LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1182-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

APRIL 3, 1978 — THIS PERMIT EXPIRES

WAYNE TROUT — ISSUED TO

WAYNE, NE 68462 — ADDRESS

T31N, R8E, Section 15 SE¼ — 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. 1182-C

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

DATE: Sept 30, 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. 11 N ; Range 8 E ; Section 15 SE 1/4
Block _____; Lot _____; Addition _____
Street Address _____

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

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

4. Distance to public sewer: 3000 ft. Est

Wayne A. Trout
Signature of Applicant (Owner or Lessee)

Waverly, Ne 68462
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/3/77. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 10/3/77. Signature: Jerrold E. Hood

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

3. City or County Engineer: Date Rec'd. Oct 1, 1977. ACTION: Approved ☒ Disapproved ☐
Date Frwd. Oct 3, 1977. Signature: Patricia Beeson

REMARKS OR REASONS FOR DISAPPROVAL 10/3/77 x Henry Graff

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. 1182-C

DATE: Sept 30, 1977

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. 11 N ; Range 8 E ; Section 15 SE¼ ; Block ; Lot ; Addition .
   Street Address .

2. Property Use: Residential Farm ☑; 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).

Wayne A. Trout
Signature of Applicant (owner or lessee)

Waverly, Ne 68462
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
   Date: by:
   Date: by:
   Date: by:

3. Date: Approved ☒; Disapproved ☐ 10/3/77
   by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: by:

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. 1182-C

PROPERTY WHERE SOIL TESTED:
Location: Township 11N : Range 8E
Section & ¼ Sect. 15 SE¼
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: Elmer Schlaphoff
Address: Waverly, NE 68462

Dates of Tests: Sept 29 1977 to Sept 30, 1977. Weather: Precip. ____ Temp. 65°

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	36	9-29	10:04	9-29	2:30	9-30	6:30	18 3/4	7:00	19 3/4	30	1	30
2	38	9-29	10:10	9-29	2:30	9-30	6:35	20 1/2	7:05	21 3/4	30	1 1/4	24
3	34	9-29	10:15	9-29	2:30	9-30	6:40	17 1/4	7:10	18 1/4	30	1	30
4	35	9-29	10:17	9-29	2:30	9-30	6:45	18 1/2	7:15	20	30	1 1/2	20
5	36	9-29	10:20	9-29	2:30	9-30	6:50	19 3/4	7:30	21	30	1 1/4	24
6	38	9-29	10:23	9-29	2:30	9-30	6:55	20 3/4	7:25	22 1/4	30	1 1/2	20

Sum of Percolation Rates: 148
Average of Rates: 24
Mean of Rates: 25

Wayne A. Trout
Signature of Person Conducting Test

Address Waverly Ne 68462
Phone 786-2915

(Do not write below this line)

REVIEWING ACTION

REMARKS: Sharpsburg Silty Clay Loam. (S.C.L.)

DATE: October 3, 1977

Approved Percolation Rate (a)
A. 24 min./inch
B. ____ min./inch
C. ____ min./inch

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. 1182-C

SPECIFICATIONS

DATE: Sept 30, 1977

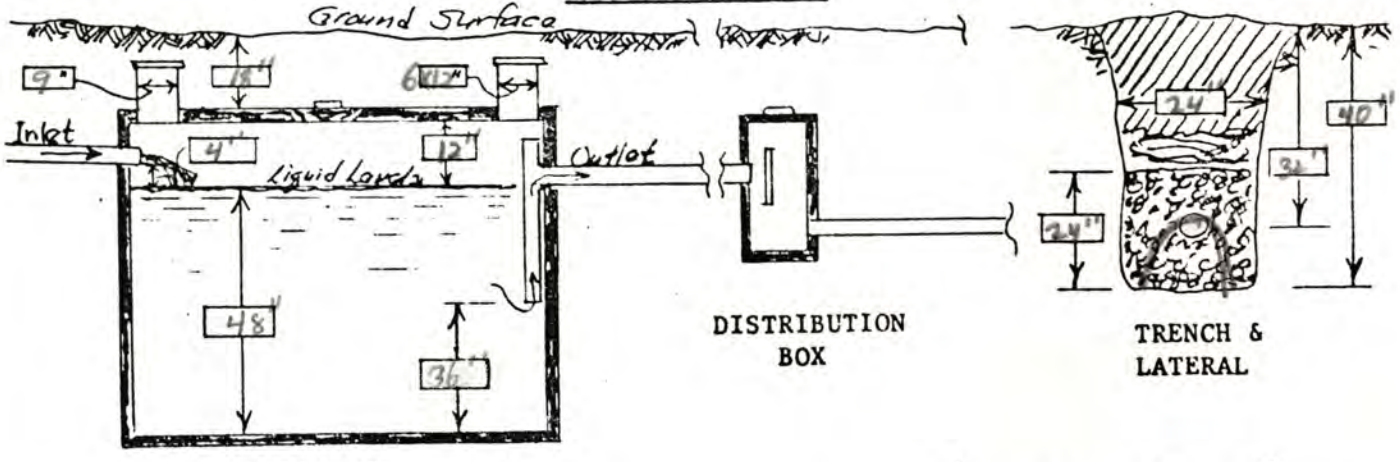
A. BUILDING SEWER: NA
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;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

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 48 in.
3. Factory Built: Yes ☒ (Company Pre-cast)
No ☐
4. Manholes: Over Inlet; diam. 9 in.
Over Outlet; diam. 6x12 in.
Below Grade 18 in.
5. Inlet: Baffle ☐; or Tee ☐ straight
6. Outlet: Baffle ☒; or Tee ☐
Depth of outlet below inlet 4 in.
7. Depth of top of tank below finished grade 18 in.
8. Distances To:
Well or Suction Line 300 ft.;
Stream NA ft.; Pressure Line 15 ft.;
Property Line 300 ft.

C. DISTRIBUTION BOX
1. Material concrete; No. available outlets 1.
2. Factory Built: Yes ☒, (Company Precast Precast) No ☐
3. Dimension: Length 24 in.; Width 16 in. Depth 10 in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes ☐, No ☒ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half Moon
2. Lateral Lines: Depth below grade 36 in. Number 2; Length of each line 100 ft Total length of Laterals 199 ft.; Slope 6 in/100 ft. Diameter of pipe 16 in.; Shape Half Round Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____ Distance between lateral lines NA ft.
3. Trench Dimensions. Depth 40 in.; Width 48 in.
4. Filter Material: Gravel. Depth of material from trench bottom 24 in.
5. Distances To:
Well or Suction Line 320 ft.;
Stream NA ft.; Pressure Line 30 ft.
Property Line 200 ft.
6. Percolation Rate: 24 minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

DISTRIBUTION BOX

TRENCH & LATERAL

Wayne A. Trout
Signature of Applicant