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. 452-C

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

DATE: _____

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. 11N ; Range 7E ; Section 17
Block _____; Lot I, I, 16 ; Addition _____
Street Address _____

2. Property Use: Residential _____ [X] ; Commercial _____ ☐
No. of Bedrooms 3 . Describe: _____
Other Use _____ ☐
Describe: _____

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

4. Distance to public sewer: _____ ft.

Theodore Rutt
Signature of Applicant (Owner or Lessee)

3820 No 13th
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 6/3/74 . ACTION: Approved ☒ Disapproved ☐
Date Frwd. 6/3/74 . Signature: Jerrold C. Wood

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

3. City or County Engineer: Date Rec'd. 6-3-74 . ACTION: Approved ☐ Disapproved ☐
Date Frwd. 6-3-74 . Signature: Henry Graff Dep.

REMARKS OR REASONS FOR DISAPPROVAL _____

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

Dick Arnold

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. 452-C

DATE: _____

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. 11N ; Range 7E ; Section 17 ; Block ; Lot I.T. 16 ; Addition .
Street Address .

2. Property Use: Residential [X]; Commercial [ ]
No. of Bedrooms 3
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-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).

Sheldon Rutt
Signature of Applicant (owner or lessee)

3820 No 13th
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: Nov-20-74 by:

3. Date: Approved [X]; Disapproved [ ] 6/3/74
by: Jerrold C. Head

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: Nov-20-74 by: Ron Maynard

432-3819

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 475-6221)

FILE NO. 452-C

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

Owner: Rhodare Rutt
Address 3820 No 13th

Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☒; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: June 1-71 to 6-2-74. Weather: Precip. 0 Temp. 70°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"	6/1	3:30 PM	6/2	11:30 AM	6/2	11:30 AM	12"	1:30 PM	3½	30	3	
2	"	"	"	"	"	"	"	"	"	5	"	2½	
3	"	"	"	"	"	"	"	"	"	3	"	2	
4	"	"	"	"	"	"	"	"	"	7½	"	2½	
5	"	"	"	"	"	"	"	"	"	8½	"	1½	
6	"	"	"	"	"	"	"	"	"	2½	"	2½	

Robert D Johnson
Signature of Person Conducting Test

Address 2618 no 3rd
Phone: 432 3595

Sum of Percolation Rates
Average of Rates: 2.167
Mean of Rates:

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 14 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: June 3, 1974

Jerrold C. Hood R.S.
Signature of Reviewing Official



#44

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. 452-C

SPECIFICATIONS

DATE: _____

A. BUILDING SEWER:

1. Material PVC; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor ___ in.
3. Distance between dwelling and septic tank 15+ ft.
4. Number of clean-outs 1.
5. Distances To:
   Well or Suction Line 100+ ft.;
   Stream 10+ ft.; Pressure Line 10+ ft.;
   Property Line 20+ ft.

B. SEPTIC TANK (Provide construction drawings.)

1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 51 in.
3. Factory Built: Yes ☒ (Company Precast Step) No ☐
4. Manholes: Over Inlet; diam. 6 in.
   Over Outlet; diam. 6 in.
   Below Grade ___ in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☒
   Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 20 in.
8. Distances To:
   Well or Suction Line 50+ ft.;
   Stream 25+ ft.; Pressure Line 25 ft.;
   Property Line 20+ ft.

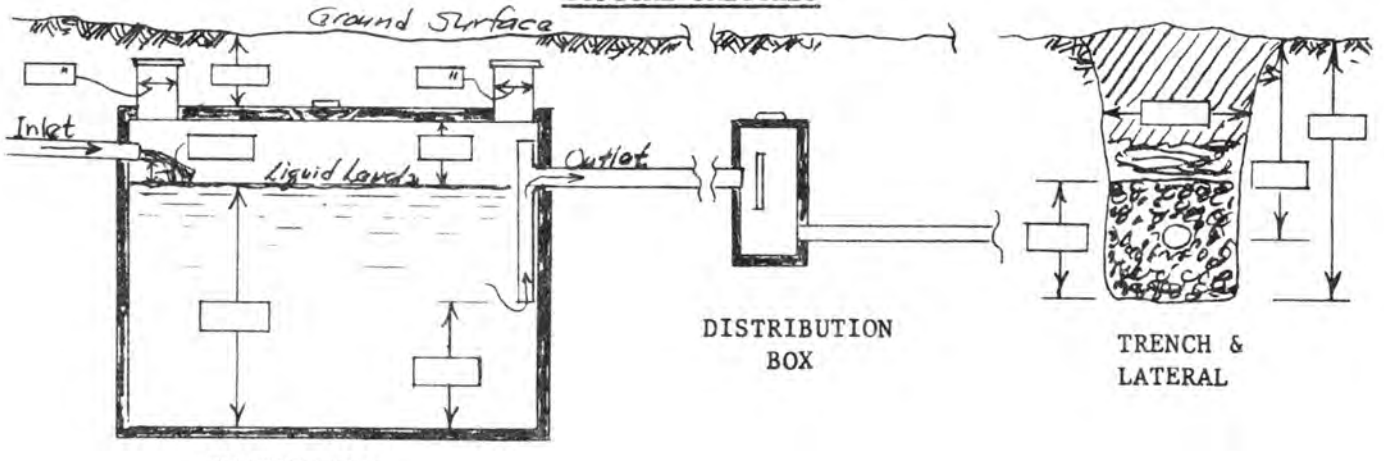
C. DISTRIBUTION BOX

1. Material Precast; No. available outlets 6.
2. Factory Built: Yes ☒, (Company Precast Step Co) No ☐
3. Dimension: Length 24 in.; Width 18 in. Depth 18 in.
4. Distance from Septic Tank ___ ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

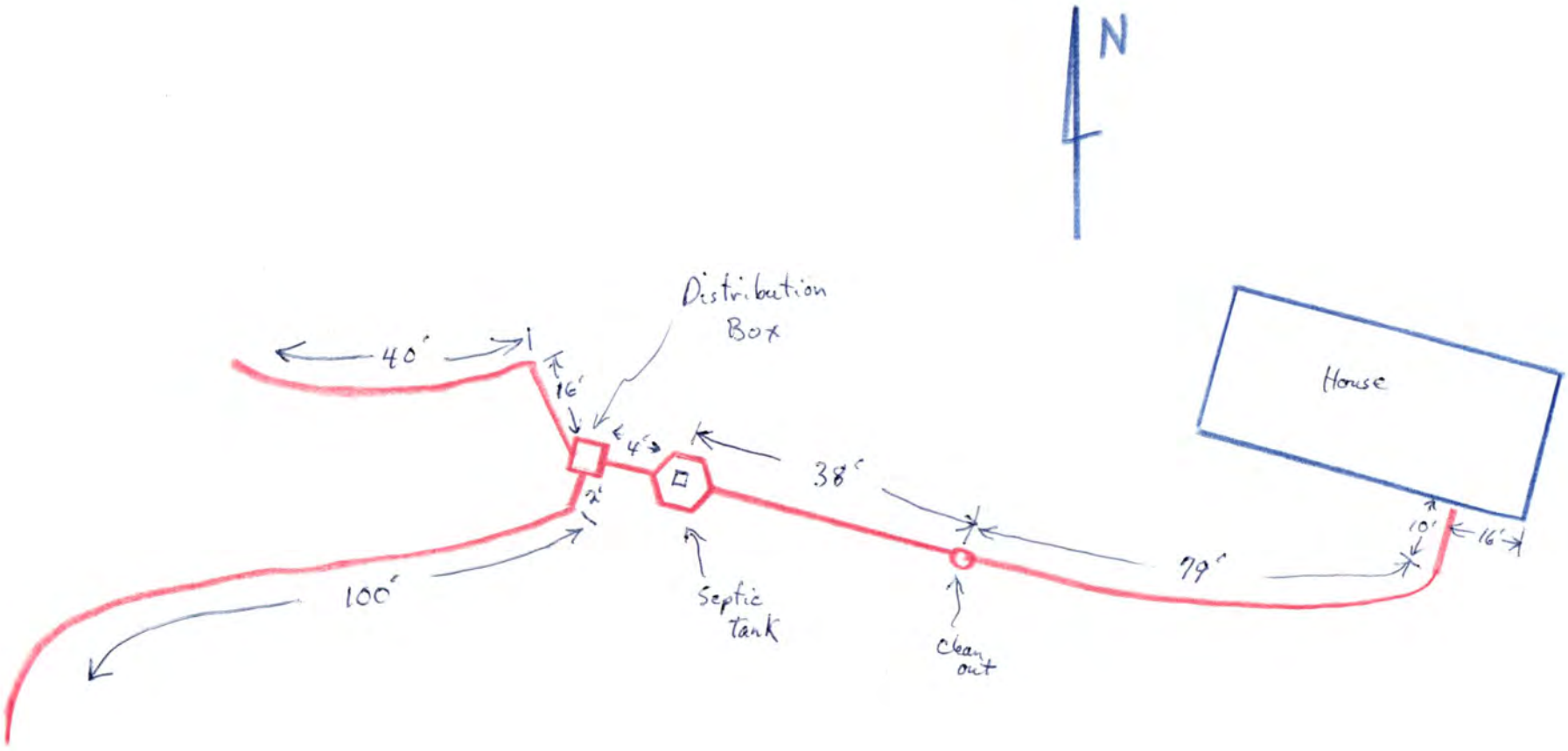
D. ABSORPTION FIELD: (Provide drawings.)

1. Type: Half moon
2. Lateral Lines: Depth below grade 24 in. Number 2; Length of each line 100+ ft Total length of Laterals 139 ft.; 40+ Slope ≤ 6 in/100 ft. Diameter of pipe 12 in.; Shape Half moon Material: concrete ☒; fiber asbestos ☐; clay ☐; other ___ Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth ___ in.; Width 48 in.
4. Filter Material: Road Gravel. Depth of material from trench bottom 20 in.
5. Distances To:
   Well or Suction Line 100+ ft.;
   Stream 50+ ft.; Pressure Line 30+ ft.
   Property Line 20+ ft.
6. Percolation Rate: 14 minutes/inch

TYPICAL SKETCHES



Signature of Applicant


N
Distribution Box
40'
16'
4'
38'
House
2'
10'
16'
100'
79'
Septic tank
Clean out

Nov-20-74