FILE NO. 902

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

February 22, 1977
THIS LICENSE OR PERMIT EXPIRES

Ed Loos
LICENSEE OR PERMITTEE

Route #5, Lincoln, NE
ADDRESS

T11N; R6E; Sec. 35; Lot 29; Cumberland Heights Add; EXTEND AND ALTER
NAME OF ESTABLISHMENT, IF ANY

LEGAL DESCRIPTION
ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$15.00	$	$	$	$ 15.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE	
624-1535	110.16	148.14	6-2	
SERIAL NO.	DATE	AMOUNT		
42149	AUG 3 76	15.00 -		

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

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

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR 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 Ave.
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO._____

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

DATE: 8-19-76

The undersigned hereby applies for a permit to ALTER [X], EXTEND [X], or REPAIR [ ] an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 11N; Range 6E; Section 35;
Block_____; Lot 29; Addition Cumberland Hi
Street Address_____

2. Property Use: Residential_____ [X]; Commercial_____ [ ]
No. Bedrooms_____ Describe_____

Other Use [ ]
Describe_____

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

4. Description of proposed alteration, extension or repair: add laterals & install new 600 gal tanks pillow 2 exist tanks
*Need 750 gal

5. Work to be done by: Owner [ ]; or Contractor [X], Lake Service Co.
Contractor's Name

6. Estimated cost of project:

a. Materials	$	600 gal tanks & 100' laterals + sand
b. Labor	$	soil test
c. Other	$	
TOTAL	$	765.00

Ed Sood
Signature of Applicant (owner or lessee)

RT 5
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: 8-19-76
Filing Fee: $ 15.00

2. Site Visits:
Date: 8-27-76 by: jpw
Date:_____ by:_____
Date:_____ by:_____

3. Date: Approved [X]; Disapproved [ ]
by: James Neverbee

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-27-76 by: Provisional
Tank too small jpw

* Will check with Terry about tank size

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 475-6221)

FILE NO. _____

PROPERTY WHERE SOIL TESTED:
Location: Township 11N; Range 6E
Section & ¼ Sect. 35
Property Dimensions: ____ ft. x ____ ft.
Area: _____ acres. (Attach sketch of property showing hole location).

Owner: Ed Loos
Address RT 5 Flatlands Rd
Lot 29 Cumberland Hights

Soil Type: Silty Clay [X] NOT; Silty Clay Loam [X] NO 2; Sandy Loam [ ]
Silty Loam [ ]; Clay Loam [ ]; Sandy Clay [ ]

Dates of Tests: 8-19-76 to 8-20-76 Weather: Precip. NO Temp. 90°

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	32"	8-19	9A	8-19	1:30	8-20	8A	6	11-12	5	60		
2	32"	8-19	9A	8-19	1:30	8-20	8A	6	11-12	4 3/4	60		
		using		Hole		No 2		for		separate area			1 1/4

Smith Service Co.
Signature of Person Conducting Test

Address 2425 So
Phone: 475-1486

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

(Do not write below this line)

REVIEWING ACTION

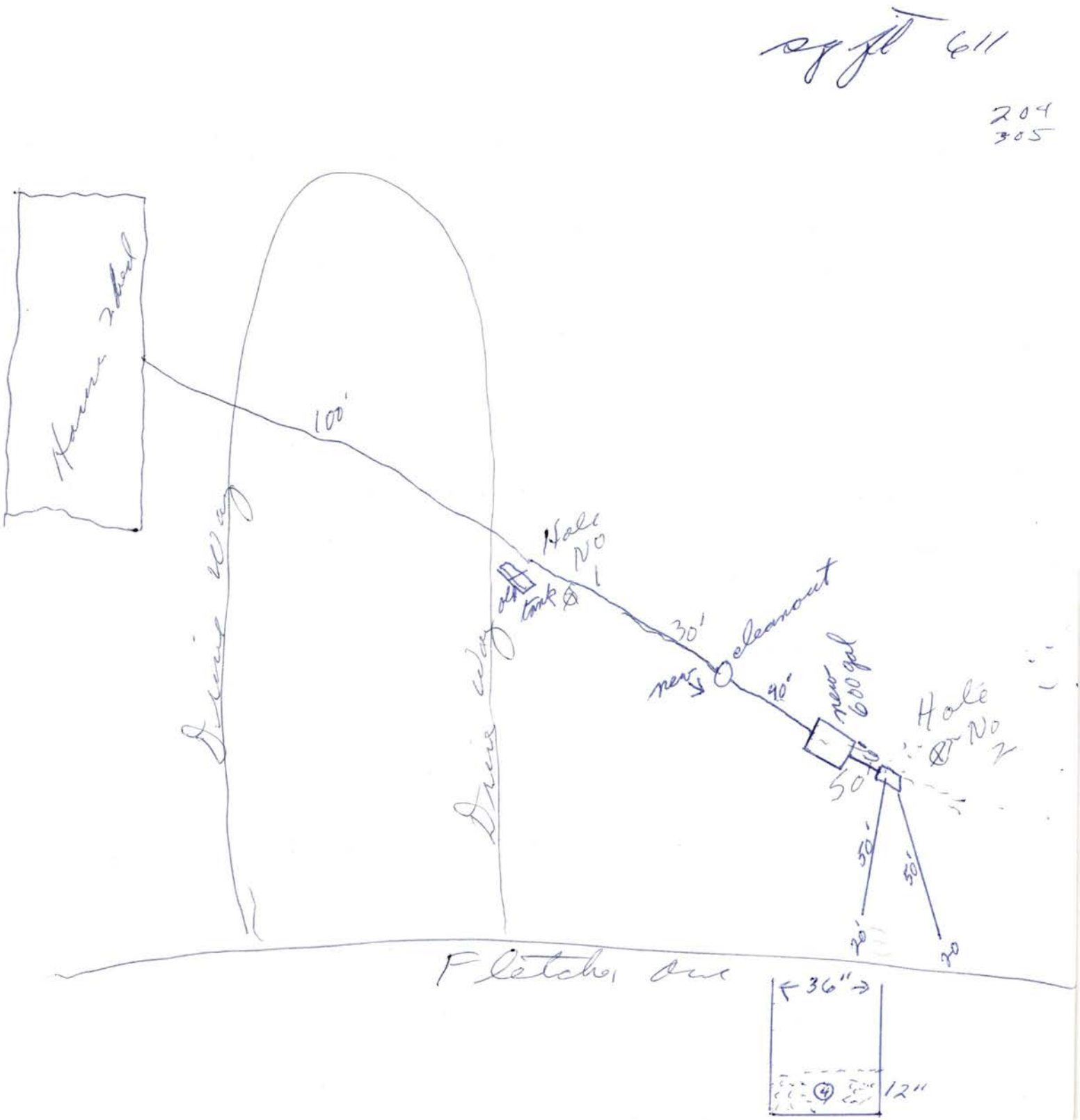
REMARKS: _____

Approved Percolation Rate(s)
A. 48 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: 8-23-76

James Wiewiora
Signature of Reviewing Official

EDWARD LOOS


Hawes Road
100'
Drive way
Drive way
Hole NO 1
old tank
30'
new
cleanout
40'
new 600 gal
Hole NO 2
50'
50'
50'
20'
20'
Fletcher Ave
36"
12"

El Toro

Sinitek Service Co.

We put in 46' sewer line 600 gal Septic tank & 100' x 3' Laterals. Did not have money for 205' x 3' Laterals

F. F. Sinitek

9-1-74