LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health

2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE SYSTEM REPAIR

No. 91390022901

Issued 04/30/91
Expires 10/30/91

ESTABLISHMENT

MARK SOUTHWICK
T10N R6E SEC 31
HIGH RIDGE ACRES BLK 2 LOT 3
4601 W A STREET

FEES: Permit 018754 $50.00

Total $50.00

PERMITTEE

MARK SOUTHWICK
1020 N 52 ST
LINCOLN NE 68504

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
5/6/91	PAID

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

FORM HD-41(73) APPLICATION F[illegible] PERMIT TO ALTER, EXT[illegible] OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

LINCOLN-LANCASTER CO[illegible]NTY HEALTH DEPARTMENT
Division of Environ[illegible]tal Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 471-7800)

FILE NO._____

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

DATE: April 29, 1991

The undersigned hereby applies for a permit to ALTER [ ], EXTEND [ ], or REPAIR [X] an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 10N ; Range 6E ; Section 31 ;
Block 2 ; Lot 3 ; Addition HIGH RIDGE ACRES
Street Address 4601 W A St

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

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

4. Description of proposed alteration, extension or repair: Replace Sewer Line from House to tank, Class 160# Pipe and 2 Clean outs 102 ft of Pipe

5. Work to be done by: Owner [ ] ; or Contractor [ ], Big Clyde Sanitation
Contractor's Name

6. Estimated cost of project:
a. Materials $_____
b. Labor $_____
c. Other $_____
TOTAL over $ 400

Mark J Strathmeier
Signature of Applicant (owner or lessee)

1020 N. 52.
Address

(Do not write below this line)

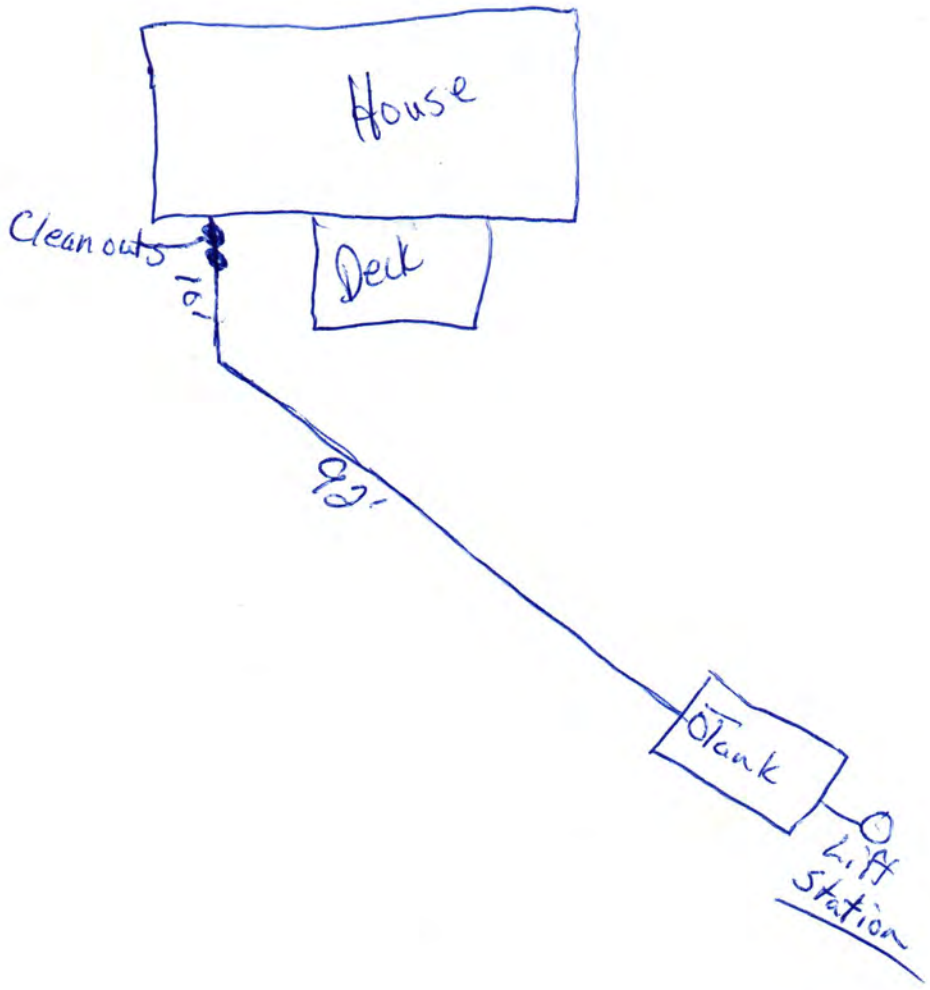
REVIEWING ACTION

1. Date Rec'd:_____
Filing Fee: $ 50.00

2. Site Visits:
Date: Apr 29-91 by: Chris Morgan
Date:_____ by:_____
Date:_____ by:_____

3. Date: Approved [X]; Disapproved [ ]
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: May 6-91 by: Chris Morgan


House
Deck
Clean outs
4"
2"
Tank
Lift Station



FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE D_OSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-L_NCASTER COUNTY HEALTH DEPARTMENT
Division_ Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. _____

SPECIFICATIONS

DATE: 4-19

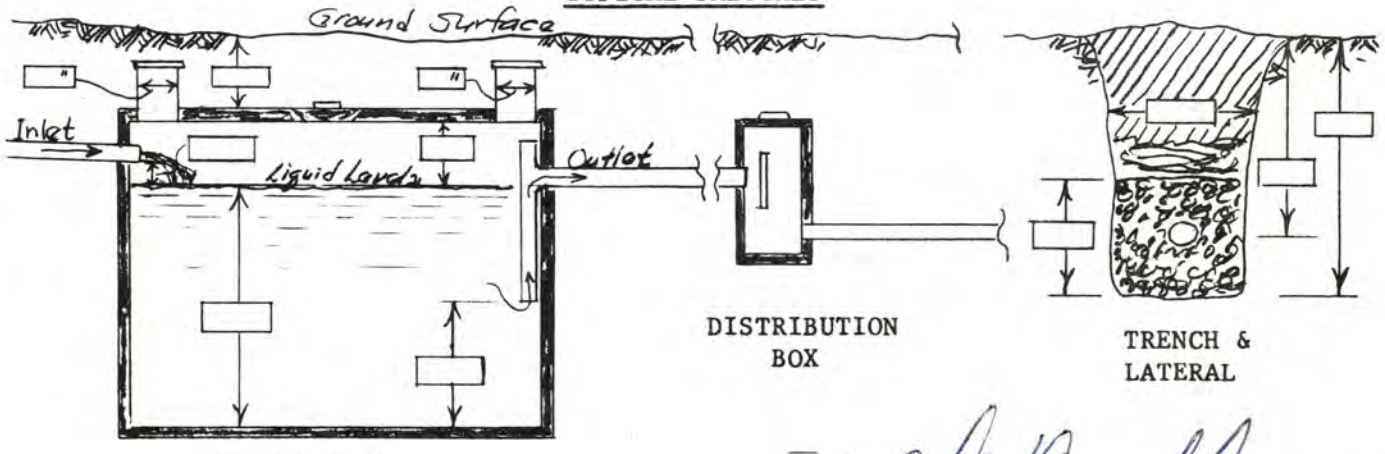
A. BUILDING SEWER:
1. Material plastic; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor 12 in.
3. Distance between dwelling and septic tank 20 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 125 ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___in.
3. Factory Built: Yes [X] (Company precast step
No [ ]
4. Manholes: Over Inlet; diam. 24 in.
Over Outlet; diam. ___in.
Below Grade 6 in.
5. Inlet: Baffle [X]; or Tee [ ]
6. Outlet: Baffle [X]; or Tee [ ]
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 ___ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

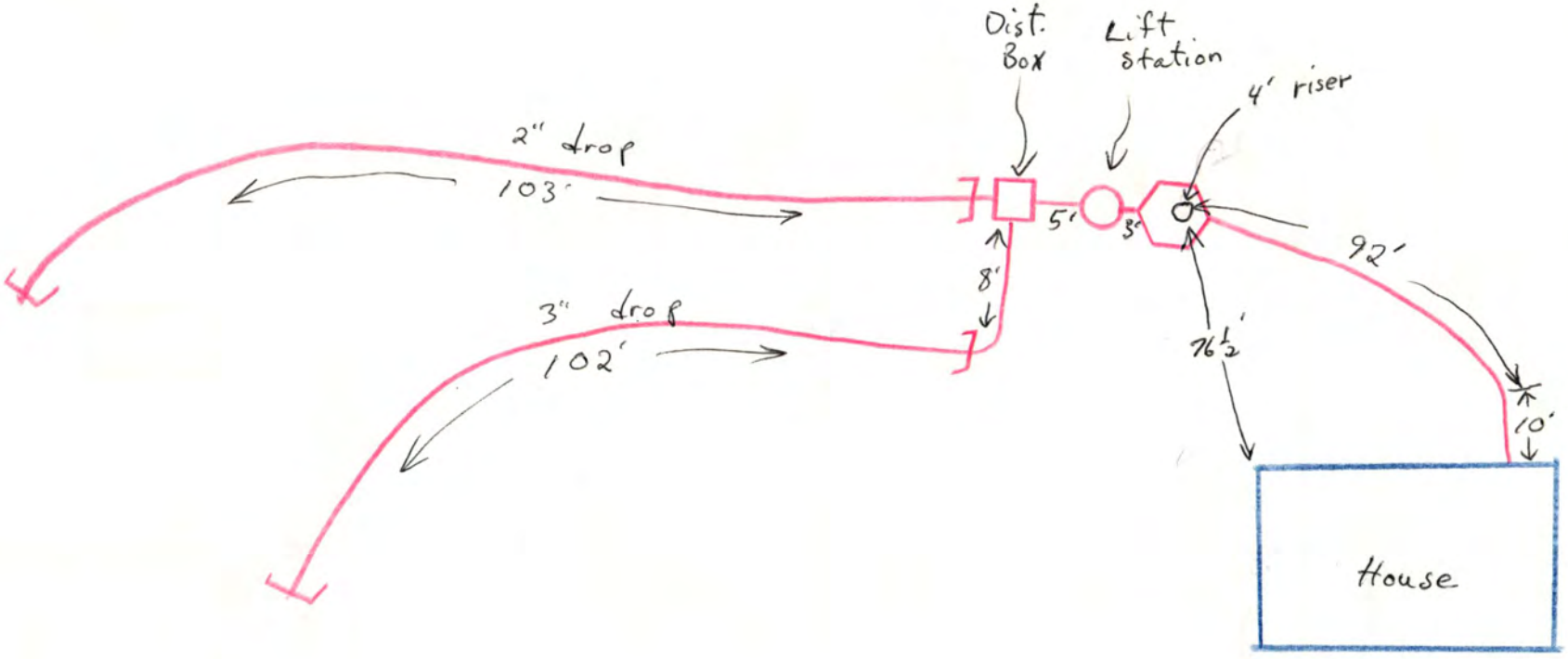
C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets 6.
2. Factory Built: Yes [X], (Company Precast
No [ ]
3. Dimension: Length ___in.; Width ___in.
Depth ___in.
4. Distance from Septic Tank 10 ft.
5. Serial Distribution: Yes [ ], No [ ]
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: plastic perforated
2. Lateral Lines: Depth below grade 30 in.
Number 2; Length of each line ___ft
Total length of Laterals 200 ft.;
Slope ___in/100 ft. Diameter of pipe 4 in.; Shape Round
Material: concrete [ ]; fiber asbestos [ ]; clay [ ]; other plastic
Distance between lateral lines ___ft.
3. Trench Dimensions: Depth ___in.;
Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 6 in.
5. Distances To:
Well or Suction Line 150 ft.;
Stream L ft.; Pressure Line L ft.
Property Line L ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Ed Du Shane
Signature of Applicant


Dist. Box
Lift station
4' riser
2" drop
103'
5'
3'
92'
8'
3" drop
102'
76½'
10'
House

pm
July-24-75

FILE NO. 604

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

October 22, 1975
THIS LICENSE OR PERMIT EXPIRES

Ed Du Shone
LICENSEE OR PERMITTEE

3900 North 27th
ADDRESS

T10N; R6E: Sec. 31; Bl. 2: Lot 3: High Ridge Acres
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
624-1555 110.15	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
34960 M2225		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 : 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. 604

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. 10N; Range 6E; Section 31;
Block 2; Lot 3; Addition _____;
Street Address Hugh Ridge Area

2. Property Use: Residential _____ ☑; Commercial _____ ☐
No. of Bedrooms 3. Describe: _____

Other Use _____ ☐
Describe: _____

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

4. Distance to public sewer: none ft.

Ed Du Shane
Signature of Applicant (owner or lessee)

Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 4/22/75. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 4/22/75. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 4-22-75. Signature: Ernest Hagemeier

3. City Engineer: Date Rec'd. 4-22-75. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 4-22-75. Signature: Al Haig

REMARKS OR REASONS FOR DISAPPROVAL _____

FINAL ACTION ON SITE CLEARANCE: Approved ☐ Disapproved ☐

Date Applicant Notified: _____ Signature _____

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. 604

DATE: 4-19

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. 10N; Range 6E; Section 31;
Block 2; Lot 3; Addition ____;
Street Address High Ridge Acres

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

Ed Dunklau
Signature of Applicant (owner or lessee)

Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance ____

3. Site Visits:
Date: July-24-75 by: mm
Date: ____ by: ____
Date: ____ by: ____

4. Date: Approved [X]; Disapproved [ ]: 7/22/75
by: Jerrold C. Dodd

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: July-24-75 by: Ron Maynard

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. 604

PROPERTY WHERE SOIL TESTED: Lot 2-Block 3 Owner: Ed Du Shane
Location: Township _____
Section & ¼ Sect. _____ Address _____
Property Dimensions: ____ft. x ____ ft. 5 acres
Ridge acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☒; Sandy Clay ☐
Dates of Tests: 4-18 to 4-19. Weather: Precip. None Temp 50 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"	4-18	9:30	4-19	9:30	4-19	11:00	6"	11:30	5	30	1	
2	36	4-18	9:35	4-19	9:35	4-19	11:05	6	11:35	5¼	30	¾	
3	36	4-18	9:40	4-19	9:40	4-19	11:10	6	11:40	5¼	30	¾	
4	36	4-18	9:45	4-19	9:45	4-19	11:15	6	11:45	5	30	1	
5	36	4-18	9:50	4-19	9:50	4-19	11:20	6	11:50	5¼	30	¾	
6	36	4-18	9:55	4-19	9:55	4-19	11:25	6	11:55	5	30	1	

Wesley D. Bowers
Signature of Person Conducting Test

Address 3500 No. 27th
Phone: 466-1549

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 34 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: April 22, 1975

Jerrold C. Hook
Signature of Reviewing Official