LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 9938D005301

Issued 10/17/89
Expires 04/17/90

ESTABLISHMENT

JEAN KRIZ
T10N R7W SEC 25
LOT 59

FEES: Permit 018754 $60.00

Total $60.00

PERMITTEE JEAN KRIZ
5612 S 38 ST
LINCOLN NE 68516

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT

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

893800053

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: $_____

FILE NO._____

DATE: 10/13/89

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 North; Range 7 west of the 6th P.M; Section 25;
Block _____: Lot 39 I.T.: Addition _____
Street Address _____

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: Miles ~~Ft~~

Joan J. Kruse
Signature of Applicant (Owner or Lessee)

5612 S. 38th
Address Lincoln, Nebr. 68516

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/13/89. Date Frwd. 10/18/89. ACTION: Approved ☒ Disapproved ☐ Signature: Jerald C. Nead

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 1/11/90. Date Frwd. 1/11/90. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

3. City or County Engineer: Date Rec'd._____. Date Frwd._____. ACTION: Approved ☒ Disapproved ☐ Signature: B.M. Nicholson

REMARKS OR REASONS FOR DISAPPROVAL HAS WELL PERMIT

Site Visits:
Date: 6/6/90 by: J. C. H. + tests only
Date: 6-11-90 by: ran sewer line
Date: 6-13-90 by: ran new leach lines

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7-16-90 By: Ken Mayhew

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
Division of Environmental Health
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Lincoln, Nebraska 68502
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:



Location: Township 10 North; Range 7 East of the 6th P.M.; Section & ¼ Section 25.
Property Dimensions: 419 ft. x 560 and 200 ft. Area: 5.80 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: 10/9/89 to 10/10/89. Weather: Precip. 0 Temp. 68.

OWNER: Dick Olson

Address: 112 A Street Lincoln, Neb.

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./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36"	10/9	4:30 PM	10/9	1:30 P.M	10/10	1:20 P.M	6"	1:50 P.M	4 5/8"	30	1 3/8	30/1 3/8
2	36"	10/9	4:30 PM	10/9	1:30 P.M	10/10	1:20 P.M	6"	" "	4 3/4"	30	1 1/4	30/1 1/4
3	36"	10/9	4:30 PM	10/9	1:30 P.M	10/10	1:20 PM	6"	" "	5 1/4"	30	3/4	30/3/4
4	36"	10/9	4:30 PM	10/9	1:30 P.M	10/10	1:20 P.M	6"	" "	5 1/4"	30	3/4	30/3/4
5	36"	10/9	4:30 PM	10/9	1:30 PM	10/10	1:20 P.M	6"	" "	5 1/4"	30	3/4	30/3/4
6	36"	10/9	4:30 PM	10/9	1:30 P.M	10/10	1:20 P.M	6"	" "	5"	30	1 1/8	30/1 1/8

Sum of Percolation Rates: 180/6
Average of Rates: 30/1
Mean of Rates: 1"

Signature of Person Conducting Test

Address 5612 S. 38th Phone 421-3740

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: October 13th 1989

Approved Percolation Rate (a)
A. 30 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 ☒

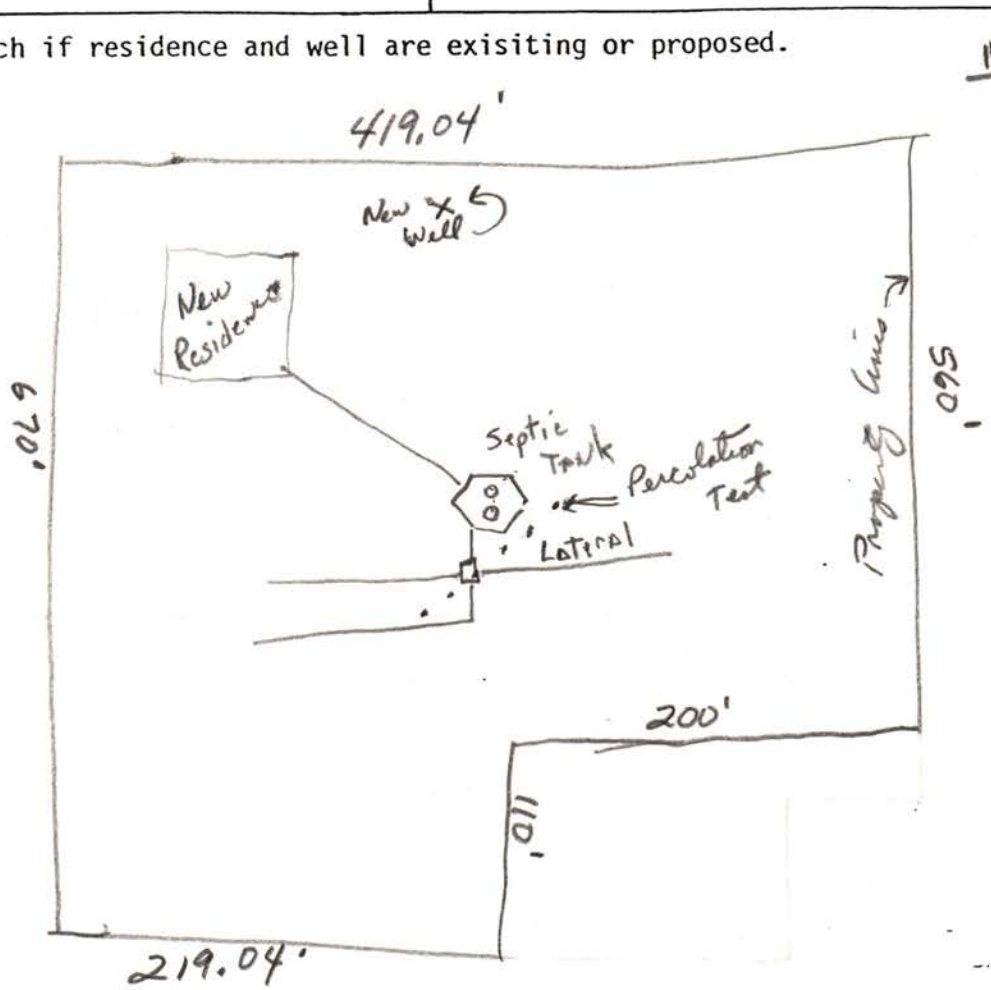
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
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C

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.



10/13/89

REVIEWING ACTION

Remarks: _____

Date: _____

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 750 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: 6-6-90

FILE NO. 9938 00053

Dick Olson
1131 S. 112

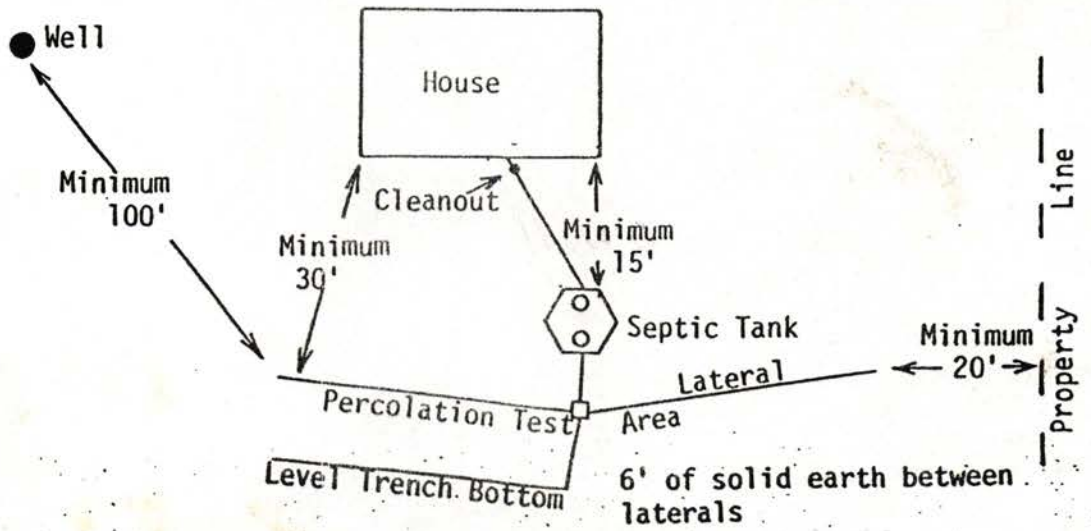
SPECIFICATIONS AS BUILT

A. BUILDING SEWER: Sch 40
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 10 in.
3. Distance between dwelling and septic tank 46 ft.
4. Number of clean-outs 1 .
5. Distances to:
Well or Suction Line > 100 ft.; Stream > 100 ft.; Pressure Line N/A ft.; Property Line > 60 ft.

B. SEPTIC TANK:
1. Material Concrete ; No. of compartments 1 1000 .
2. Capacity Pre Cast Step gals.;
3. Factory Built: Yes ☒ No ☐
(Company ____)
4. Manholes: Over Inlet; diam. 10 in.
Over Outlet; diam. 12 in.
Riser Above ☐ Below ☒ Grade 6 in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 22 in.
8. Distances to:
Well or Suction Line > 100 ft.; Stream > 100 ft.; Pressure Line N/A ft.; Property Line > 60 ft.

C. DISTRIBUTION BOX:
1. Material Plastic ; Number - available outlets 7 .
2. Factory Built: Yes ☒ No ☐
(Company ____)
3. Distance from Septic Tank 18' ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round ____ or Perforated Pipe 4" .
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other ____.
2. Lateral Lines:
Number 3 ; Length of each line 100 , 100 , 100 , ____ , ____ ft.;
Total length of laterals 300 ft.;
Distance between lateral lines 12 ft.
3. Trench dimensions: Width 3 ft.; Slope 4 in/100 ft.; Average Depth 34 in.
4. Filter Material: Road Gravel
Depth of Material 15 in.
5. Distances to:
Well or Suction Line > 100 ft.; Stream > 100 ft.; Pressure Line N/A ft.; Property Line > 20 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Property line
N
E
Perc Test Area
100
100
100
18'
72'
24'
Barn
46'
3'
8'
23'
water line
House
O well