CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 1521

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

October 27, 1979
THIS LICENSE OR PERMIT EXPIRES

Dan Benes, R.R. 5, Lincoln, NE
LICENSEE OR PERMITTEE — ADDRESS

T11N, R7E, Section 00, Lot 6 I.T. (S.D. #109)
NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: (NON-TRANSFERABLE)

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ No. Fee	$	$	$	$ No Fee

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
110.15	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
	4/24/79	No Fee

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

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

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: $ No fee

FILE NO. 1521

DATE: 4-26-79

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. 11N ; Range 7E ; Section 30 ; Block _____ : Lot 6 int Tract : Addition _____
   Street Address _____

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

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

4. Distance to public sewer: _____ ft.

Dan Benes
Signature of Applicant (Owner or Lessee)

RR 5 No 14th Dist 109
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/26/79. Date Frwd. 4/27/79. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 4/27/79. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Gary Sherwood

3. City or County Engineer: Date Rec'd. 4-27-79. Date Frwd. 4-27-79. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: Oct 1, 1979 by: jw
Date: Oct 1, 1979 by: jw
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: Oct 1, 1979 By: James Weverka

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
Division of Environmental Health
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B

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PROPERTY WHERE SOIL TESTED:

Location: Township 11 ; Range 7 ; Section & ¼ Section 30 .
Property Dimensions: _____ ft. x _____ ft. Area: 1 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 4-19-79 to 4-20-79. Weather: Precip. _____ Temp. _____.

OWNER: Dan Benes

Address: RR5 Dist 109

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		Elaps-	Water	Perco-
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.)	ed Time (Min.)	Level Drop (in.)	lation Rates (Min./in.)
1	24"	4-19	1 PM	4-19	5 PM	4-20	3:30	6	4:30	4¾	60	1/4	
		↓											
2		↓				↓		↓		4⅜		1/8	
3										4⅝		1⅜	
4										4¾		1/4	
5										4⅞		1/8	
6										5		1"	

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

Smith Serv Co.
Signature of Person Conducting Test

Address 7425 Ash St Phone 475-1486

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Crete Silt Loam
Date: April 26, 1979

Approved Percolation Rate (a)
A. 5 1 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold 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 ☐

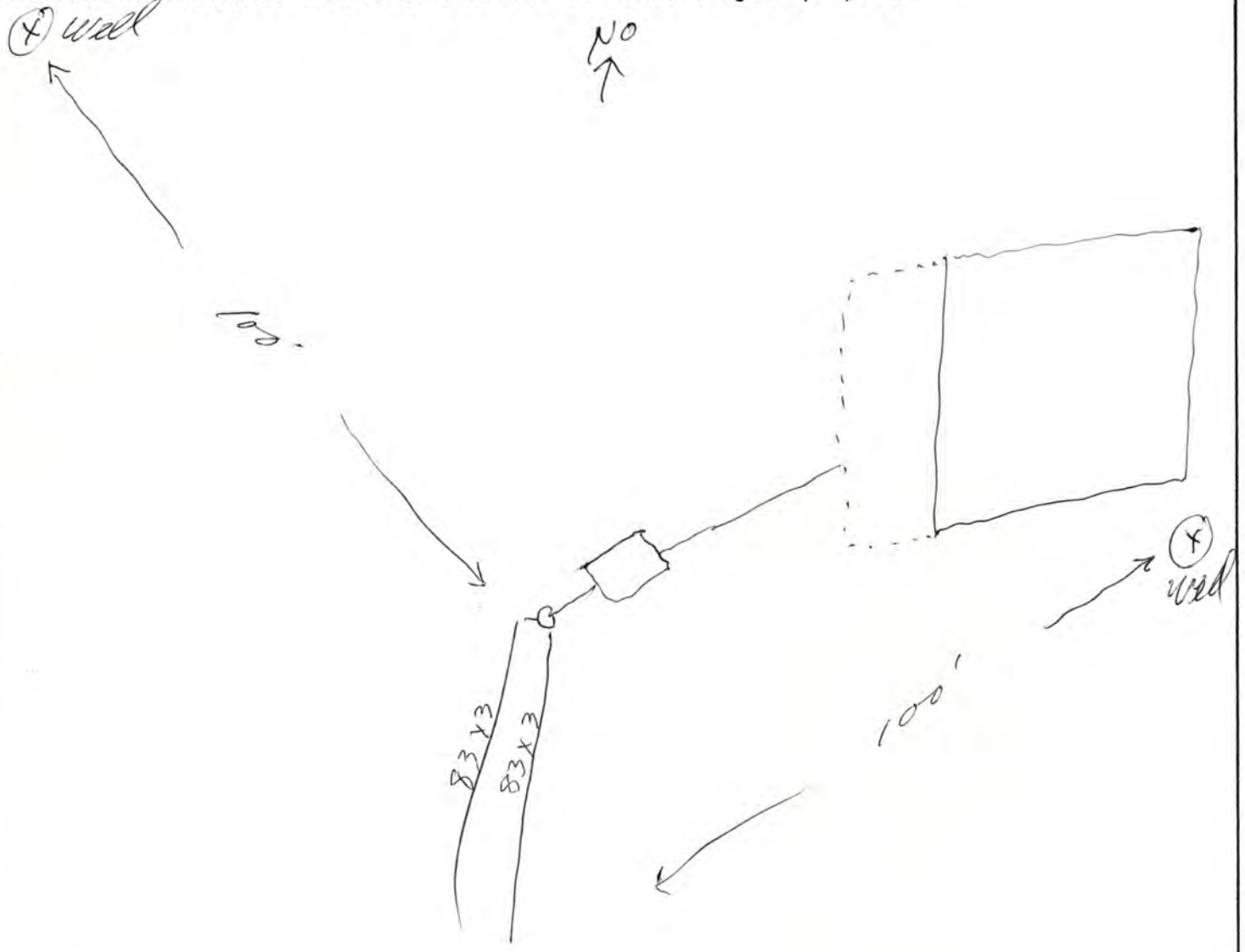
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

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



REVIEWING ACTION

Remarks: _____

Date: April 26, 1979

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 166 ft.
3. With a Trench Width of 36 in.
4. Total Area of Lateral needed ~~498~~ 498 sq.ft.

Jerrold C. Hood
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: Oct 1 79

FILE NO. _____

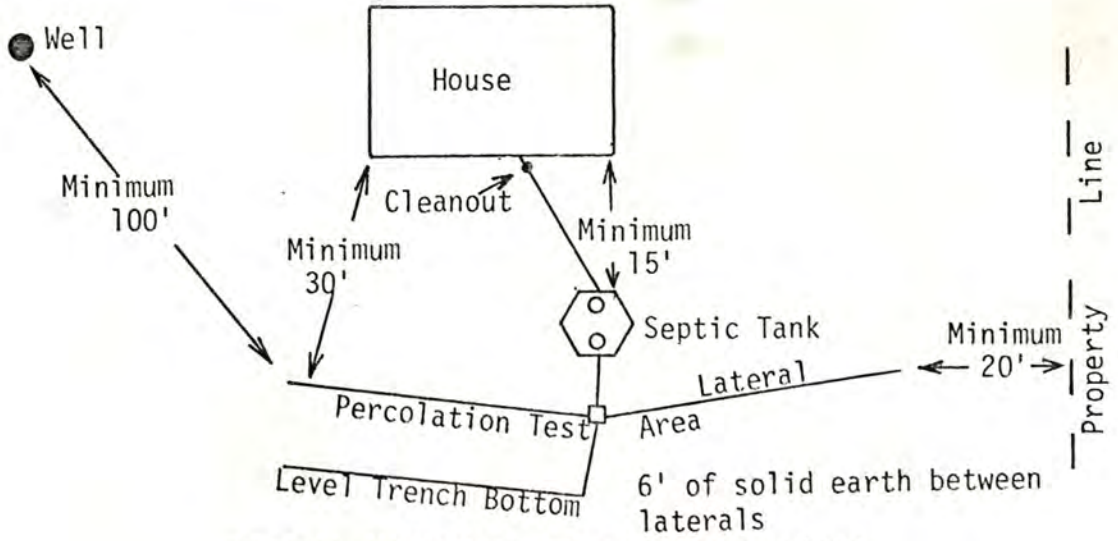
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 18 in.
3. Distance between dwelling and septic tank 36 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 _____ .
2. Capacity _____ gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre Cast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ 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 18 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 _____ .
2. Factory Built: Yes ☒ No ☐
(Company Pre Cast)
3. Distance from Septic Tank _____ ft.

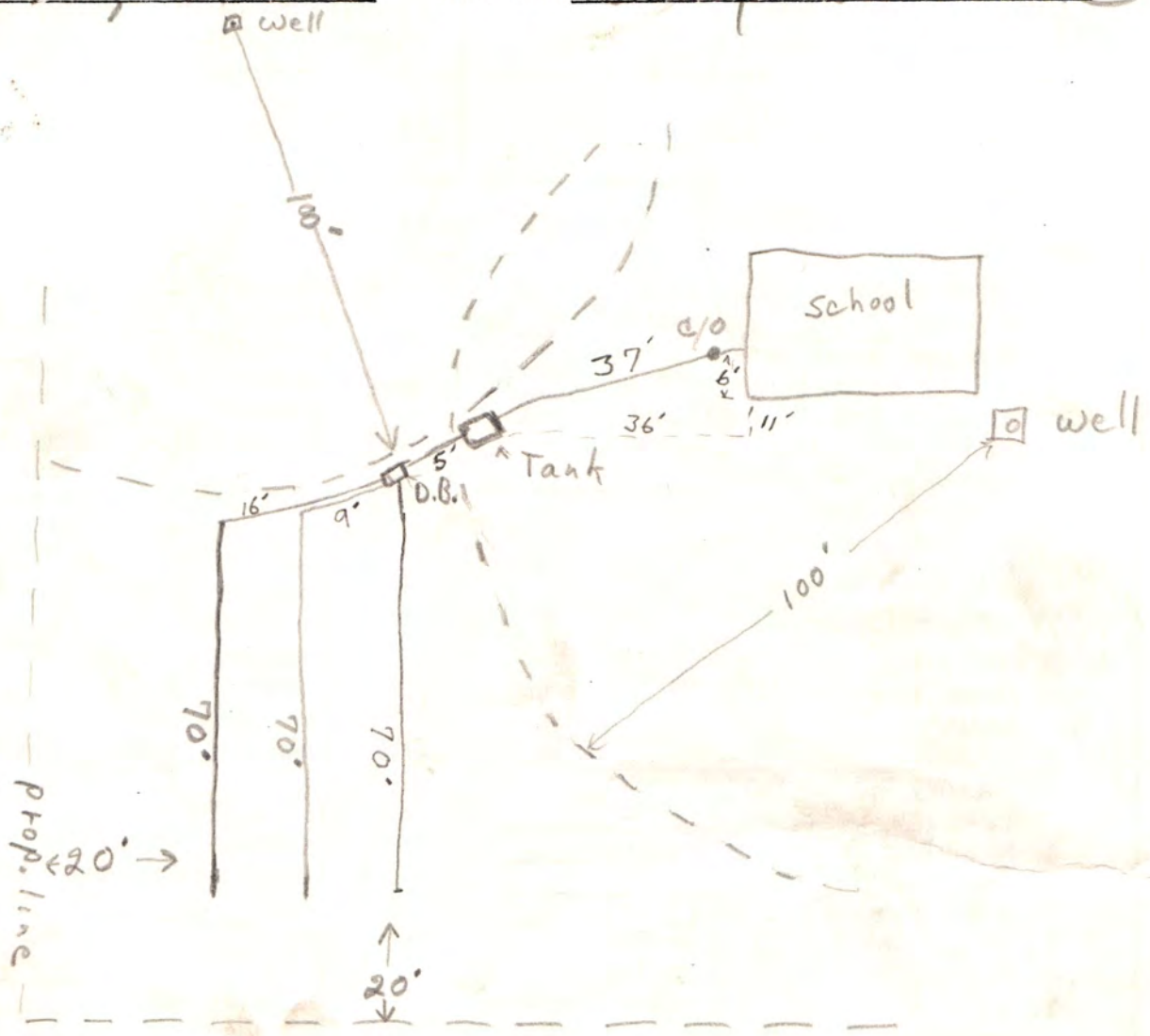
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or
Perforated Pipe 4 " .
Material: fiberglass ☐ ; plastic ☒ ;
concrete ☐ ; other _____ .
2. Lateral Lines:
Number 3 ; Length of each line 70 , 70 , 70 , _____ , _____ ft.;
Total length of laterals 210 ft.;
Distance between lateral lines 8 ft.
3. Trench dimensions: Width 36 ft.;
Slope 3 in/100 ft.; Average Depth 42 in.
4. Filter Material: Road Gravel
Depth of Material 14 in.
5. Distances to:
Well or Suction Line 100 ft.;
Stream _____ ft.; Pressure Line _____ ft.; Property Line 20 ft.

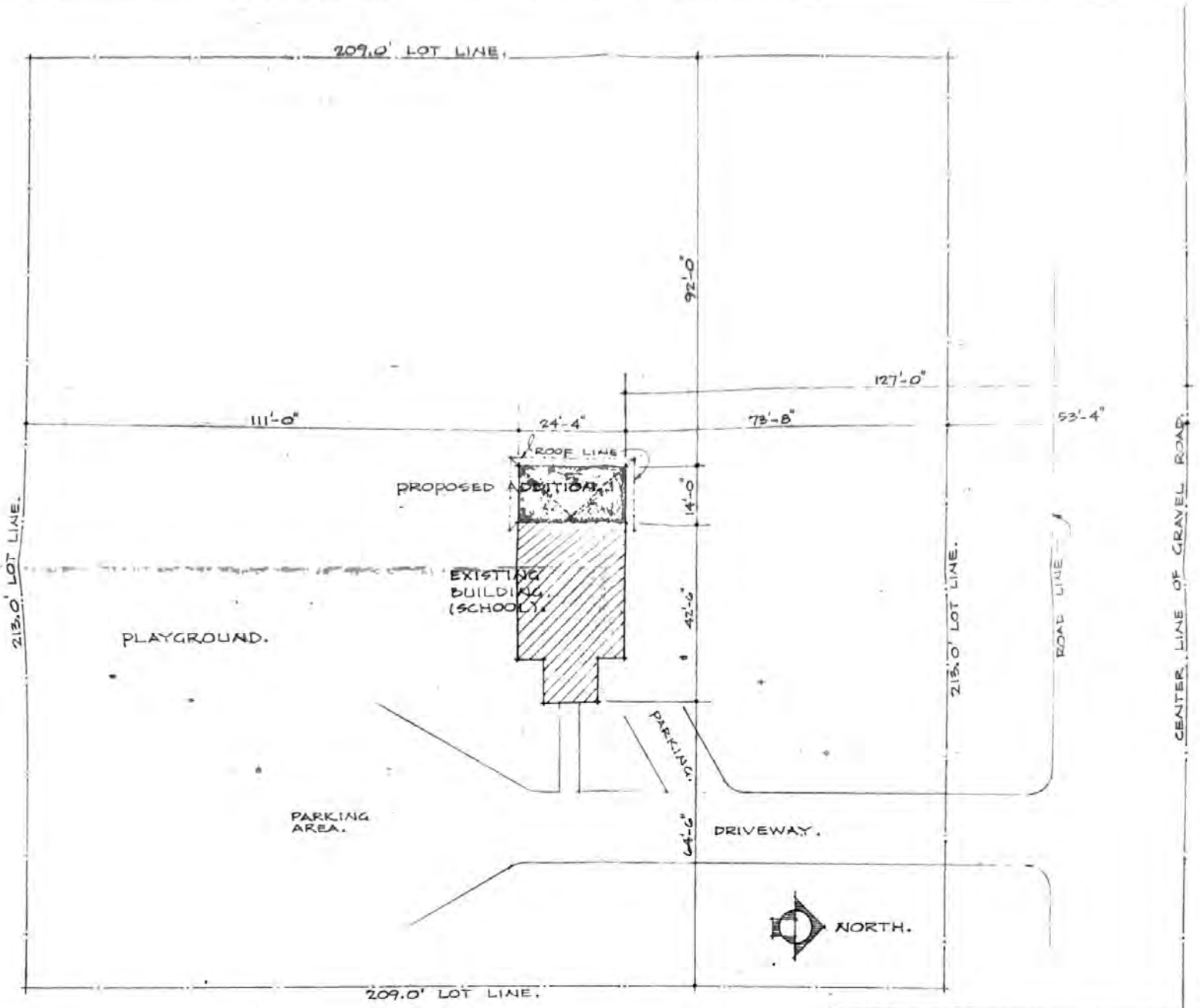


TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE Oct. 1, 79 INSTALLER Larry Schwarck





SCALE 1/4"=1'-0"	SITE PLAN.
DATE 6.6.79	A NEW RESIDENCE FOR SCHOOL DISTRICT #109
LYLE O'HARE. BUILDER	
SHEET 1 OF 6	PERSONS ACCEPTING THESE PLANS AGREE TO PURCHASE LUMBER, MILLWORK AND RELATED MATERIALS FROM EARL CARTER COMPANY
JOB NO. COMM.	