. Filter Material: GRAVEL
Depth of Material 12 in.
5. Distances to:
Well or Suction Line 300 ft.;
Stream — ft.; Pressure Line — ft.; Property Line 50 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 9 OCT 79 INSTALLER WAGNER CONST



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: 9/11/79

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. 10 N ; Range 5E ; SW1/4 SW1/4 Section 31 ;
Block ; Lot 13 ; Addition .
Street Address SW 140th & West Van Dorn .
Directions on how to get to property From the intersection of SW 140th & W. Van Dorn go East. It is the first home on the north side of the road. Property is vacant enter through garage.
Location of well SW of house near group of trees enclosed in box.
Where is tap: Inside ☒ Outside ☐ .

	NAME	ADDRESS	PHONE
Present Owner:	Gerald R. Neva	Victor Colorado	None
Tenant:	None		
Lending Agency:	State Federal	40th & South Streets	435-3571

(Do not write below double lines)

Health Department: Date Received 9/11/79
Received $45.00 Check ☒ Cash ☐
Site Visits: Date 9-13-79 by RM
Date 10-9-79 by JH
Date by

Mike Egan
Signature of Applicant
5124 Goldenrod
Address

PRELIMINARY STATUS -- DATE 9-13-79

Water System:
Approved ☐ Disapproved ☒

Sewage Disposal System:
Approved ☐ Provisional Approval ☐
Disapproved ☒

Corrections Required or Reasons for Disapproval Sewage disposal appears to be into an inadequately constructed lagoon NW of house just W. of tennis court Hole in concrete slab around well must be sealed.
☐ See Attached Letter.

FINAL APPROVAL -- DATE 10-10-79

Water System ☒ . Sewage Disposal System ☒ .

BY Ron Maynard

Form Number 20215-0878