FILE #2159

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

MAY 21, 1985 — THIS LICENSE OR PERMIT EXPIRES

LARRY L. DITMARS — LICENSEE OR PERMITTEE

3636 NO. 52 STREET — ADDRESS

LINCOLN, NE 68504

T10N; R7E; Sec 14; Lot 73 I.T.; East Leighton — 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. 2159

DATE: 11/14/84

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 14 ;
   Block _____ : Lot 73 I.T. : Addition _____
   Street Address East Leighton

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 5 . Describe Single Family Single Story Full Basement Dwelling

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

4. Distance to public sewer: Over ½ mile.

FOR LAGOON OR EXPERIMENTAL

Larry L. D Thomas
Signature of Applicant (Owner or Lessee)

3636 N 52nd AA3
Address Lincoln NE 68504

(Do not write below this double line)

1. Health Department: Date Rec'd. 11/20/84. Date Frwd. 11/21/84. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd 11-20-84. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

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

REMARKS OR REASONS FOR DISAPPROVAL WELL PERMIT APPLIED FOR.

Site Visits:
Date: 4/1/85 by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

EXPERIMENTAL

INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 4-12-85 By: Ron Marquart

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. 7159

PROPERTY WHERE SOIL TESTED:

Location: Township 10N ; Range 7E ; Section & ¼ Section 14 NE¼.
Property Dimensions: 390 ft. x 507.93 ft. Area: 5 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: 11/19 to 11/20/84. Weather: Precip. ____ Temp. 80-90

OWNER: Larry L. & Diane K. Oltmans
Address: 3636 N 52nd AA3 Lincoln 68504

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	11/19	1:10PM	11/20	9 AM	11/20	9:30AM	3"	1:00PM	2.75"	30	1/4"	120
2	36	↓	1:10PM	↓	↓	↓	12:30PM	3"	↓	2.75"	↓	↓	120
3	36	↓	1:10PM	↓	↓	↓	↓	3"	↓	2.75"	↓	↓	120
4	36	↓	1:10PM	↓	↓	↓	↓	3"	↓	2.75"	↓	↓	120
5	36	↓	1:10PM	↓	↓	↓	↓	3"	↓	2.75"	↓	↓	120
6	36	↓	1:10PM	↓	↓	↓	↓	3"	↓	2.75"	↓	↓	120

Larry L Oltmans
Signature of Person Conducting Test

Sum of Percolation Rates: 720
Average of Rates: 120
Mean of Rates: 120

Address 3636 N 52nd AA3 Lincoln Phone 466-6247

(Do not write below this line)

REVIEWING ACTION

Remarks: TOO SLOW FOR CONVENTIONAL SEPTIC.
Soil Type (SCS): WYMORE SILTY CLAY LOAM WITH SHARPSBURG SILTY CLAY LOAM NEAR
Date: NOVEMBER 20, 1984

Approved Percolation Rate (a)
A. 120 min./inch
B. ____ min./inch
C. ____ min./inch

Jerrold C. Hood
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 ☐

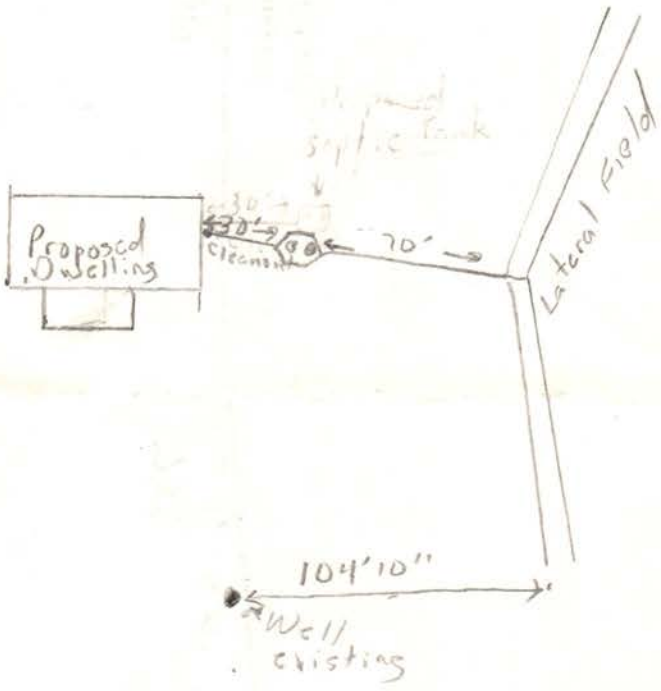
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

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Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

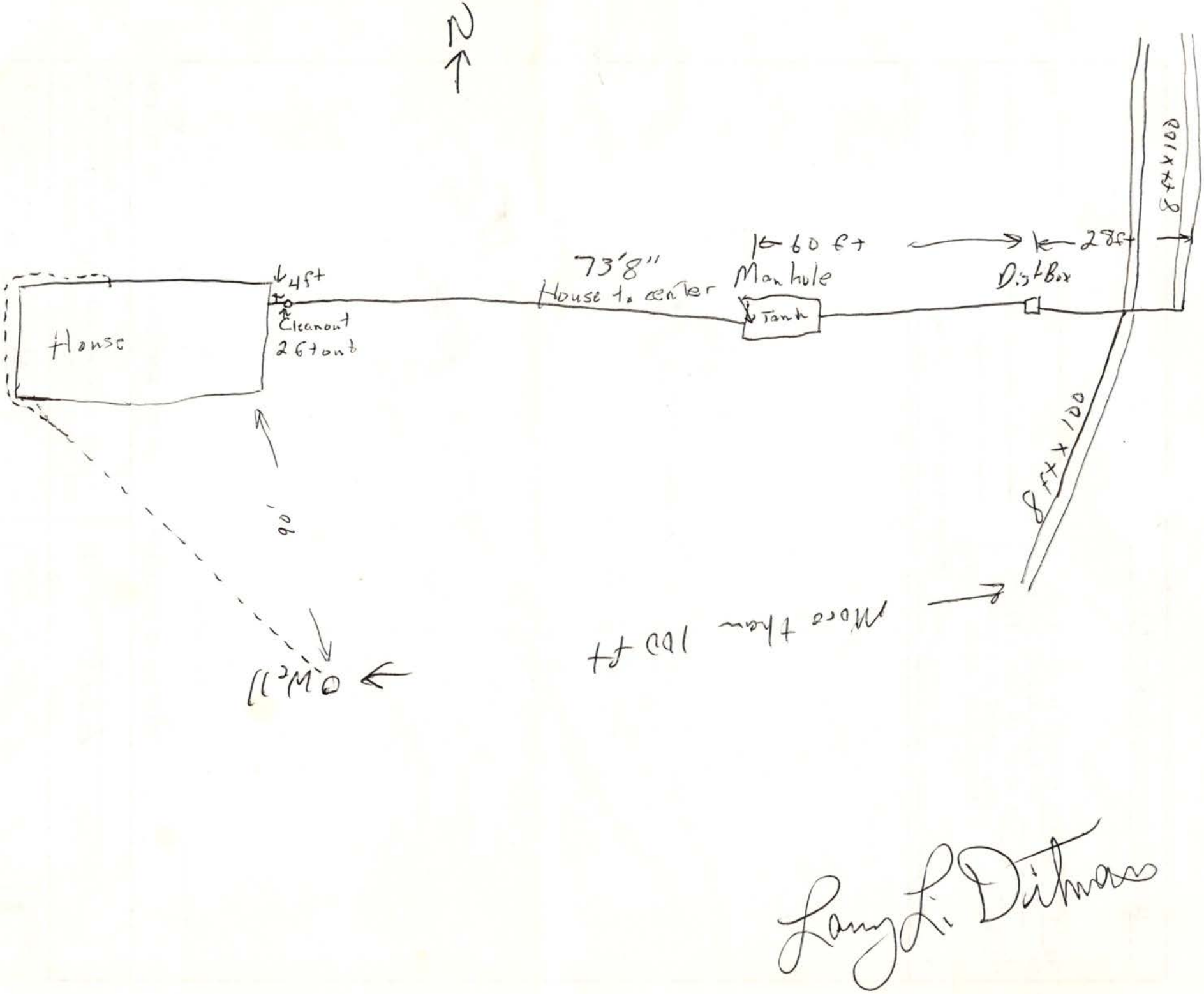
Remarks: _____

_____

Date: _____

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

_____
Signature of Reviewing Official



Larry L. Dittmer