FILE NO. 1148

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

February 23, 1978 — THIS LICENSE OR PERMIT EXPIRES

Dennis E. Flesner — LICENSEE OR PERMITTEE

2601 South 58 Street, #11, Lincoln, NE — ADDRESS

T11N, R6E, Section 35, Lot 6, Addition Cumberlan Heights — 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
624-1535	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
46776 M2377		30.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

HEALTH APPLICATION

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

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. 1148

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

DATE: Aug 23, 1977

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. ~~00~~ 11 N ; Range 6E ; Section 35
   Block ____ ; Lot 6 ; Addition CUMBERLAN HEIGHTS
   Street Address 301 HUMPHREY

2. Property Use: Residential ____ ☒ ; Commercial ____ ☐
   No. of Bedrooms 2 .
   Describe: ____
   Other Use ____ ☐
   Describe: ____

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

4. Distance to public sewer: ____ ft.

Dennis E. Flesner
Signature of Applicant (Owner or Lessee)

2601 So. 58TH #11
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8-23-77 . ACTION: Approved ☐ ☒ Disapproved ☐
   Date Frwd. 8-23-77 . Signature: Ronald Mayant

2. Supt. Bldg. Insp.: Date Rec'd. 8-23-77 . ACTION: Approved ☒ Disapproved ☐
   Date Frwd. 8-23-77 . Signature: Tom Saasch

3. City ~~or County~~ Engineer : Date Rec'd. 8-23-77 . ACTION: Approved ☒ Disapproved ☐
   Date Frwd. 8-23-77 . Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL ____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
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. 1148

DATE: Aug 23, 1977

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. 11 N ; Range 6 E ; Section 35 ; Block 5 ; Lot 6 ; Addition CUMBERLAND HEIGHTS.
Street Address 301 HUMPHREY.

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

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

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).

Dennis E. Flesner
Signature of Applicant (owner or lessee)

2601 So. 58TH #11
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; 9-23-77
Filing Fee: $ 30.00

2. Site Visits:
Date: 9-22-77 by: JM
Date: by:
Date: by:

3. Date: Approved [X]; Disapproved [ ]
by: Ron Maynard

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-22-77 by: James Nevelka

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 474-1541)

FILE NO. 1148

PROPERTY WHERE SOIL TESTED:
Location: Township 11N : Range 6E
Section & ¼ Sect. 35 Lot 6 Cumberland Heights
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: 301 HUMPHREY

Dates of Tests: Aug 20 -77 to Aug 21-77. Weather: Precip. 1" Temp 80°

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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	32"	8/20	12 PM	8/21	11 AM	8/21	11 AM	12"	1 PM	7"	30 M	3/4"	.75
2										7 3/4		3/8	.375
3										5 5/8		7/8	.875
4										7		3/4	.75
5										7 1/2		1/2	.5
6										8		1/2	.5
													(3.75
													.625

Robert D Johnson
Signature of Person Conducting Test

Address 2618 no 3rd
Phone 432 3595

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

(Do not write below this line)

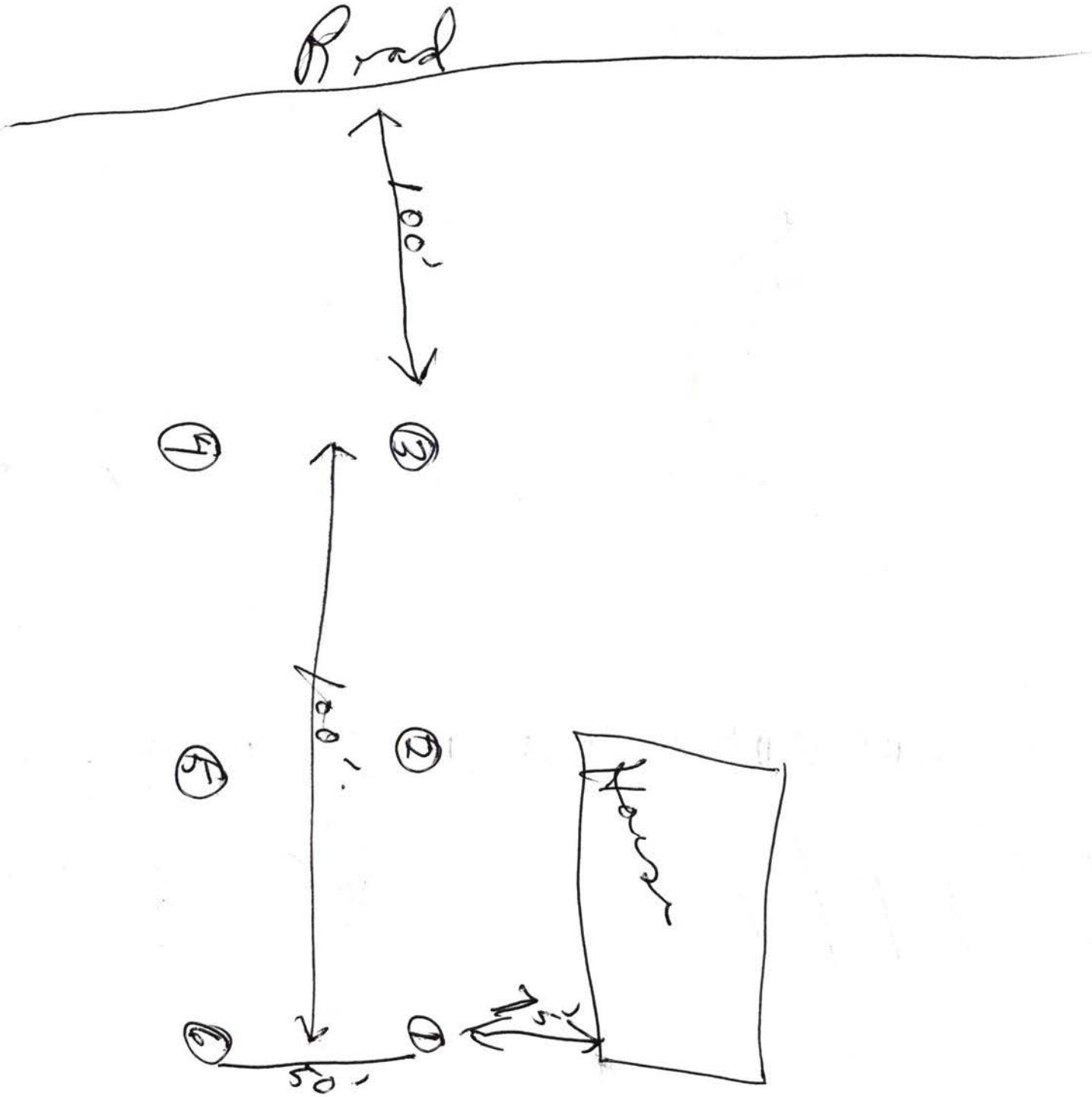
REVIEWING ACTION

REMARKS: owner prefers lagoon. Health Dept. recommends that lagoon be lined to prevent percolation

DATE: ____

Approved Percolation Rate (a)
A. 48 min./inch
B. ____ min./inch
C. ____ min./inch

Signature of Reviewing Official


Road
100'
4
3
100'
5
2
1
6
50'
5'
House

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. 1148

SPECIFICATIONS

DATE: _____

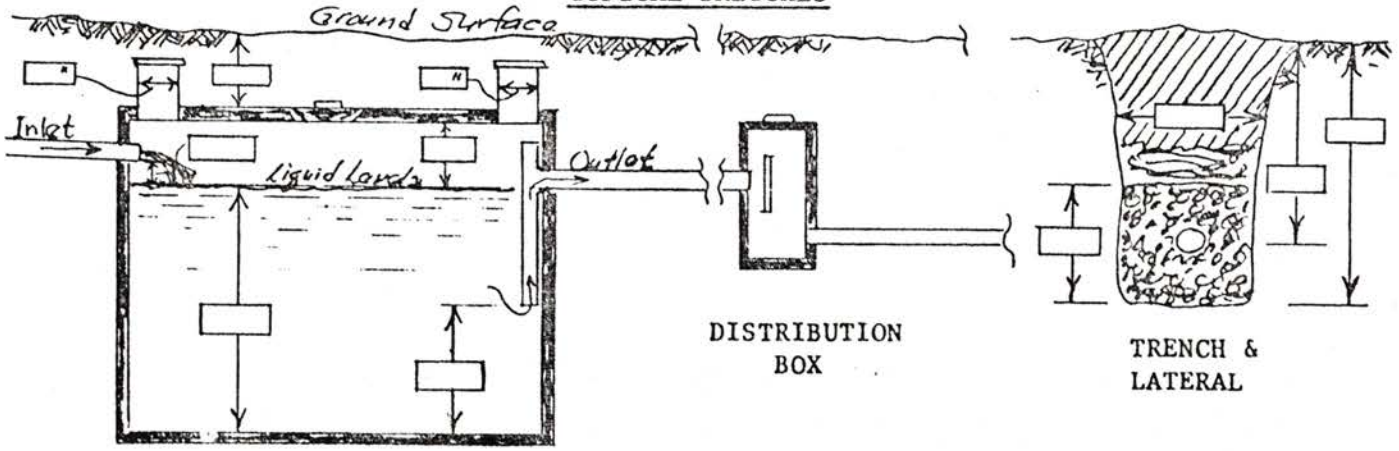
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth 51 in.
3. Factory Built: Yes ☐ (Company Pre Cast 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 ___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 21 in.; Width 14 in. Depth 14 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 ___in.
Number ____; Length of each line ___ft
Total length of Laterals ____ft.;
Slope ____in/100 ft. Diameter of pipe 20' 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 _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant

93' House to lagoon

clean out at 86'

3' deep at House

