FILE NO. 274

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

December 14, 1972
THIS LICENSE OR PERMIT EXPIRES

Scott Brown, RFD, Roca (Texaco Station)
LICENSEE OR PERMITTEE

ADDRESS

T10N, R6E; Sec. NE 1/4 of 29; Lot 80 I.T.
NAME OF ESTABLISHMENT, IF ANY

EXTEND
ADDRESS

LEGAL DESCRIPTION

REMARKS: Non-Transferable

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

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

SERIAL NO.	DATE	AMOUNT
624-1535		

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-31(67) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 274

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

DATE: _____

The undersigned hereby applies for a permit to ALTER ☒, EXTEND ☒, or REPAIR ☐ an existing Individual Sewage Disposal System, in conformance with Lincoln City Ordinance No. 9150, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 10N; Range 6E; Section NE¼29;
Block _____; Lot 8 OL; Addition _____;
Street Address _____

2. Property Use: Residential _____ ☐; Commercial _____ ☒
No. Bedrooms _____ Describe SERVICE STATION
Other Use ☐
Describe _____

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

4. Description of proposed alteration, extension or repair: ADD 100' FEET OF ORANGEBURG LATERAL AND DISTRIBUTION BOX.

5. Work to be done by: Owner ☐; or Contractor ☒, SINTEK SERVICE
Contractor's Name

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$ 700	00 EST.

S B Dean
Signature of Applicant (owner or lessee)

Texaco Inc., R.F.D. Roca
Address

(Do not write below this line)

REVIEWING ACTION

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

2. Date Site Clearance: _____

3. Site Visits:
Date: 5/18/72 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved ☒; Disapproved ☐
by: Jerrold C. Hood

5. BUREAU OF LICENSES & PERMITS
Date Notified: _____
Date Issued: _____ Serial _____

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6/14/72 by: L.C.H.

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. _____

PROPERTY WHERE SOIL TESTED:
Location: Township _____
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: Texaco Inc
Address Municipal Airport Interchange + I-80 3001 West O

Soil Type: Silty Clay [ ]; Silty Clay Loam [X]; Sandy Loam [ ]
Silty Loam [ ]; Clay Loam [ ]; Sandy Clay [ ]

Dates of Tests: 4/30/72 to 5/1/72. Weather: Precip. Cldy Temp. 60°F.

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
Hole No.	Hole Depth (in.)	Pre-Saturation Period Start Date (Mo. Day)	Start Time (Hr. Min.)	End Date (Mo. Day)	End Time (Hr. Min.)	Percolation Readings Start Date (Mo. Day)	Start Time (Hr. Min.)	Start Water Level (in.)	End Time (Hr. Min.)	End Water Level (in.)	Results Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	32	5-1	8A	5-1	12	5-2	8:30	6	9	5½	30	½	
2	32	5-1	8A	5-1	12	5-2	8:30	6	9	5	30	1	
3	32	5-1	8A	5-1	12	5-2	8:30	6	9	5¼	30	¾	
4	32	5-1	8A	5-1	12	5-2	8:30	6	9	5½	30	½	
5	32	5-1	8A	5-1	12	5-2	8:30	6	9	5	30	1	
6	32	5-1	8A	5-1	12	5-2	8:30	6	9	5	30	1	

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

Signature of Person Conducting Test Sally Jennings

Address
Phone: Robert L Dell

(Do not write below this line)

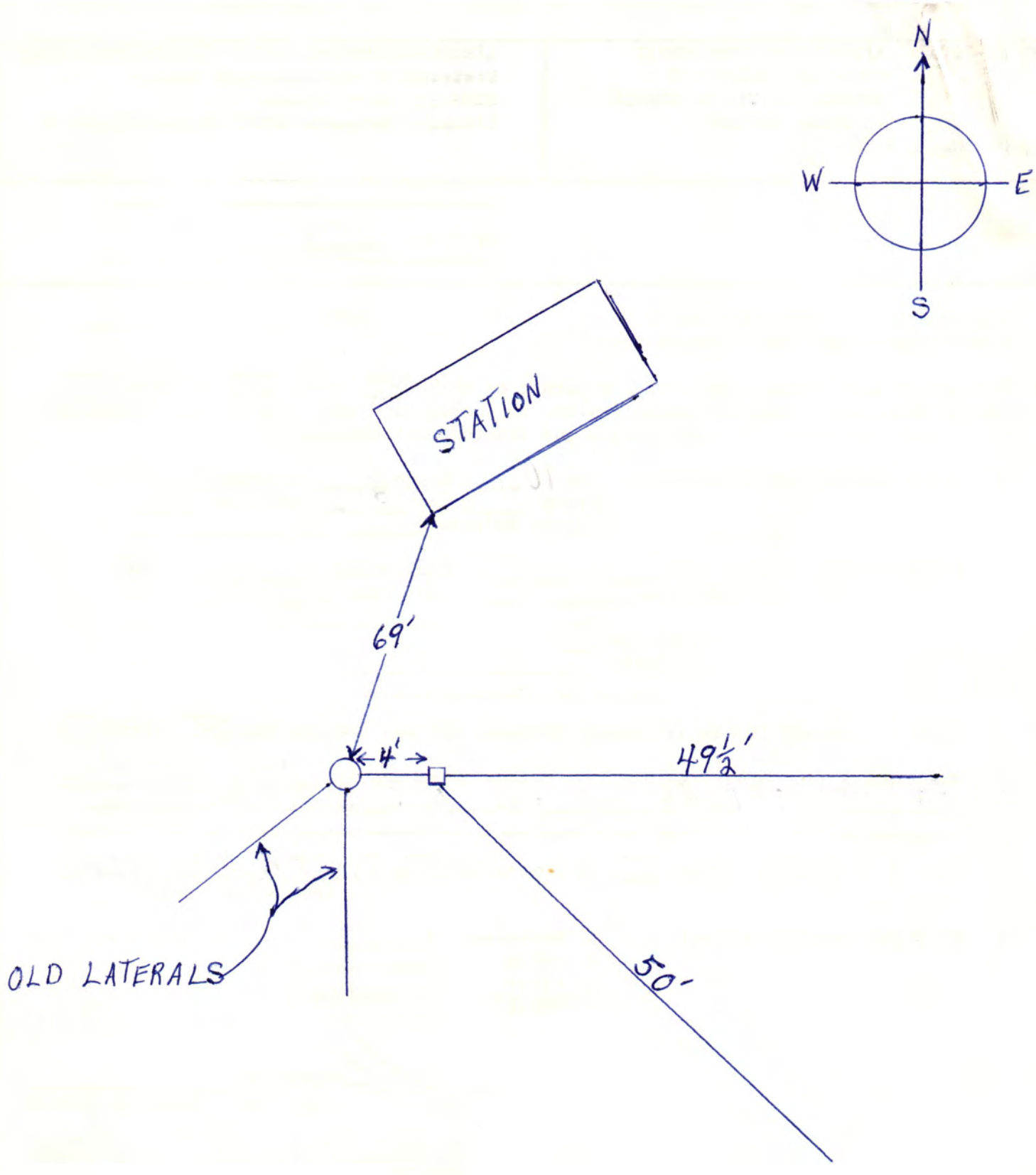
REVIEWING ACTION

REMARKS: _____

DATE: _____

Approved Percolation Rate(s)
A. 38 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official


N
W
E
S
STATION
69'
4'
49½'
OLD LATERALS
50'