FORM HD-30(67) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 382-C

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

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described herein:

1. Legal description of property: S.W. 10 acres of S.W. 1/4 of S.E. 1/4 sec. 12T 12R 5 E. 6 P.M.
   Twp. 12N; Range 5E; Section 12;
   Block ____; Lot ____; Addition ____;
   Street Address ____.
2. Property Use: Residential ____ [X]; Commercial ____ [ ]
   No. of Bedrooms 2. Describe: ____
   Other Use ____ [ ]
   Describe: ____
3. Type of Individual Sewage Disposal System: Septic Tank [X]; Other [ ]
4. Distance to public sewer: NONE ft.

Robert Taylor
Signature of Applicant (owner or lessee)

7111 Old Post Road
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 11/29/73. Date Frwd. 11/29/73.
   ACTION: Approved [ ] Disapproved [X]
   Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd. 11/29/73. Date Frwd. ____.
   ACTION: Approved [ ] Disapproved [X]
   Signature: R. Wheeler
3. ~~City~~ COUNTY Engineer: Date Rec'd. 11-29-73. Date Frwd. 11-29-73.
   ACTION: Approved [ ] Disapproved [X]
   Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL ____

FINAL ACTION ON SITE CLEARANCE: Approved [ ] Disapproved [ ]

Date Applicant Notified: ____ Signature ____

FORM HD-32(67) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 382-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 Lincoln City Ordinance No. 9150, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 12N; Range 5E; Section 12;
Block _____; Lot _____; Addition _____;
Street Address _____.

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. of Bed Rooms 2 Describe: _____

Other Use _____ [ ]
Describe: _____

3. Type of Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Plans and Specifications of Proposed System. (See FORM HD-32a(67) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT, attached hereto.)

Robert Taylor
Signature of Applicant (owner or lessee)

7111 Old Post Road
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $_____. _____

2. Date Site Clearance _____

3. Site Visits:
Date: 12/11/73 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]: 11/29/73
by: Jerrold C. Hood

5. BUREAU OF LICENSES & PERMITS
Date Notified: _____
Date Issued: _____ Serial _____

6. INSTALLATION FINAL WRITTEN APPROVAL X SEE ATTACHED LETTER
Date: _____ by: _____

FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 382-C

PROPERTY WHERE SOIL TESTED:
Location: Township Agnew
Section & ¼ Sect. SW. ¼ of SE ¼ sec.
Property Dimensions: ___ ft. x ___ ft.
Area: 10 acres. (Attach sketch of property showing hole location).

Owner: Robert + Janet Taylor
Address Agnew, Nebr.

Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☒ 1, 2, +3
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☒ 4, 5, +6

Dates of Tests: Nov 3, 1973 to Nov 4, 1973. Weather: Precip. None Temp. 35 F

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
Hole No.	Hole Depth (in.)	Pre-Saturation Period Start Date (Mo. Day)	Pre-Saturation Period Start Time (Hr. Min.)	Pre-Saturation Period End Date (Mo. Day)	Pre-Saturation Period End Time (Hr. Min.)	Percolation Readings Start Date (Mo. Day)	Percolation Readings Start Time (Hr. Min.)	Percolation Readings Start Water Level (in.)	Percolation Readings End Time (Hr. Min.)	Percolation Readings End Water Level (in.)	Results Elapsed Time (Min.)	Results Water Level Drop (in.)	Results Percolation Rates (Min./inch)
1	26	11/3/73	4:30	11-4	12:00	11-4	12:00	6	4:00	5	30	1	30/1
2	26	11-3	4:30	11-4	12:00	11-4	12:00	6	4:00	5	30	1	30/1
3	26	11-3	4:30	11-4	12:00	11-4	12:00	6	12:30	5	30	1	30/1
4	26	11-3	4:30	11-4	12:00	11-4	12:00	6	12:30	5¼	30	¾	40/1
5	26	11-3	4:30	11-4	1200	11-4	12:00	6	12:30	5¼	30	¾	40/1
6	26	11-3	4:30	11-4	1200	11-4	12:00	6	12:30	5½	30	½	60/1
TEN INCH TEST HOLES													

Robert Taylor
Signature of Person Conducting Test

Address 7111 Old Post Rd
Phone: 489-0945

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

(Do not write below this line)

REVIEWING ACTION

REMARKS:

Approved Percolation Rate(s)
A. 37 min./inch
B. ___ min./inch
C. ___ min./inch

DATE: November 29, 1973

Jerrold C Hoob
Signature of Reviewing Official

NOV. 4 '73

Hole #1

water level Adjusted TO 6" every 30 minutes. on both Test Holes.

Time	Level	DROP
12:00 - 12:30	5"	1"
12:30 - 1:00	5 1/4	3/4"
1:00 - 1:30	5 1/4	3/4"
1:30 - 2:00	5"	3/4"
2:00 - 2:30	5"	1"
2:30 - 3:00	5"	1"
3:00 - 3:30	5"	1"
3:30 - 4:00		1"

Hole #2

Time	Level	DROP
12:00 - 12:30	4 1/2"	1 1/2"
12:30 - 1:00	5"	1"
1:00 - 1:30	5"	1"
1:30 - 2:00	5"	1"
2:00 - 2:30	5"	1"
2:30 - 3:00	5"	1"
3:00 - 3:30	5"	1"
3:30 - 4:00		1"

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 382-C

SPECIFICATIONS

DATE: _____

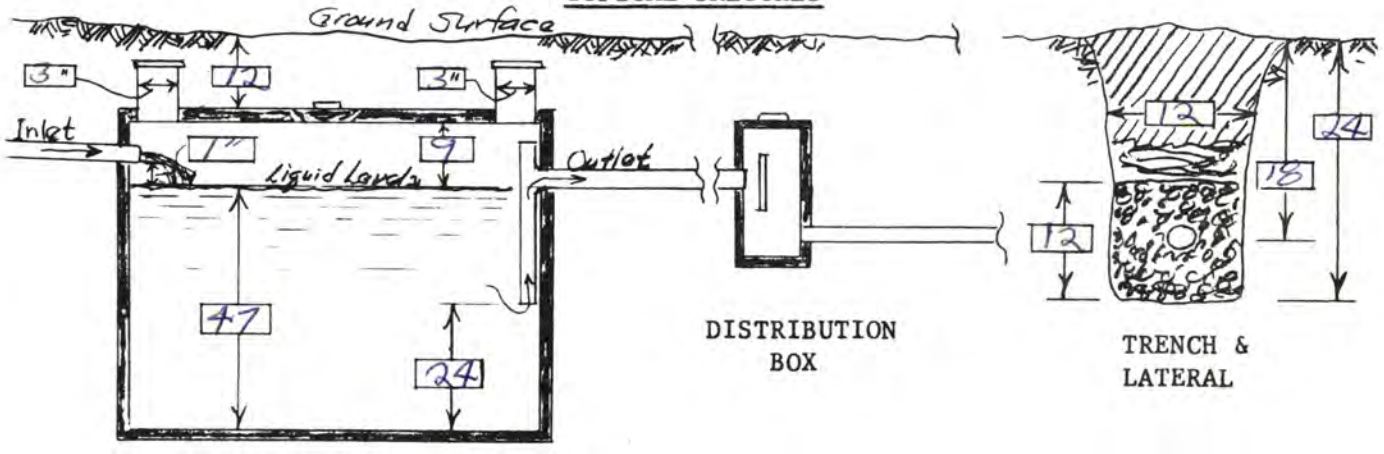
A. BUILDING SEWER: ~~CAST IRON~~ TILE
1. Material ~~CAST IRON~~; Diameter 5 in.
2. Distance above basement floor ___ in.; or below basement floor 6 in.
3. Distance between dwelling and septic tank 68 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 250 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 150 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Conc.; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 47 in.
3. Factory Built: Yes ☒ (Company PRE-CAST STEP CO.)
No ☐
4. Manholes: Over Inlet; diam. 12 in.
Over Outlet; diam. ___ in.
Below Grade 12 in.
5. Inlet: Baffle ~~☒~~; or Tee ☐
6. Outlet: Baffle ~~☒~~; or Tee ☐
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 12 in.
8. Distances To:
Well or Suction Line 250 ft.;
Stream ___ ft.; Pressure Line 60 ft.;
Property Line 200 ft.

C. DISTRIBUTION BOX
1. Material Conc.; No. available outlets 5.
2. Factory Built: Yes ☒, (Company Precast) No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 30 ft.
5. Serial Distribution: Yes ☐, No ☒
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ~~TRENCH~~ HALF MOON
2. Lateral Lines: Depth below grade 18 in.
Number 2; Length of each line 68 ft
Total length of Laterals 140 ft.; +72
Slope ~~1/8~~ in/100 ft. Diameter of pipe 16 in.; Shape O
Material: concrete ☒; fiber asbestos ☐; clay ~~☒~~; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth 24 in.; Width 36 in.
4. Filter Material: gravel.
Depth of material from trench bottom 12 in.
5. Distances To:
Well or Suction Line 270 ft.;
Stream ___ ft.; Pressure Line 150 ft.
Property Line 100 ft.
6. Percolation Rate: 37 minutes/inch

TYPICAL SKETCHES

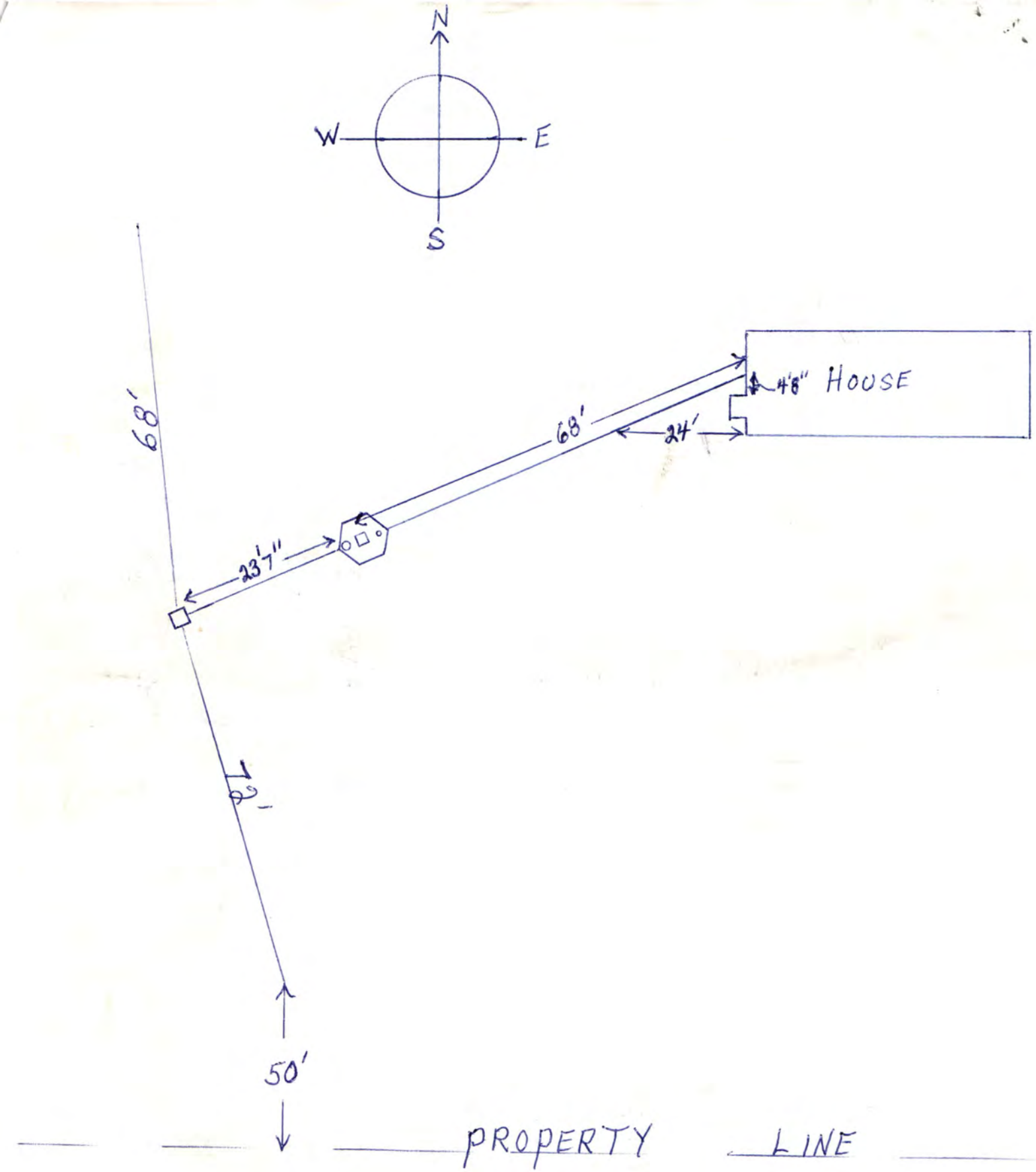


SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

Robert Taylor
Signature of Applicant


N
W
E
S
68'
68'
24'
48" HOUSE
23'7"
12'
50'
PROPERTY LINE
ROAD

Bob Taylor - Agent 489-0945

HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 382-C

SPECIFICATIONS

DATE: _____

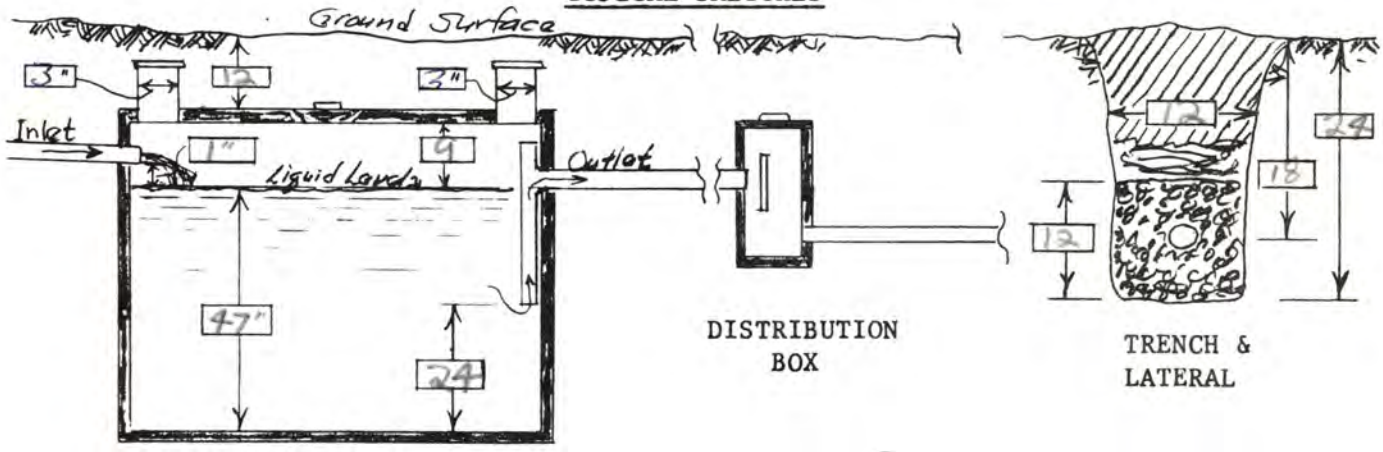
A. BUILDING SEWER: TILE
1. Material ~~CAST~~; Diameter 5 in.
2. Distance above basement floor ___ in.; or below basement floor 6 in.
3. Distance between dwelling and septic tank 68 ft.
4. Number of clean-outs 3.
5. Distances To:
Well or Suction Line 250 ft.;
Stream — ft.; Pressure Line — ft.;
Property Line 150 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Conc.; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 47 in.
3. Factory Built: Yes ☒ (Company PRE-CAST STEP CO.) No ☐
4. Manholes: Over Inlet; diam. 12 in.
Over Outlet; diam. ___ in.
Below Grade 12 in.
5. Inlet: Baffle ☒; or Tee ☐
6. Outlet: Baffle ☒; or Tee ☐
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 12 in.
8. Distances To:
Well or Suction Line 250 ft.;
Stream — ft.; Pressure Line 60 ft.;
Property Line 200 ft.

C. DISTRIBUTION BOX
1. Material Precast; No. available outlets 5.
2. Factory Built: Yes ☒ (Company Precast Co) No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 30 ft.
5. Serial Distribution: Yes ☐, No ☒ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: ~~SAND MOUND~~ HALF MOON
2. Lateral Lines: Depth below grade 18 in. Number 2; Length of each line ___ ft Total length of Laterals 170 ft.; Slope ~~1/8~~ in/100 ft. Diameter of pipe 6 in.; Shape ∩
Material: concrete ☒; fiber asbestos ☐; clay ☒; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth 36 in.; Width 36 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 12 in.
5. Distances To:
Well or Suction Line 270 ft.;
Stream — ft.; Pressure Line 150 ft.
Property Line 120 ft.
6. Percolation Rate: 37 minutes/inch

TYPICAL SKETCHES

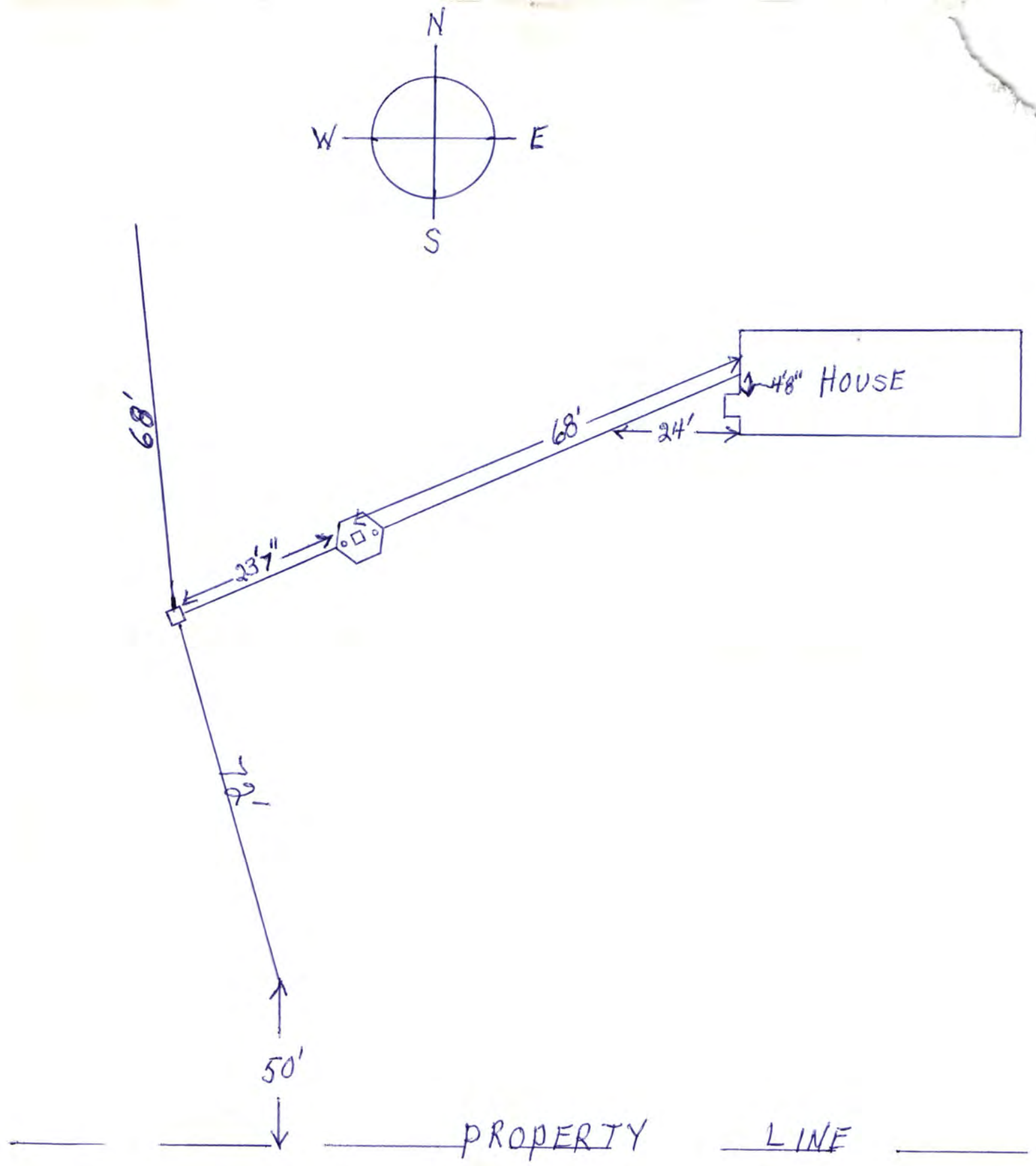


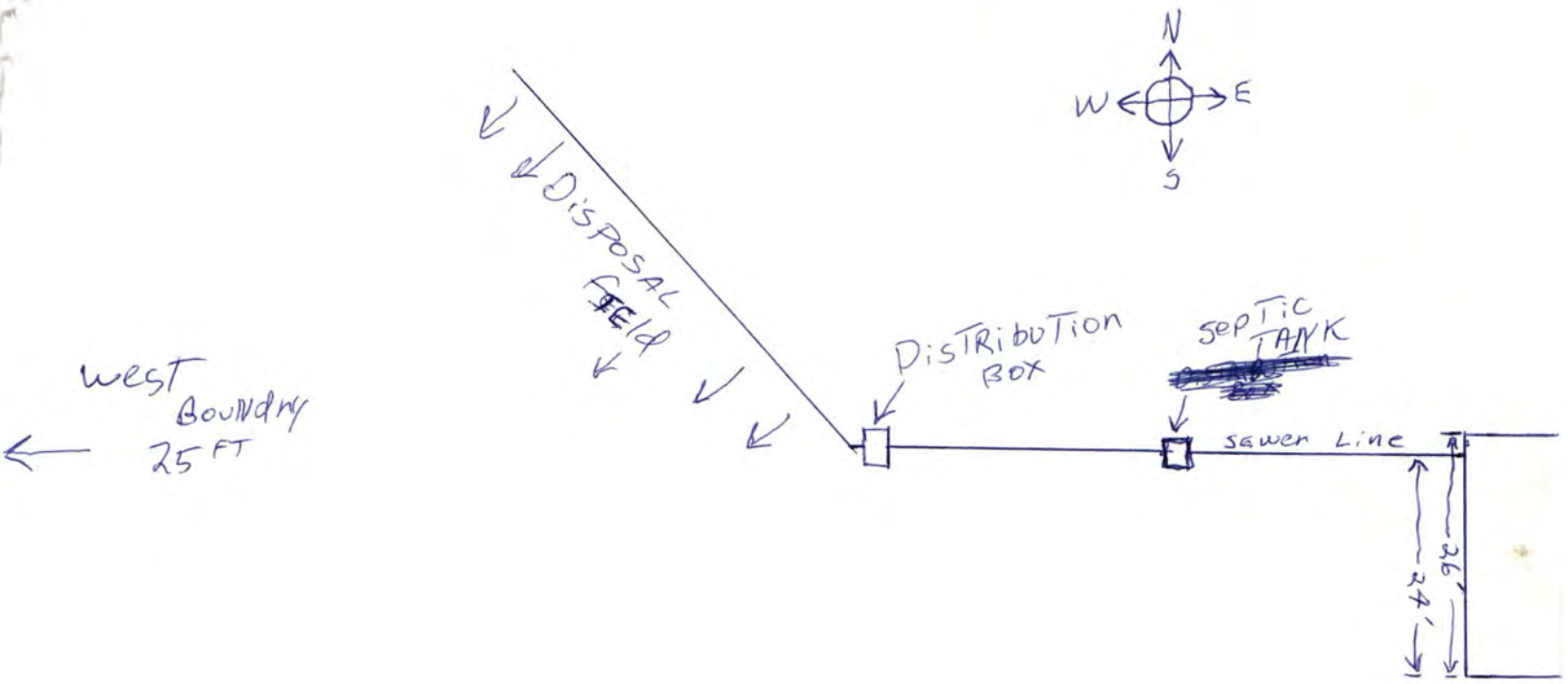
SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

Robert Taylor
Signature of Applicant


N
W
E
S
68'
68'
24'
4'8" HOUSE
23'7"
9'
50'
PROPERTY LINE
ROAD



SCALE — $\frac{1}{2}$" = 10 FT.

SOUTH BOUNDARY
40 FT

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☑ Evaluation of the Individual Water System Date: 2-23-90

☑ Evaluation of the Sewage Disposal System ☒ Enclosed is $75.00 #150.00

Legal Description of Property: TWP. 12N; RANGE SE; SECTION 12; BLOCK ___

LOT 9; ADDITION _____; Street Address 5949 West Hqnew Rd.

Directions to Property Hwy 79 to W Hqnew Rd – East ½ mile Blue House on No side by top of hill

Location of Well So. East and beside driveway Tap Location: Inside ☐ Outside ☐

Location of Sewage System drawing Year Installed 3/4/73

	NAME	ADDRESS	PHONE
Present Owner:	Jan Taylor		
Tenant/Buyer:			
Return to:	Wood Bros Realty	7141 A St Lincoln	483-4741

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Irene M Ekeschwer Address 7141 A Lincoln

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HEALTH DEPARTMENT USE ONLY #150.00

Date Received FEBRUARY 23, 1990 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 2/26/90 3/26/90 C.H. 3/23/90 C.H.

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☐	☒	Approved:	☒	Date 2/26/90	by C.H.
Bacteria	☒	☐	Provisional:	☐	Date 3/7/90	by C.H.
Nitrate	☒	☐	Disapproved:	☐	Date 3/16/90	by C.H.

Comments: WELL HAS BROKEN CONDUIT PLATE AND HOLE IN SCREEN OF WELL. SEPTIC HASN'T BEEN PUMPED IN LONG TIME PROBABLY IS NEEDED. SEPTIC SYSTEM IS NOW 16 YEARS OLD AND MUST BE DONE. See Attached Letter ☒

FINAL STATUS

WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM:	
Approved: ☐	Approved: ☐	Provisional Approval: ☐

APPROVED BY _____ DATE MARCH 28, 1990

Approval or disapproval is based on written standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832