FILE NO. 1045

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

November 3, 1977 — THIS LICENSE OR PERMIT EXPIRES

V. G. Schmieding — LICENSEE OR PERMITTEE

4210 North 14 Street, Lincoln, NE 68521 — ADDRESS

T11N, R6E, Section 27 NE¼ — NAME OF ESTABLISHMENT, IF ANY

LEGAL DESCRIPTION — 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
43704	NOV 3 77	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. 1045

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

DATE: 5-2-77

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: ~~NE~~ Twp. 11N ; Range ~~27~~ 6E ; Section 6 27 NE¼
Block _____; Lot _____; Addition _____
Street Address _____

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

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

4. Distance to public sewer: _____ ft.

V. G. Schmieding By Robt. D. Roy
Signature of Applicant (Owner or Lessee)

4210 N. 14 68521
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/2/77. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 5/2/77. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 5-3-77. ACTION: Approved ☒ Disapproved ☐
Date Frwd. _____. Signature: Tom Baasch

3. City ~~or County~~ Engineer: Date Rec'd. 5-3-77. ACTION: Approved ☒ Disapproved ☐
Date Frwd. 5-3-77. 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 ☐
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. 1045

DATE: _____

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._____; Range_____; Section_____; Block_____; Lot_____; Addition_____.
   Street Address_____.

2. Property Use: Residential_____ ☐; Commercial_____ ☐
   No. of Bedrooms_____ Describe:_____
   Other Use_____
   Describe:_____

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

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).

_____
Signature of Applicant (owner or lessee)

_____
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;_____
   Filing Fee: $_____.____

2. Site Visits:
   Date: 5-6-77 by: JW
   Date:_____ by:_____
   Date:_____ by:_____

3. Date: Approved ☐; Disapproved ☐
   by:_____

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 5-13-77 by: James Wevrick

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. 1045

PROPERTY WHERE SOIL TESTED:
Location: Township NE 27 : Range 11
Section & ¼ Sect. 6
Property Dimensions: ____ ft. x ____ ft.
Area: 160 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam —
Silty Loam — ; Clay Loam ; Sandy Clay

Owner: V. G. Schmedig
Address: 4210 N. 14th

Dates of Tests: 4-30-77 to 5-1-77. Weather: Precip. T Temp. 70°

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"	4/30	1 39 PM	5/1	11 39 AM	5/30	11 39 PM	6"	2 39 PM	3 3/4	30 M	1	
2										5 1/2		3/4	
3										3 1/2		1 1/4	
4										3 7/8		1	
5										3		1 1/2	
6										3		1 1/2	
						refill all holes at 1:30 PM							

Robert D Johnson
Signature of Person Conducting Test

Address 2618 N 03d
Phone 432 3595

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

(Do not write below this line)

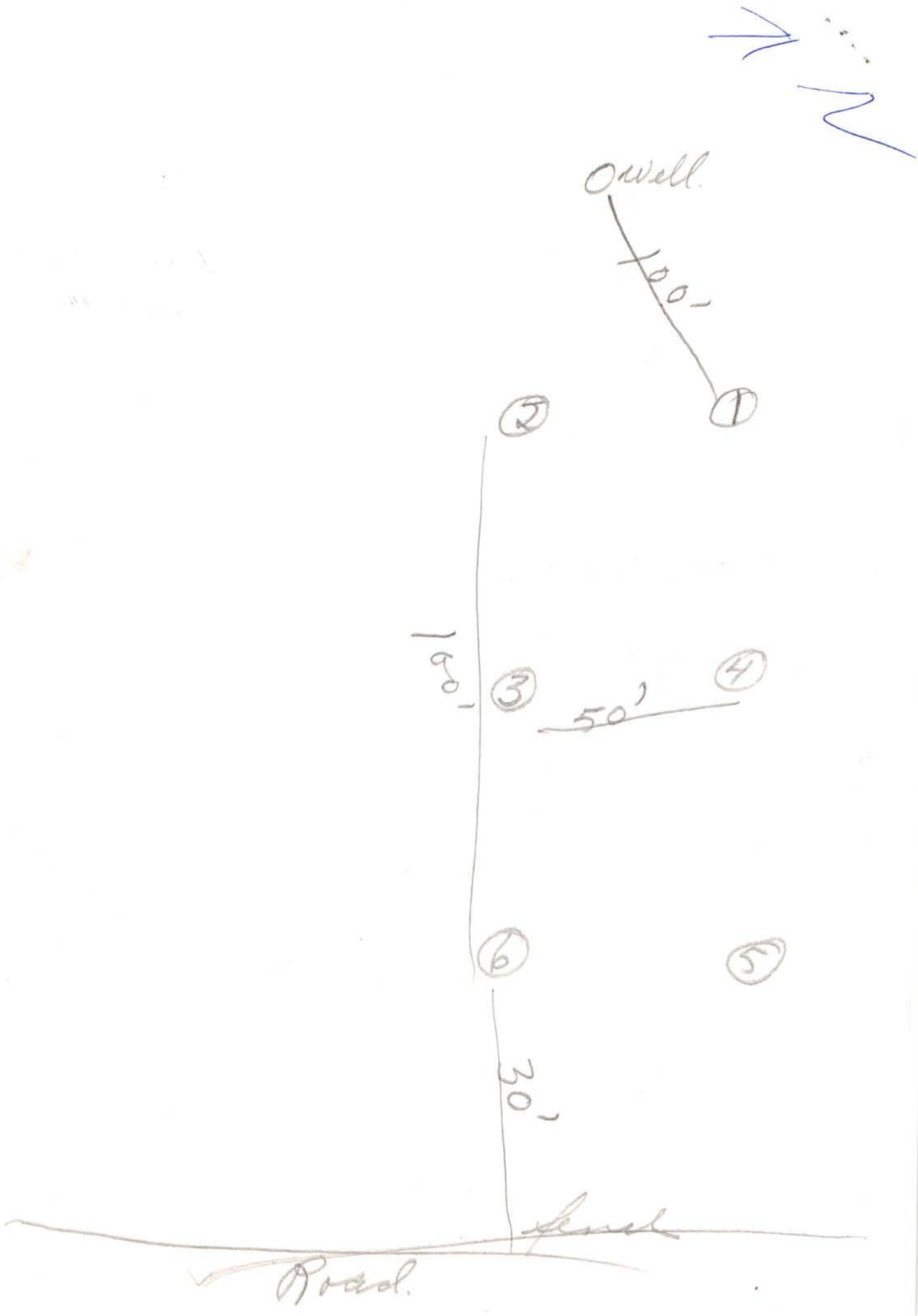
REVIEWING ACTION

REMARKS: Nelson Fine Sandy Loam (S.C.S.)

DATE: May 2, 1977

Approved Percolation Rate (a)
A. 25 min./inch
B. ____ min./inch
C. ____ min./inch

Gerald C. Kaab
Signature of Reviewing Official


N
Well
100'
2
1
100'
3
4
50'
6
5
30'
Road

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. 1045

SPECIFICATIONS

DATE: _____

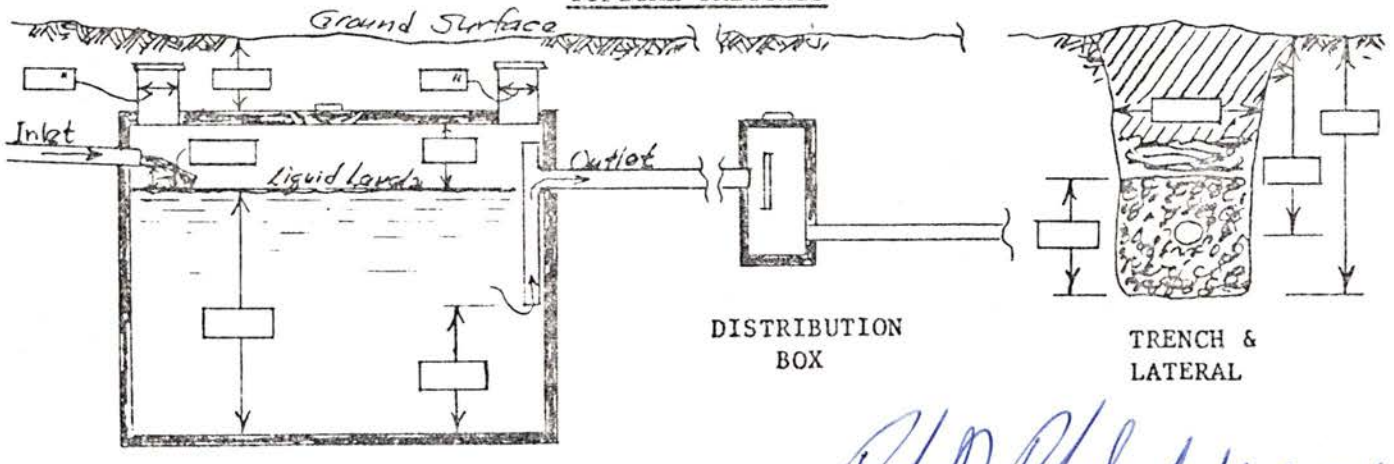
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
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 1 in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRICTION BOX
1. Material Concrete; No. available outlets 5.
2. Factory Built: Yes ☒, (Company Pre Cast Step) No ☐
3. Dimension: Length 20 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 115 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



R. D. Rhodes for V. G Schmieding
Signature of Applicant

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. _____

SPECIFICATIONS

DATE: 5-6-77

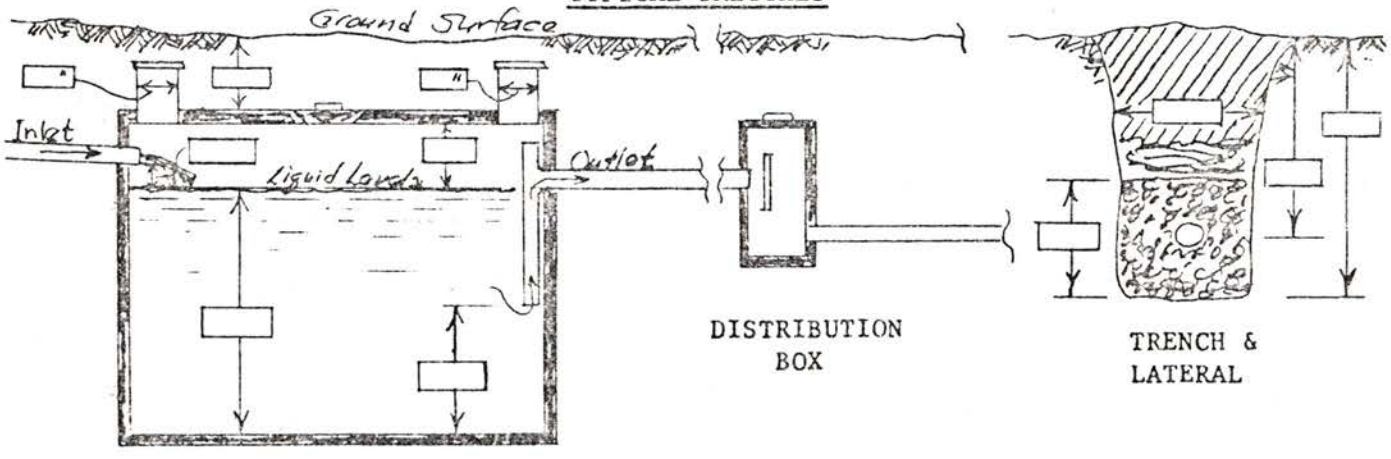
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☒ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ____in.
Below Grade 8 24 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 24 in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line 40 ft.

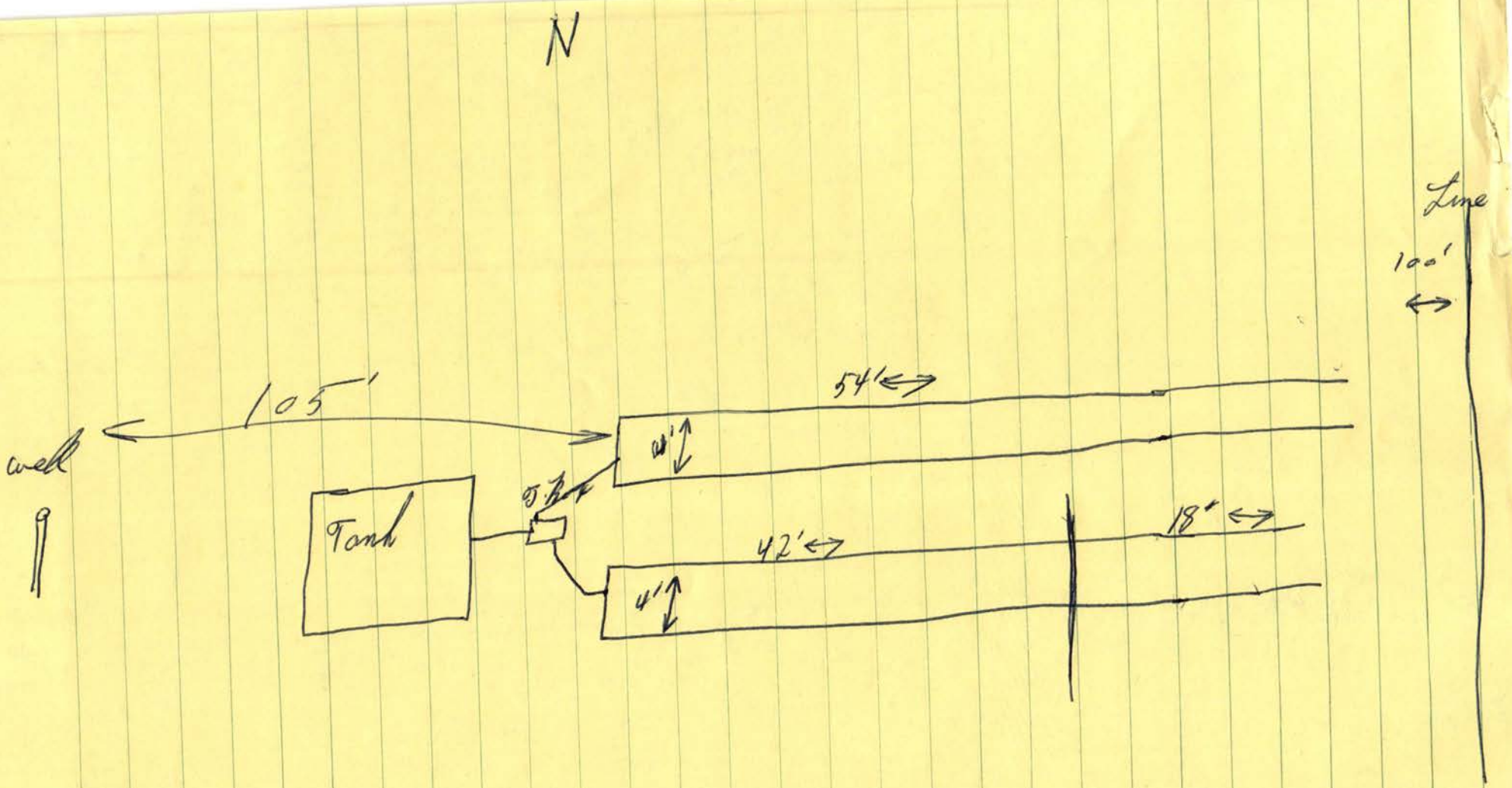
C. DISTRICTION BOX
1. Material 2; No. available outlets _____.
2. Factory Built: Yes ☒, (Company Pre-Cast) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Tile round lateral
2. Lateral Lines: Depth below grade 36 in. Number 2; Length of each line 60 ft Total length of Laterals 114 ft.; 54 Slope 2 in/100 ft. Diameter of pipe 12 in.; Shape O
Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines 8 ft.
3. Trench Dimensions: Depth 36 in.; Width 48 in.
4. Filter Material: Gravel.
Depth of material from trench bottom 22 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



5-6-77

Eagle Corp.

Harlan Nelson