LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2762-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

6 MONTHS — THIS PERMIT EXPIRES

NORDON LABORATORIES — ISSUED TO

601 WEST CORNHUSKER HWY LINCOLN, NE 68501 — ADDRESS

T12N; R5E; Sec. 6 NE¼ — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
MC	11-7-58	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. _____

20109-0977

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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. ~~10#2~~ 2762-C

DATE: 10/20/88

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. 12N ; Range 5E ; Section 6 NE¼;
   Block _____ : Lot _____ : Addition _____
   Street Address _____

2. Property Use: Residential ☐ ; Commercial ☒ Other Use ☐
   No. of Bedrooms 0 . Describe 1- 3/4 RESTROOM

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

4. Distance to public sewer: N/A ft.

Jeff Lein For Norden Laboratories
Signature of Applicant (Owner or Lessee)

601 West Cornhusker Hwy Lincoln
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/26/88. Date Frwd. 10/27/88. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 10-27-88. Date Frwd. 11-2-88. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bauer

3. City or County Engineer: Date Rec'd. 10/27/88. Date Frwd. 10/27/88. ACTION: Approved ☐ Disapproved ☐ Signature: T. Wallace

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: NOV-1-88 by: DM
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: NOV 10-88 By: Ron Morgan

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

FORM 23-43

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
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 12N ; Range 5E ; Section & ¼ Section 6 NE ¼ ~~NE ¼ of SE ¼~~.
Property Dimensions: 2619 ft. x 2972 ft. Area: 160 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒.
Dates of Tests: 10/12/88 to 10/13/88. Weather: Precip. — Temp. 70°.

OWNER: HORDEH LABORATORIES INC

Address: 601 WEST CORNHUSKER Hwy LINCOLN NE

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				
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.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36"	10/12	1:30	10/12	2:00	10/13	1:30	11 1/4	2:00 10/13	11 3/4	30 min	1/2	30 min 1/2
2	36"	10/12	1:30	10/12	2:00	10/13	1:30	11 3/4	2:00 10/13	12	30 min	1/4	30 min 1/4
3	35"	10/12	1:30	10/12	2:00	10/13	1:30	13	2:00 10/13	13 3/8	30 min	3/8	30 min 3/8
4	36"	10/12	1:30	10/12	2:00	10/13	1:30	12	2:00 10/13	12 1/2	30 min	1/2	30 min 1/2
5	34"	10/12	1:30	10/12	2:00	10/13	1:30	13 1/4	2:00 10/13	13 3/4	30 min	1/2	30 min 1/2
6	36"	10/12	1:30	10/12	2:00	10/13	1:30	12 3/4	2:00 10/13	13 1/4	30 min	1/2	30 min 1/2

Sum of Percolation Rates: 3"
Average of Rates: 1/2"
Mean of Rates: _____

Larry Meidinger / FOR HORDEH LABORATORIES
Signature of Person Conducting Test

Address 601 WEST CORNHUSKER Hwy Phone 4

(Do not write below this line)

REVIEWING ACTION

Remarks: Too slow for conventional system But very light loading
Soil Type (SCS): Madberry Clay Loam
Date: October 26, 1988

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

Gerald 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 ☒

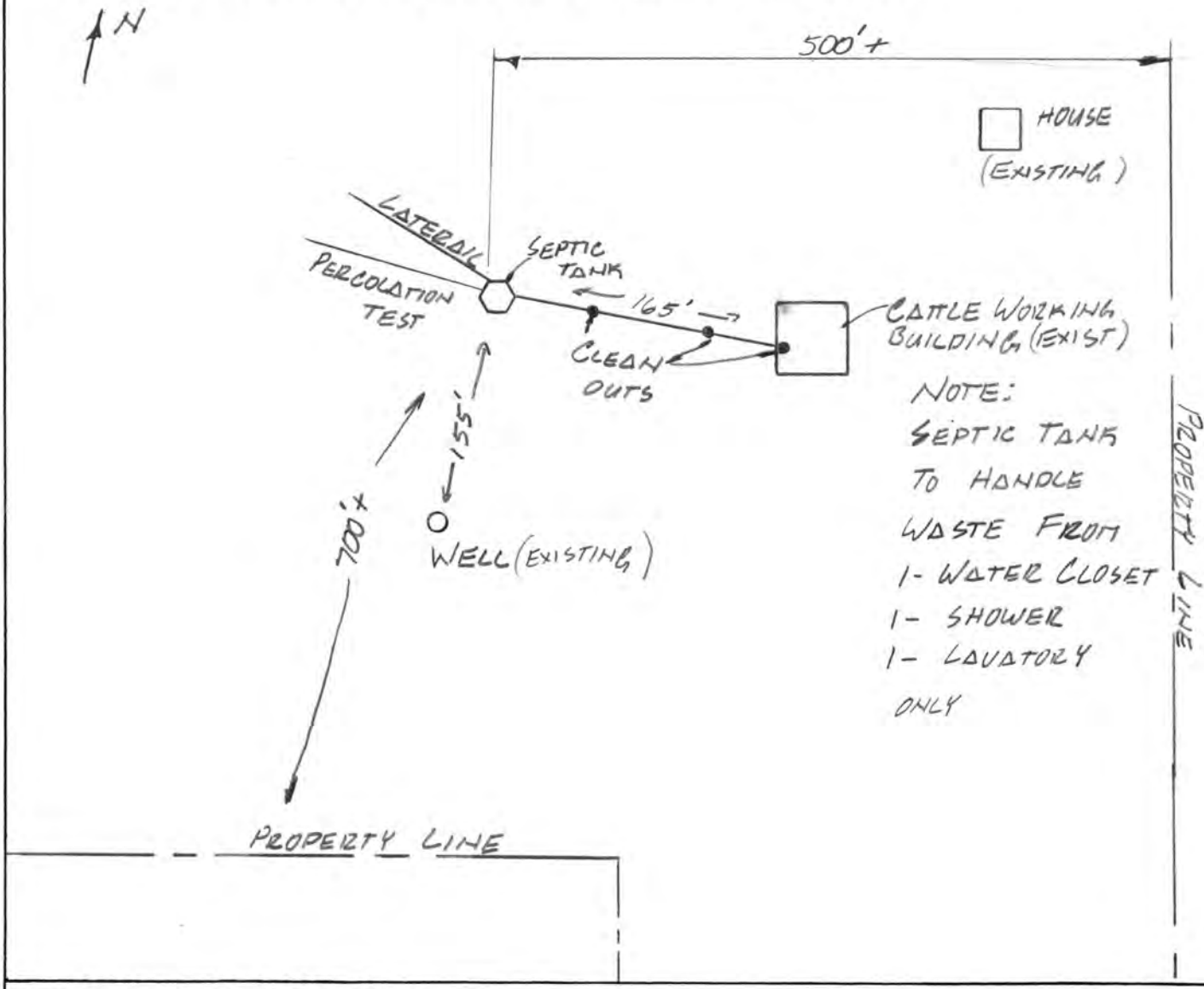
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

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

FILE NO. _____

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



REVIEWING ACTION

Remarks: _____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 300 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

Nordon Lab

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: 471-~~7800~~ 3000

D

DATE: _____

FILE NO. _____

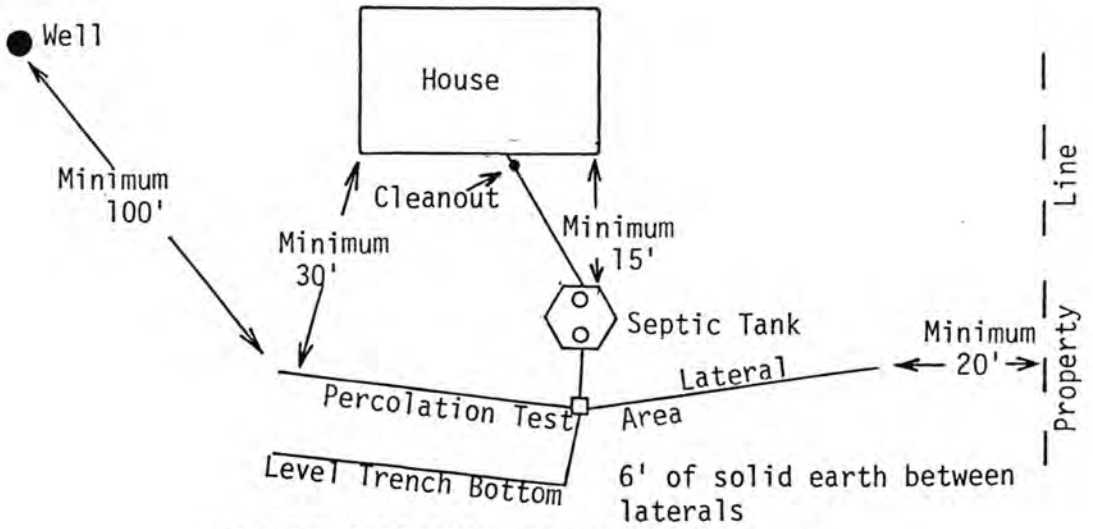
SPECIFICATIONS AS BUILT

A. BUILDING SEWER: Sch 80
1. Material PVC; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 155 ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line 150 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

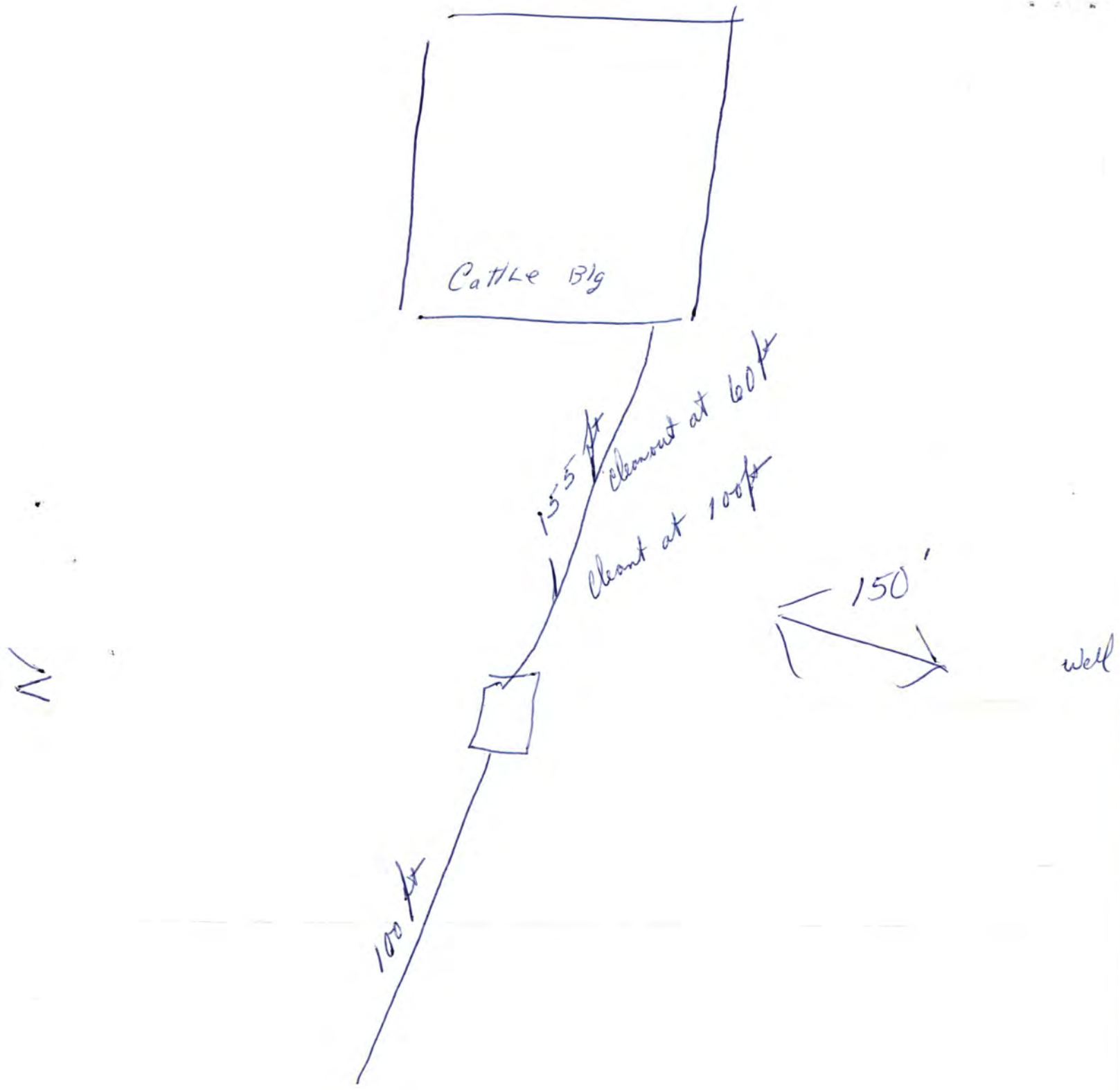
B. SEPTIC TANK:
1. Material Precast; No. of compartments one.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Precast)
4. Manholes: Over Inlet; diam. 12 in.
Over Outlet; diam. 12 in.
Riser Above ☐ Below ☐ Grade _____ in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 18 in.
8. Distances to:
Well or Suction Line 150 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material _____; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☐
(Company _____)
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 1 ; Length of each line 100, _____, _____, _____, _____ ft.;
Total length of laterals 100 ft.;
Distance between lateral lines _____ ft.
3. Trench dimensions: Width 3 ft.;
Slope 1/8 in/100 ft.; Average Depth 40 in.
4. Filter Material: Road Gravel
Depth of Material 12 in.
5. Distances to:
Well or Suction Line 150 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


Cattle Bldg
155 ft
Cleanout at 60 ft
Cleant at 100 ft
150'
well
100 ft