LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1665-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

DECEMBER 24, 1980 — THIS PERMIT EXPIRES

HAROLD SPETH — ISSUED TO

6629 AYLESWORTH, LINCOLN NE 68505 — ADDRESS

T11N, R8E, Section 34, Lot part of 6 I.T. — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
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 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: 474-1541

A

FILING FEE: $ 60.00

FILE NO. 1665-C

DATE: 6-16-80

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. SEE ATTACHMENT 7N ; Range 8E ; Section 34 ;
   Block _____ : Lot PART 6 I.T. : Addition _____
   Street Address 15000 FLETCHER

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.

Harold Smith
Signature of Applicant (Owner or Lessee)

6629 Aylesworth, Lincoln Ne 68505
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/23/80. Date Frwd. 6/24/80. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 6/24/80. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: Gary N. Sherwood

3. City or County Engineer: Date Rec'd. 6-24-80. Date Frwd. 6-24-80. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 9/10/80 by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/10/80 By: Jerrold 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
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B

FILE NO. 1665-C

PROPERTY WHERE SOIL TESTED:

Location: Township SEE ATTACHMENT; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ ft. Area: 5+ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☑ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 6-12-80 to 6-13-80. Weather: Precip. 0 Temp. 85°.

OWNER: Harold Speth

Address: 6629 Aylesworth

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	35	6-12	4:10	6-13	4:10	6-13	4:30	6	8:30	5⅛	30	1⅜	
2	36	6-12	4:15	6-13	4:15	6-13	4:35	6	8:35	3⅛	30	1⅞	
3	34	6-12	4:20	6-13	4:20	6-13	4:40	6	8:40	0	30	1½	
4	36	6-12	4:25	6-13	4:25	6-13	4:45	6	8:45	4	30	2	
5	36	6-12	4:20	6-13	4:30	6-13	4:50	6	8:50	3⅛	30	1⅞	
6	35	6-12	4:35	6-13	4:35	6-13	4:55	6	8:55	⅞	30	1⅝	

Harold Speth
Signature of Person Conducting Test

Address 6629 Aylesworth Phone 464-3518

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: _____
Confirmed. 9/10/80

Approved Percolation Rate (a)
A. 17 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Wood
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 ☐

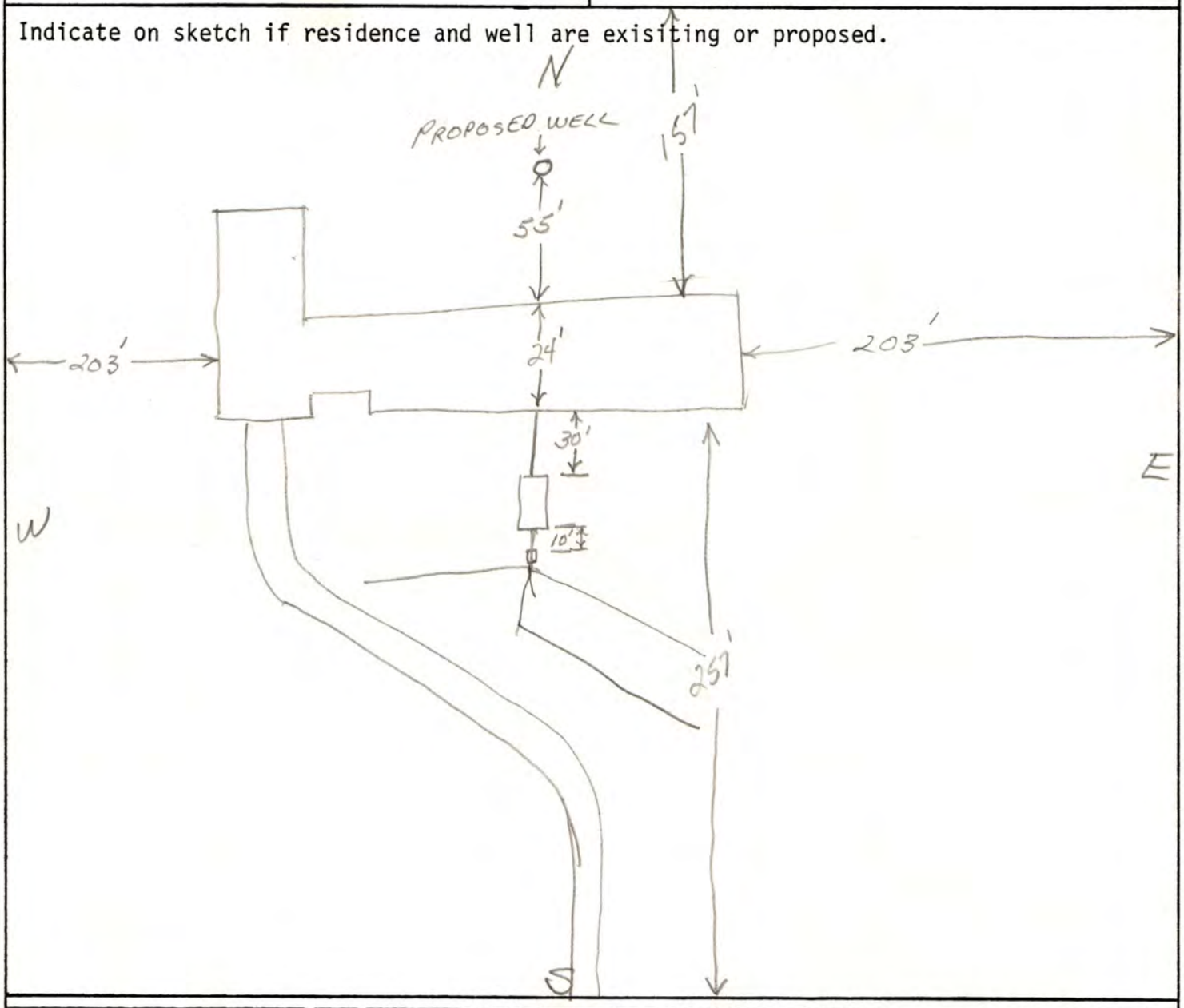
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

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



REVIEWING ACTION

Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 595 sq.ft.

Jerrold C. Hoot
Signature of Reviewing Official

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: _____

FILE NO. _____

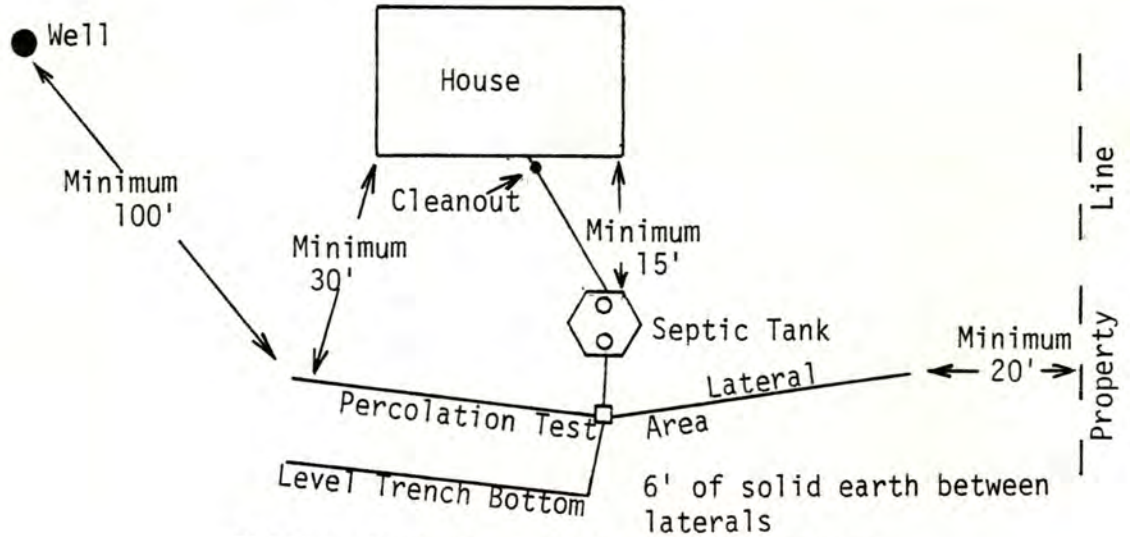
SPECIFICATIONS AS BUILT

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 _____ ft.
4. Number of clean-outs 1.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material CONCRETE. No. of compartments 1.
2. Capacity 1,000 gals.;
3. Factory Built: Yes ☐ No ☐
(Company PRE CAST STEP)
4. Manholes: Over Inlet; diam. 8 in.
Over Outlet; diam. 12 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 10 in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material CONCRETE; Number - available outlets 5.
2. Factory Built: Yes ☒ No ☐
(Company PRE CAST)
3. Distance from Septic Tank 4 ft.

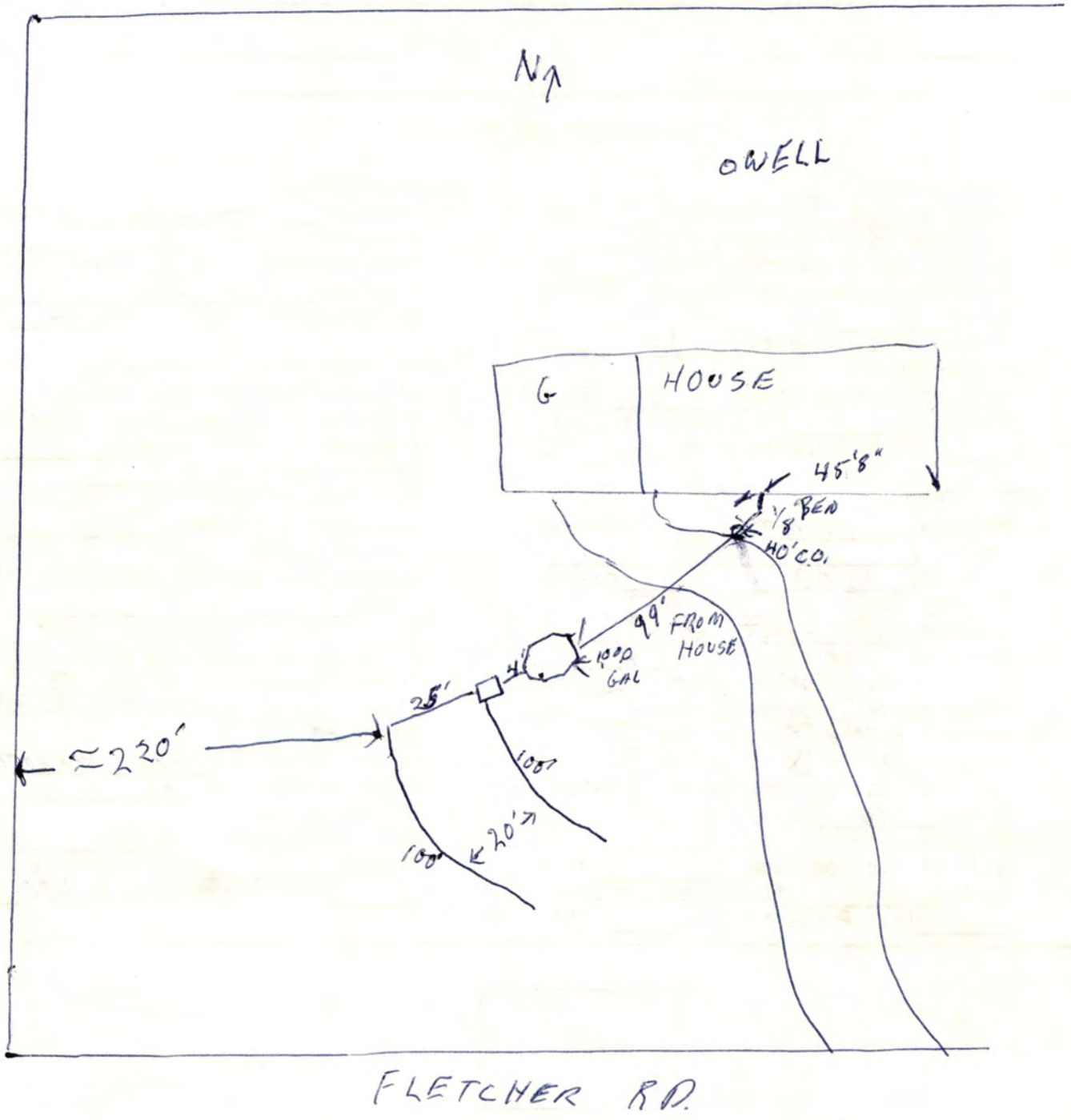
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or Perforated Pipe 4".
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 2; Length of each line 100, 100, _____, _____, _____ ft.;
Total length of laterals 200 ft.;
Distance between lateral lines 20 ft.
3. Trench dimensions: Width 3 ft.;
Slope 2.4 in/100 ft.; Average Depth 12 in.
4. Filter Material: ROAD GRAVEL
Depth of Material 12 in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 200 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 9-9-80 INSTALLER BRAD SOUTHWICK



A part of Lot 6, Irregular Tracts in the SW¼ Sec 34, T 11 N, R 8 E of the 6th P.M., more particularly described as follows: Commencing from the SW Corner, Sec 34, T 11 N, R 8 E of the 6th P.M., thence on a bearing of N 0°00'00" E, a distance of 33.00 feet; thence on a bearing of S 89°27'26" E, a distance of 470.02 feet to the point of beginning; thence on a bearing of N 0°00'00" W, a distance of 521.02 feet; thence on a bearing of N 90°00'00" E a distance of 423.00 feet; thence on a bearing of S 0°00'00" E a distance of 517.01 feet; thence on a bearing of S 89°27'26" W, a distance of 423.02 feet; to the point of beginning, situated in the County of Lancaster and State OF NEB.