LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

P E R M I T

Permit
SEWAGE INSTALLATION

No. 94380117201

Issued 05/31/94
Expires 12/01/94
Revenue Code 18754

Establishment
GEORGE BURRITT
T10N R7E SEC 13
LOT 2

FEES: $150.00

TOTAL $150.00

Permittee
GEORGE BURRITT
910 DRIFTWOOD DR
LINCOLN NE 68510

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

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: $ 150.00

FILE NO. _____

DATE: _____

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. 10N ; Range 7E ; Section 13 ;
   Block _____ : Lot 2 ; Addition PRIOR ADDITION
   Street Address 9800 HOLDEREGE

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

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

4. Distance to public sewer: _____ ft.

George F. Bunn
Signature of Applicant (Owner or Lessee)

910 DRIFTWOOD DR
Address Lincoln 68510

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/27/94. Date Frwd. 5/27/94. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nod
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 8/4/94. Date Frwd. 8/4/94. ACTION: Approved ☐ Disapproved ☐ Signature: _____
3. City or County Engineer: Date Rec'd. 8-4-94. Date Frwd. 8-4-94. ACTION: Approved ☒ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11-15-94 by: rm (site planning)
Date: 11-16-94 by: rm 2 latrals, tank, dist. box
Date: 12-2-94 by: rm 3rd lateral - need sewing

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12-15-94 By: Ron Magnuson

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
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township_____; Range_____; Section & ¼ Section_____.
Property Dimensions: _____ft. x _____ft. Area:_____acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests:_____to_____. Weather: Precip._____Temp._____.

OWNER:_____

Address:_____

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.)

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

_____
Signature of Person Conducting Test

Address_____ Phone_____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: May 27, 1994

Approved Percolation Rate (a)
A. 44 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

DRILLED 6 HOLES 6" x 36"
10-21-93 - PM

PUT 12" WATER IN EACH HOLE 4:00 PM
LET SET OVER NIGHT

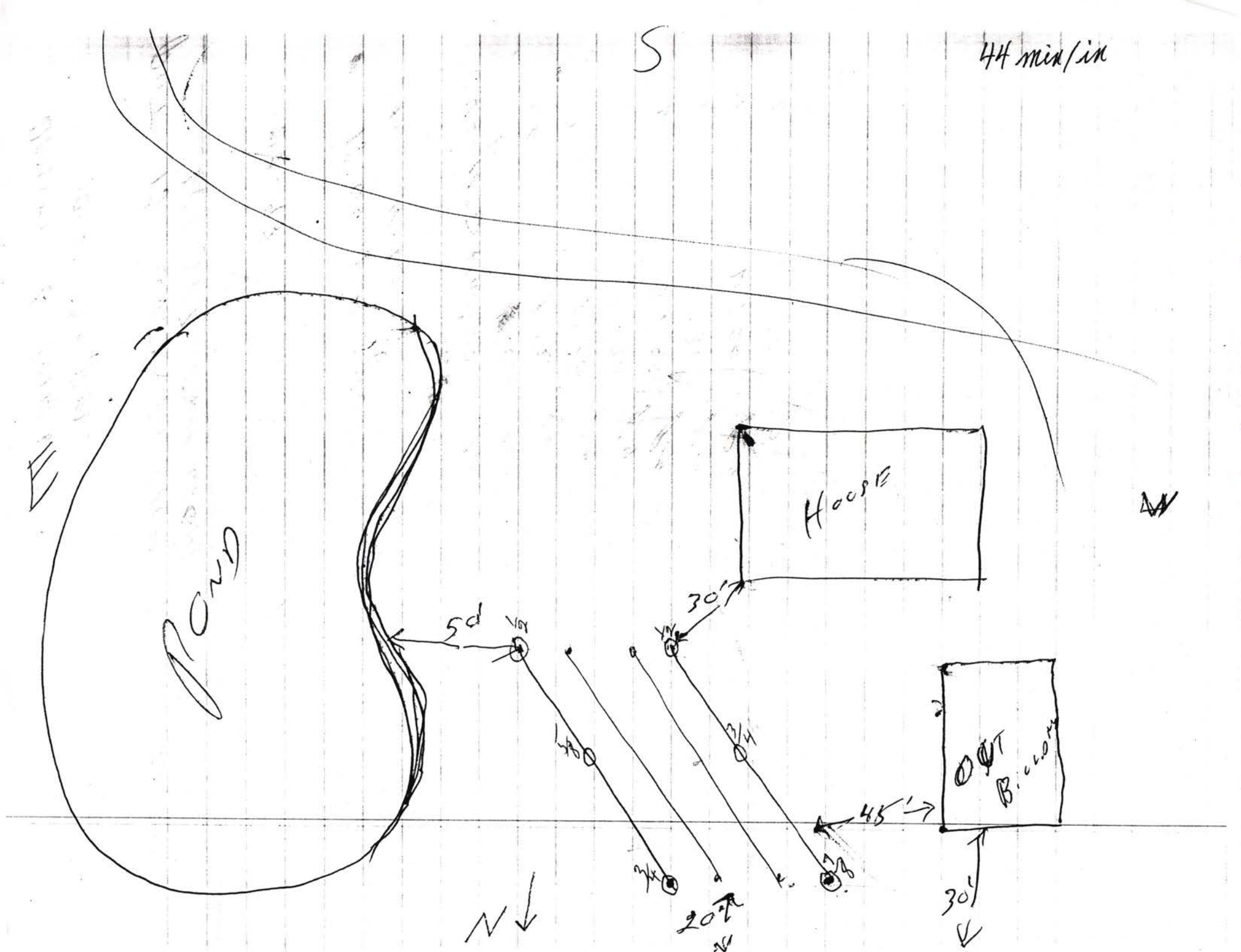
10-22-93

@ 12:00 PM PUT 6" OF WATER IN EACH HOLE.

TO 6"

CHECKED + FILL" 12:30 PM

4"	1:00 PM
4	1:30 PM
4	2:00 PM
4	2:30 PM
4	3:00 PM
4	3:30 PM
4	4:00 PM
4	4:30 PM


S
44 min/in
E
W
N
POND
HOUSE
OUT BLDG
5d
1/2
30'
1/4
1/8
3/4
45'
3/8
20'
30'

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
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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: May 27, 1994

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 223 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 893 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

RECEIVED DEC 15 1994

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

D

DATE: 12-12-94

FILE NO. 9438011720 1
9800 HOLDREGE
George E. Burritt, Owner

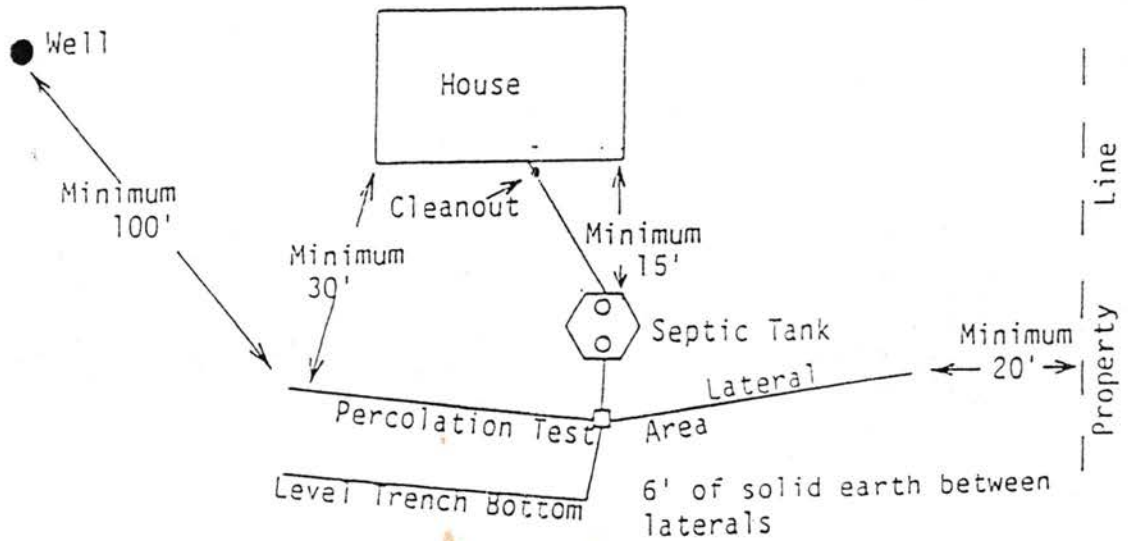
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor — in., or below basement floor 16 in.
3. Distance between dwelling and septic tank 27 — ft. ℄ of TANK
4. Number of clean-outs 1 By House.
5. Distances to:
Well or Suction Line 127 ft.; Stream 50 ft.; Pressure Line — ft.; Property Line — ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments Factory Built.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Pre CAST)
4. Manholes: Over Inlet; diam. — in.
Over Outlet; diam. — in.
Riser Above ☐ Below ☑ Grade 12 in.
5. Inlet: Baffle ☑; or Tee ☐
6. Outlet: Baffle ☑; or Tee ☐
7. Depth of top of tank below finished grade 12 in in.
8. Distances to:
Well or Suction Line 127 ft.; Stream 501 ft.; Pressure Line — ft.; Property Line 100 ft.

C. DISTRIBUTION BOX:
1. Material Concrete; Number available outlets 2.
2. Factory Built: Yes ☑ No ☐
(Company Pre CAST)
3. Distance from Septic Tank 6 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☑ Perforated Pipe ☐
Diameter of Half Round Precast Large or Perforated Pipe —
Material: fiberglass ☐; plastic ☐; concrete ☐; other —.
2. Lateral Lines:
Number 3; Length of each line 80, 80, 80, —, — ft.;
Total length of laterals 240 ft.;
Distance between lateral lines 6½ 10 ft.
3. Trench dimensions: Width 4 ft.;
Slope 3½ in/100 ft.; Average Depth 3.6 in.
4. Filter Material: Road Gravel
Depth of Material 2in TOP OF ½ moon in.
5. Distances to:
Well or Suction Line 150 ft.;
Stream — ft.; Pressure Line — ft.; Property Line 20 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

9800 HOLOREGE

