FILE #2385

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

MARCH 3 1987
THIS LICENSE OR PERMIT EXPIRES

GARY L VOSS 10300 HOLDREGE LINCOLN, NE 68527
LICENSEE OR PERMITTEE ADDRESS

T10N: R7E: Sec 13: Lot 13 I.T.: 10300 Holdrege
NAME OF ESTABLISHMENT, IF ANY ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	018754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. Date and Amount

APPLICATION

HEALTH
ISSUING OFFICER OR DEPARTMENT

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

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. 2385

DATE: 9/3/86

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. 10 N ; Range 7E ; Section 13 ;
   Block _____ : Lot 13 I.T. : Addition _____
   Street Address 10300 Holdrege

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

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

4. Distance to public sewer: _____ ft.

Gary L. Voss
Signature of Applicant (Owner or Lessee)

10300 Holdrege
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/3/86. Date Frwd. 9/4/86. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nook

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 9-4-86. Date Frwd. 9-4-86. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bauman

3. City or County Engineer: Date Rec'd. 9/4/86. Date Frwd. 9/4/86. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11-25-86 by: rm (need drawing)
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: Feb-9-87 By: Ron Maynard

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

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: 10300 Holdredge

Location: Township 10N ; Range 7E ; Section & ¼ Section 13 SW/4
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 ☐ ; SHO Clay Loam ☐ .
Dates of Tests: 9-24 to 9-25 . Weather: Precip. T Temp. 60-70

OWNER: Gary Voss

Address: Box 91A Avoca, Ne 68307

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	9/24	10:00	10:00	9/25	9/25	1:30	20½	2:00	21	30	½	
2	↓							21⅞		22½		⅝	
3								18¼		18¾		½	
4								20¼		20¾		½	
5								20		20½		½	
6								16½		17⅛		⅝	
												3¼	

Brad Southwood
Signature of Person Conducting Test

Address 701 E 4 Hickman Rd Phone 792-2462

Sum of Percolation Rates: _____
Average of Rates: .54
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): _____

Date: NOVEMBER 14, 1986

Approved Percolation Rate (a)
A. 53 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hoal
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: 474-1541

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: NOVEMBER 14, 1986

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 938 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 ☐

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

D

DATE: 11-86

FILE NO. _____

10300 Holdrege
Gary Voss

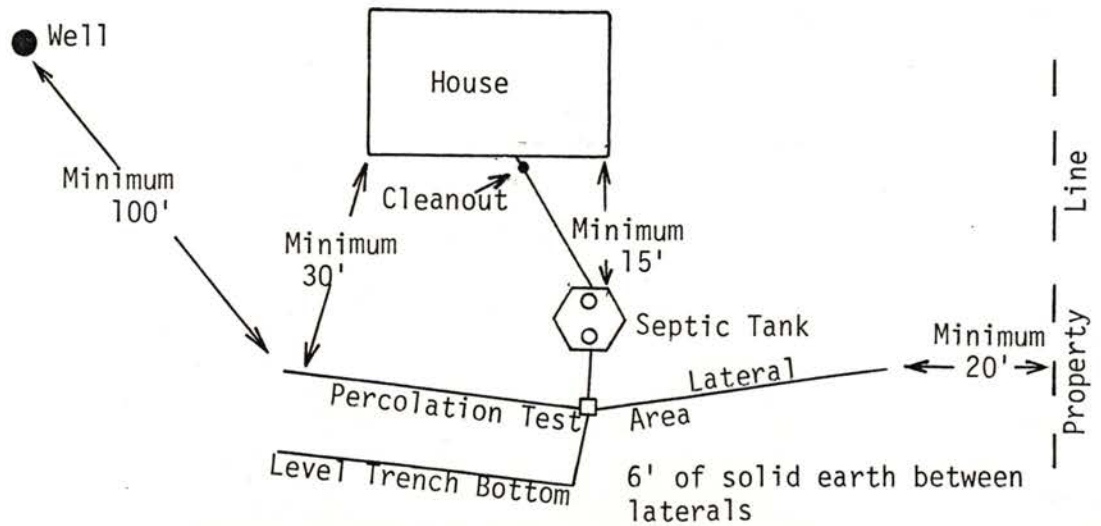
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 4 in.
3. Distance between dwelling and septic tank 60 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:
1. Material Fiberglass; No. of compartments 1.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Carr A-glas Co.)
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 16 in.
8. Distances to:
Well or Suction Line over 100' ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line 98 ft.

C. DISTRIBUTION BOX:
1. Material Plastic; Number - available outlets 7.
2. Factory Built: Yes ☒ No ☐
(Company ____)
3. Distance from Septic Tank 13 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 12 or Perforated Pipe ____.
Material: fiberglass ☒ ; plastic ☐ ; concrete ☐ ; other ____.
2. Lateral Lines:
Number 3; Length of each line 100, 100, 36, ____, ____ ft.;
Total length of laterals 236 ft.;
Distance between lateral lines 12 ft.
3. Trench dimensions: Width 4-4½ ft.;
Slope 3 in/100 ft.; Average Depth 36 in.
4. Filter Material: Road Gravel
Depth of Material 18 in.
5. Distances to:
Well or Suction Line over 100 ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line 60 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 11-86 INSTALLER Southwick Sewer + Drain

