FILE NO. 78

# CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

April 7, 1969
THIS LICENSE OR PERMIT EXPIRES

Keith Biggerstaff
LICENSEE OR PERMITTEE

7120 Logan
ADDRESS

T 10N; R 6E; Sec. 31; Blk. 1; Lot 7: High Ridge Acres Addition
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 |
|---|---|---|---|
| 143 110.15 35 | 110.16 | 148.14 | 6-2 |

| SERIAL NO. | DATE | AMOUNT |
|---|---|---|
| 14501 | OCT 7 68 | 3000 - |

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 FOR 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. 78

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 R6E; Section 31;
Block 1; Lot 7; Addition HIGHRIDGE ACRES
Street Address _____.

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: _____ft.

Keith Boggs Stoff
Signature of Applicant (owner or lessee)

7120 Logan
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/7/68. ACTION: Approved ☒ Disapproved ☐
Date Frwd. _____. Signature: Jerrold C. Hood

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

3. City Engineer: Date Rec'd. 10-7-68. ACTION: Approved ☐ Disapproved ☒
Date Frwd. 10-7-68. Signature: J. L. Blessing

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. 78

DATE: October 7, 1968

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 1; Lot 7; Addition HIGH RIDGE ACRES
Street Address _____.

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

Fred Biggerstaff
Signature of Applicant (owner or lessee)

7120 Logan
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Date Site Clearance _____

3. Site Visits:
Date: 12/2/68 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

4. Date: Approved [X]; Disapproved [ ]; 10/7/68
by: Jerrold C. Hood

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

6. INSTALLATION FINAL WRITTEN APPROVAL
Date: 12/2/68 by: Jerrold C. Hood

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)

NORTH LOT

FILE NO. 78

PROPERTY WHERE SOIL TESTED:
Location: Township 10N
Section & ¼ Sect. L 31
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☒; Sandy Clay ☐

Owner: _____
Address _____

Dates of Tests: 10-5-68 to 10-6-68. Weather: Precip. Clear Temp. 65 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 | 25 | 10/5 | 1:00 pm | 10/6 | 10:30 | 10/6 | 10:30 | 22" | 2:30 | | 4 hr. | 22 | |
| 2 | 27 | 10/5 | 1:00 | 10/6 | 10:30 | 10/6 | 10:30 | 24 | 2:30 | | 4 hr | 26 | |
| 3 | 25 | 10/5 | 1:00 | 10/6 | 10:30 | 10/6 | 10:30 | 21 | 2:30 | | 4 hr | 18 | |
| 4 | 27 | 10/5 | 1:00 | 10/6 | 10:30 | 10/6 | 10:30 | 23 | 2:30 | | 4 hr | 19 1/2 | |
| 5 | 26 | 10/5 | 1:00 | 10/6 | 10:30 | 10/6 | 10:30 | 22 | 2:30 | | 4 hr | 18 1/2 | |
| 6 | 26 | 10/5 | 1:00 | 10/6 | 10:30 | 10/6 | 10:30 | 22 | 2:30 | | 4 hr. | 16 1/2 | |

Donald Jarman
Signature of Person Conducting Test

Address _____
Phone: _____

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

DATE: October 7, 1968

Approved Percolation Rate(s)
A. 12 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

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

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

FILE NO. 78

## SPECIFICATIONS

DATE: 10-7-68

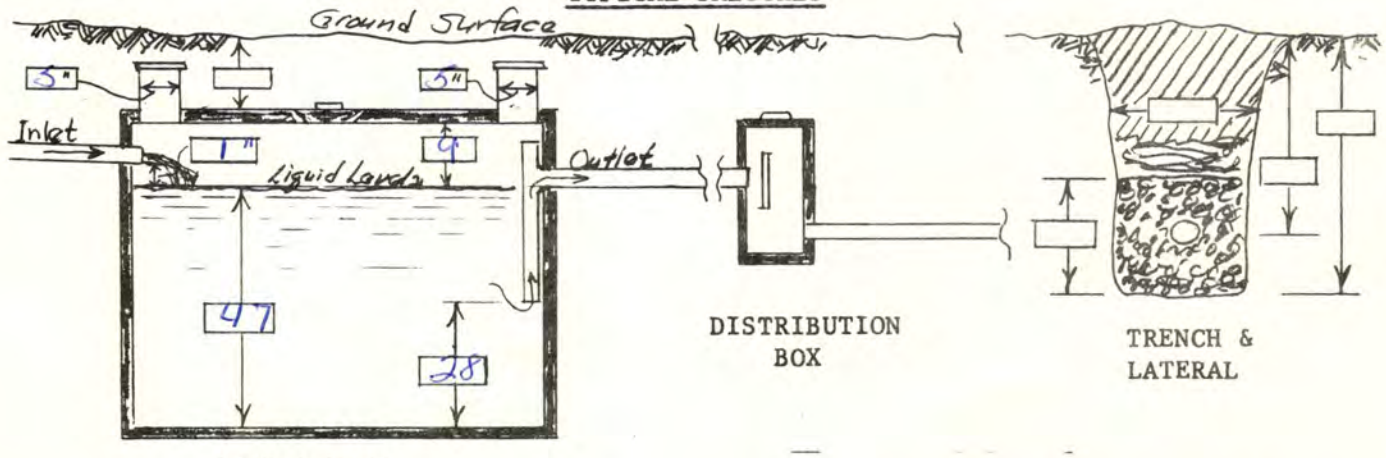
**A. BUILDING SEWER:**
1. Material CAST IRON; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor ___in.
3. Distance between dwelling and septic tank ___ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.;
Property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

**B. SEPTIC TANK** (Provide construction drawings.)
1. Material Concrete; No. of compartments one.
2. Capacity 1000 gals.; Liquid depth 47" in.
3. Factory Built: Yes ☒ (Company Pre-Cast-Step) No ☐
4. Manholes: Over Inlet; diam. 5 in.
Over Outlet; diam. 5 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 ___in.
8. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.;
Property Line ___ft.

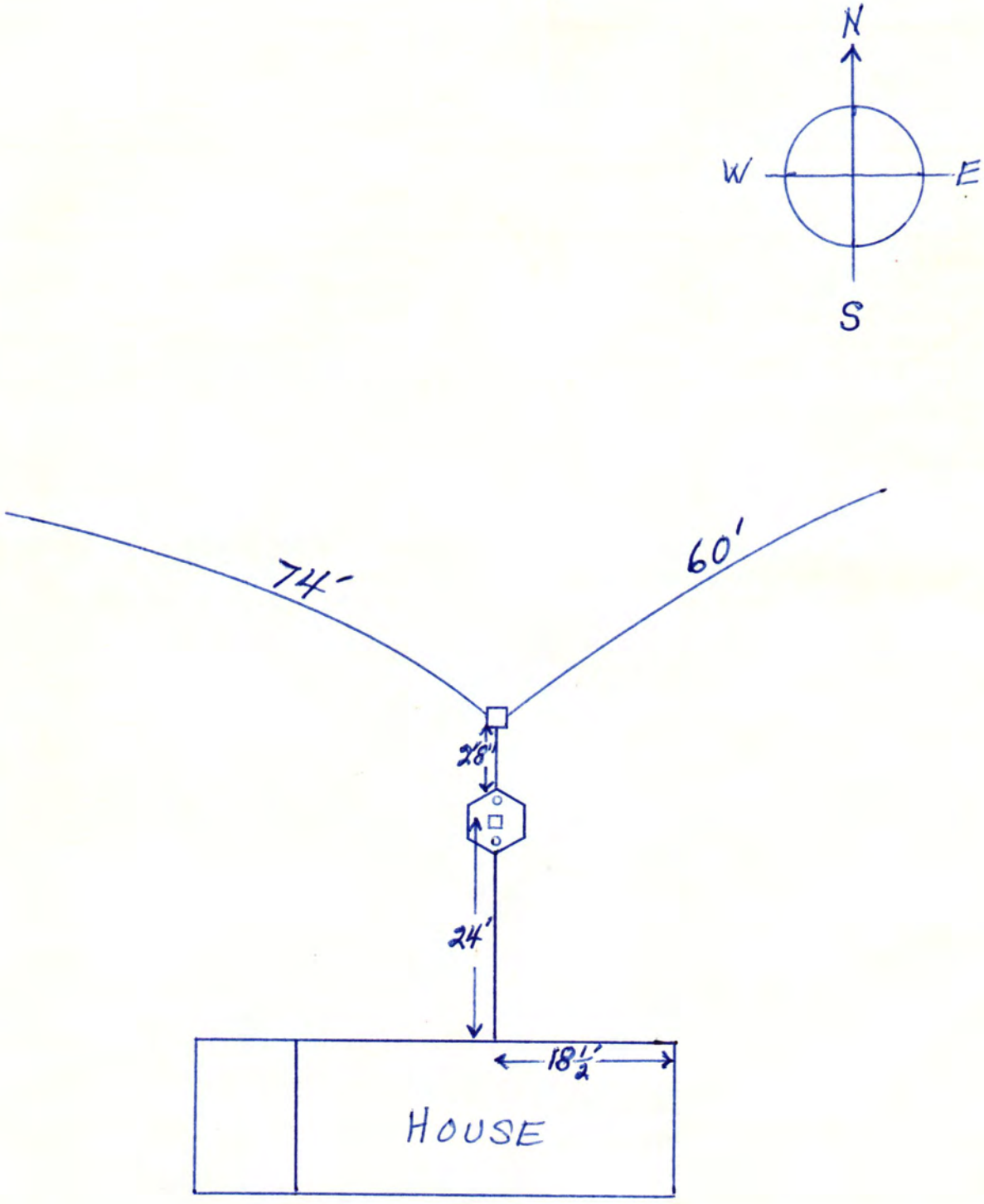
**C. DISTRIBUTION BOX**
1. Material Concrete No. available outlets 5.
2. Factory Built: Yes ☒, (Company PRE-CAST STEP No ☐
3. Dimension: Length 20 in.; Width 14 in. Depth 13 in.
4. Distance from Septic Tank 4 ft.
5. Serial Distribution: Yes ☒, No ☐ (If yes, show detailed plans.)

**D. ABSORPTION FIELD:** (Provide drawings.)
1. Type: Concrete
2. Lateral Lines: Depth below grade ___in. Number 2; Length of each line ___ft Total length of Laterals 134 ft.; Slope 4 in/100 ft. Diameter of pipe 24 in.; Shape O
Material: concrete ☒; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines ___ft.
3. Trench Dimensions: Depth 36 in.; Width 48 in.
4. Filter Material: GRAVEL.
Depth of material from trench bottom ___in.
5. Distances To:
Well or Suction Line ___ft.;
Stream ___ft.; Pressure Line ___ft.
Property Line ___ft.
6. Percolation Rate: ___minutes/inch

## TYPICAL SKETCHES




Keith Biggenstaff
Signature of Applicant


N
W
E
S
74'
60'
28'
24'
18½'
HOUSE

002

# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 12-2-92

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $150.00

Legal Description of Property: TWP. 10N ; RANGE 6E ; SECTION 31 ; BLOCK 1

LOT 1 ; ADDITION High Ridge Acres ; Street Address 4300 West Peach St

Directions to Property A St to ~~[illegible]~~ SW 40th (West of)

Location of Well West of House Tap Location: Inside ☐ Outside ☒

Location of Sewage System North of House Year Installed 1968 approx

| | NAME | ADDRESS | PHONE |
|---|---|---|---|
| Present Owner: | James Ullman | 4300 W Peach | 477-4942 |
| Tenant/Buyer: | Doug or Kathy Schmitz | 2320 W Peach | 477-6080 |
| Return to: | Nebraska Title Co. | 1610 S 70th St Suite 102 68506 | 484-4900 |

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant _____ Address _____

==========

*HEALTH DEPARTMENT USE ONLY*

Date Received 12-4-92 Received $150.00 Check ☒ #4065 L.B. Cash ☐

---

PRELIMINARY STATUS--DATE DECEMBER 7, 1992

| WATER SYSTEM: | Approved | Disapproved | SEWAGE SYSTEM: | | SITE VISIT: |
|---|---|---|---|---|---|
| Construction | ☐ | ☒ | Approved: | ☒ | Date 12/7/92 by J.C.A. |
| Bacteria | ☒ | ☐ | Provisional: | ☐ | Date 12/16/92 by J.C.A. |
| Nitrate <0.1ppm | ☒ | ☐ | Disapproved: | ☐ | Date _____ by ___ |

Comments: BIG DEPRESSION AROUND WELL. PRESSURE WATER LINE WITHIN 30 FEET OF WEST SEWER LATERAL. IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY THEN IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. Depression filled in. Water line near lateral is apparently not hooked up to water system (I was so told and it does not operate

See Attached Letter ☐

FINAL STATUS

| WATER SYSTEM: | SEWAGE DISPOSAL SYSTEM: | |
|---|---|---|
| Approved: ☒ | Approved: ☒ | Provisional Approval: ☐ |

APPROVED BY Donald C. Wood R.E.H.S. DATE DECEMBER 18, 1992

Approval or disapproval is based on written standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832