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. 1704

DATE: 9-23-80

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. 10N; Range 6E; Section 14 So½;
   Block 8: Lot No½ 11 & 12: Addition Riverside add
   Street Address 1301 Virginia

2. Property Use: Residential ☐ ; Commercial ☒ Other Use ☐
   No. of Bedrooms _____. Describe offices & Parts

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

4. Distance to public sewer: 3 blks ft.

J. De Freece Auto Parts
Signature of Applicant (Owner or Lessee)

2201 No 14th Lincoln Ne 68508
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/23/80. Date Frwd. 9/24/80. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 9/24/80. Date Frwd. 9/24/80. ACTION: Approved ☐ Disapproved ☐ Signature: Dale J Stuf

3. City ~~or County~~ Engineer: Date Rec'd. 9-24-80 Date Frwd. 9-24-80 ACTION: Approved ☒ Disapproved ☐ Signature: Al Imig

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11/7/80 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11/7/80 By: Jerrold C. Hood

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

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
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B

FILE NO. 1704

PROPERTY WHERE SOIL TESTED:

Location: Township 10 N; Range 6 E; Section & ¼ Section 14 S½.
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: 9-22-80 to 9-23-80. Weather: Precip. NO Temp. 70.

OWNER: Jim DeFresco
Address: 2201 No 14th Lin

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	9-22	8	9-22	12	9-23	11	6	12	2¾	60	[illegible]	18

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

Smith Bros Co.
Signature of Person Conducting Test

Address 6710 No 7th Phone 475-1484

(Do not write below this line)

REVIEWING ACTION

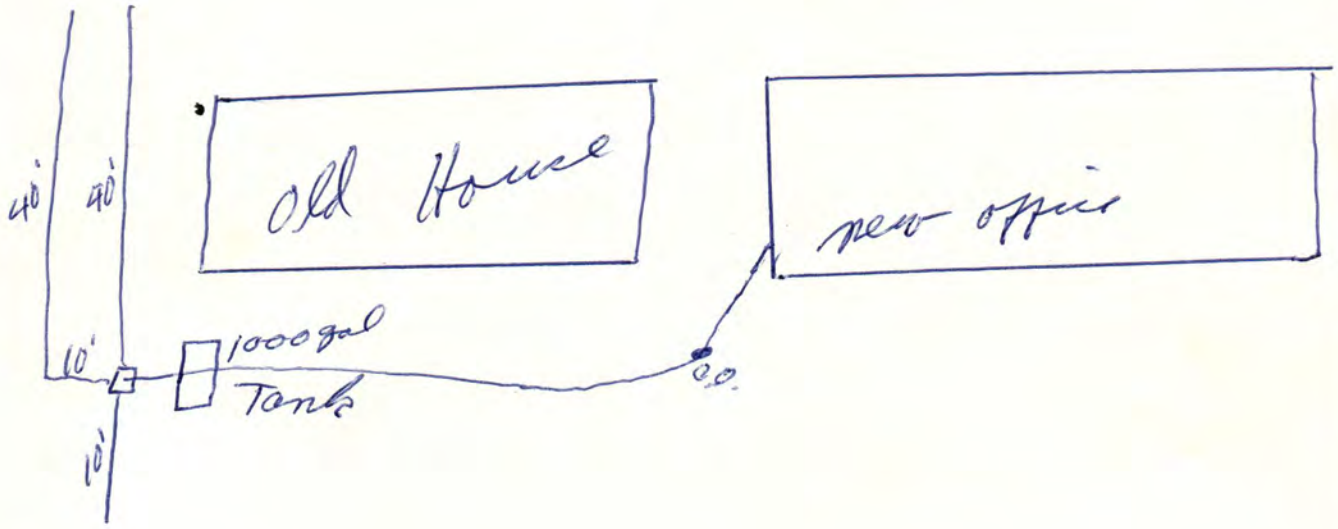
Remarks: _____
Soil Type (SCS): Kennebec Urban Complex
Date: September 23, 1980

Approved Percolation Rate (a)
A. 18 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
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.	FILE NO. 1704

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



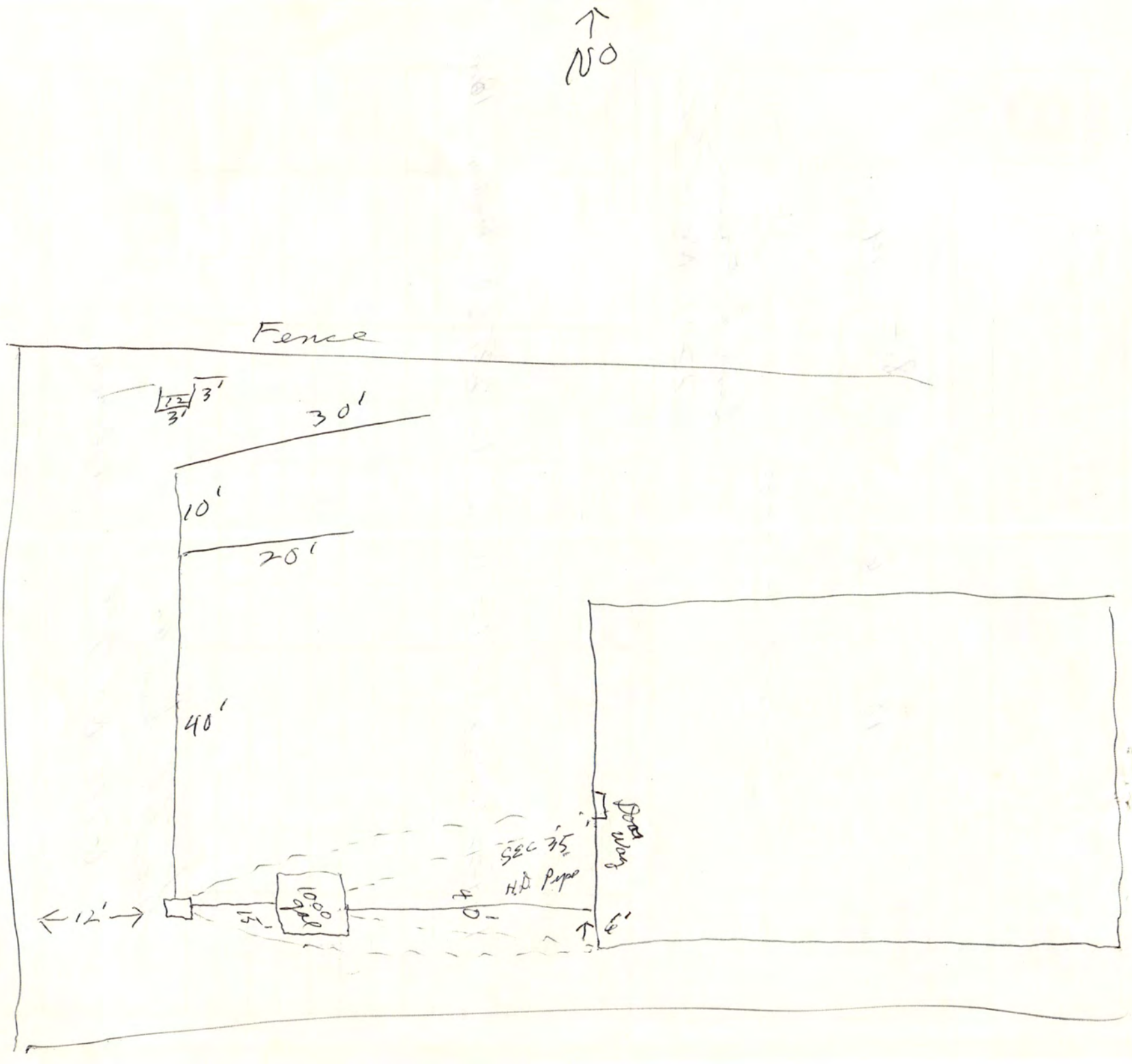
REVIEWING ACTION

Remarks: _____

Date: September 23, 1980

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 31 ft.
3. With a Trench Width of 36 in.
4. Total Area of Lateral needed 92 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official


NO
Fence
12'
3'
3'
30'
10'
20'
40'
12'
10'
Sec 35
H.D. Pipe
4'
Door Way