CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 17

INDIVIDUAL SEWAGE DISPOSAL SYSTEM
TYPE OF LICENSE OR PERMIT

February 2, 1968
THIS LICENSE OR PERMIT EXPIRES

Lloyd E. Tenney
LICENSEE OR PERMITTEE

4240 Mohawk
ADDRESS

T 10; R 6E; Sect 2; Lot G
811 Pinetree Lane
(Legal Description of Location)
NAME OF ESTABLISHMENT, IF ANY ADDRESS

REMARKS: Non-Transferable

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
143-1535	10.0116	24.0114	6-2

SERIAL NO.	DATE	AMOUNT
01737	AUG 2 67	30.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

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. 17

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: Twp. 10; Range 6E; Section 2;
Replat of Lot 4 & 5 Block ___; Lot G; Addition Grandview Heights;
Street Address 811 Pinetree Lane.

2. Property Use: Residential ___ [x]; Commercial ___ [ ]
No. of Bedrooms 4. Describe: ___
Other Use ___ [ ]
Describe: ___

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

4. Distance to public sewer: Approx 1200 ft.

L. E. Tenney
L. E. Tenney
Signature of Applicant (owner or lessee)

4240 Mohawk
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8-2-67. ACTION: Approved ___ [✓] Disapproved [ ]
Date Frwd. 8-2-67. Signature: D. Weed

2. Supt. Bldg. Insp.: Date Rec'd. ___. ACTION: Approved ___ [✓] Disapproved [ ]
Date Frwd. ___. Signature: Chas Steele

3. City Engineer: Date Rec'd. 8-2-67. ACTION: Approved ___ [✓] Disapproved [ ]
Date Frwd. 8-2-67. Signature: Richard F. Thomas

REMARKS OR REASONS FOR DISAPPROVAL ___

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

Date Applicant Notified: 8-2-67 Signature Del Weed

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. 17

DATE: 7-27-67

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. 10; Range 6E; Section 2;
Replat of Lot 4 & 5 Block ____; Lot G; Addition ____;
Grandview Heights Street Address 811 Pinetree Lane.

2. Property Use: Residential ____ [x]; Commercial ____ [ ]
No. of Bed Rooms 4 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.)

L. E. Tenney

L. E. Tenney
Signature of Applicant (owner or lessee)

4240 Mohawk
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: 8-2-67
Filing Fee: $30.00.

2. Date Site Clearance ____

3. Site Visits:
Date: 10/13 by: J. C. H.
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved 4; Disapproved ___: ____
by: [illegible]

5. BUREAU OF LICENSES & PERMITS
Date Notified: 8-2-67
Date Issued: 8-2-67 Serial ____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/13/67 by: Jerrold C. Hoob

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. 17

PROPERTY WHERE SOIL TESTED:
Location: Township 10
Section & ¼ Sect. 2
Property Dimensions: 300 ft. x 600 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: L. E. Tenney
Address 811 Pine Tree Lane

Dates of Tests: August 1, 1967 to August 1, 1967. Weather: Precip. ____ Temp 83° F.

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				
Hole 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"	8-1	Noon	8-1	4 PM	8-1	4 P.M.	22"	30 min	21" +	30 min		
2	36"	"	"	"	"	"	"	22"	"	21"	30 min		
3	36"	"	"	"	"	"	"	21"	"	20"-	"		
4	36"	"	"	"	"	"	"	21"	"	16" +	"		
5	36"	"	"	"	"	"	"	22"	"	21" +	"		
6	36"	"	"	"	"	"	"	22"	"	[redacted]	"		

James N. Johnson - 488-3000
Signature of Person Conducting Test

Address 4240 Mohawk
Phone: 488-6288

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: Results appear to be satisfactory.

Approved Percolation Rate(s)
A. 30 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: 8-2-67

Signature of Reviewing Official

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. 17

SPECIFICATIONS

DATE: July 28, 1967

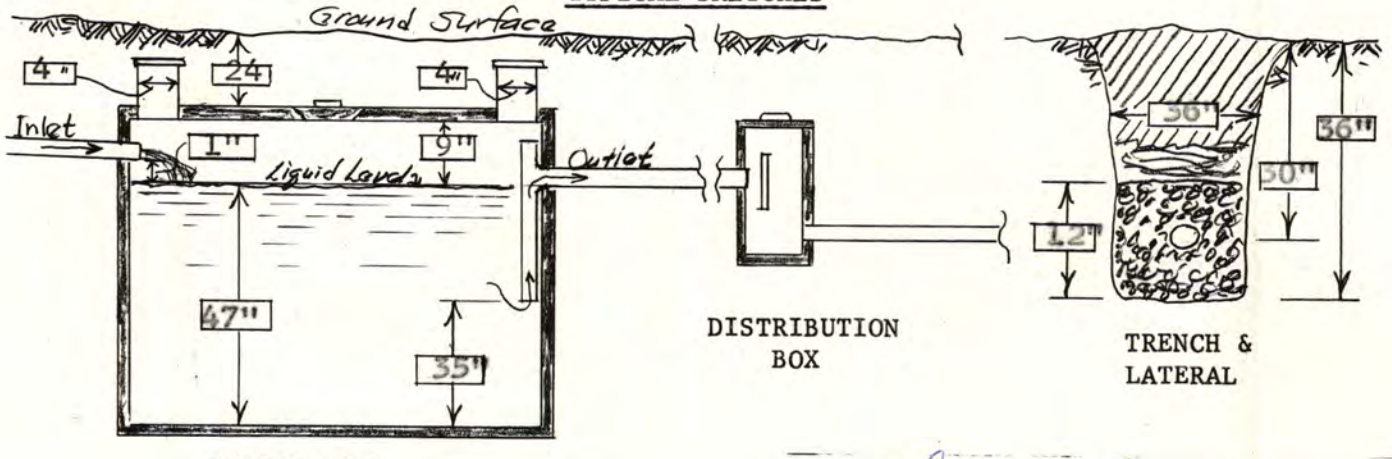
A. BUILDING SEWER: CAST IRON
1. Material ~~Tile~~; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor ___ in.
3. Distance between dwelling and septic tank 30 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line 31 ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 47 in.
3. Factory Built: Yes [X] (Company Precast) No [ ]
4. Manholes: Over Inlet; diam. -- in.
Over Outlet; diam. -- in.
Below Grade 24 in.
5. Inlet: Baffle [ ]; or Tee [ ]
6. Outlet: Baffle [ ]; or Tee [X]
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 24 in.
8. Distances To:
Well or Suction Line 500 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line 28 ft.

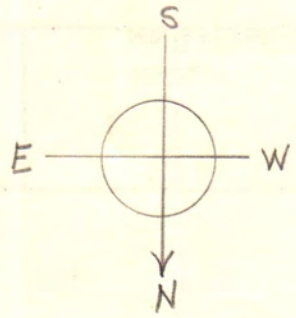
C. DISTRIBUTION BOX ~~None~~
1. Material CONCRETE; No. available outlets 5.
2. Factory Built: Yes [X], (Company PRE-CAST STEP No [ ]
3. Dimension: Length 16 3/4 in.; Width 9 in. Depth 12 in.
4. Distance from Septic Tank 3 3/4 ft.
5. Serial Distribution: Yes [X], No [ ] (If yes, show detailed plans.)

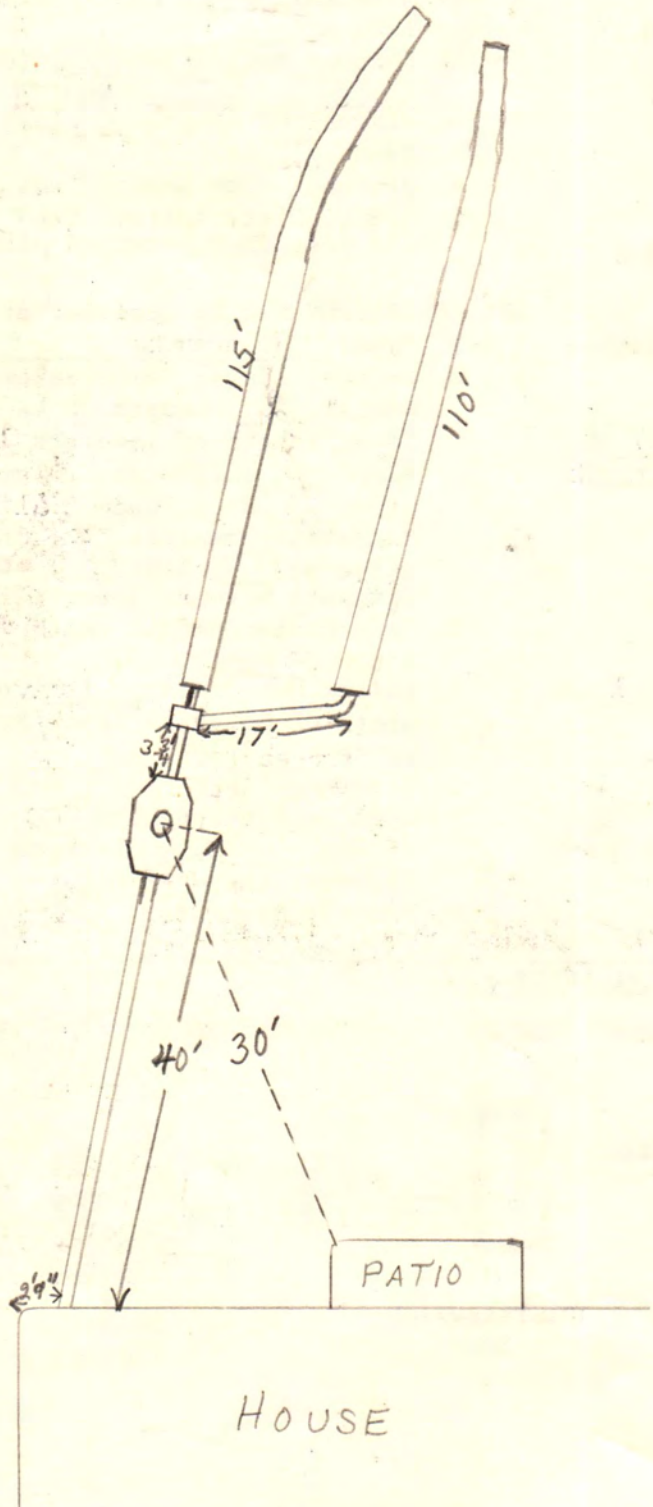
D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Concrete
2. Lateral Lines: Depth below grade 36 in. Number 2; Length of each line 100 ft Total length of Laterals 225 ft.; Slope 6 in/100 ft. Diameter of pipe 24 in.; Shape Half round Material: concrete [X]; fiber asbestos [ ]; clay [ ]; other ___ Distance between lateral lines 17 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 500 ft.;
Stream ___ ft.; Pressure Line 59 ft.
Property Line 28 ft.
6. Percolation Rate: 30 minutes/inch

TYPICAL SKETCHES



L E Tenney
Signature of Applicant


S
E
W
N


115'
110'
17'
3'
Q
40'
30'
PATIO
HOUSE