FILE NO. 1636

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

JULY 24, 1980 — THIS LICENSE OR PERMIT EXPIRES

Claude L. Walton, 5100 North 48 Street, Lincoln, NE 68504
LICENSEE OR PERMITTEE — ADDRESS

T10N, R7E of 6 p.m., Section 5 NW¼ of SE¼, Lot 60 I.T.
NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 60.00	$	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE	
018754	110.16	148.14	6-2	

SERIAL NO.	DATE	AMOUNT
53695 JN24		60.00

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 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: 474-1541

A

FILING FEE: $ 60.00

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DATE: _____

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-E of the 6th P.M.; Section 5 (N.W. 1/4 of the S.E. 1/4);
Block _____: Lot 60 I.T.: Addition _____
Street Address 5100 - N - 48th St - Lancaster Co - Lincoln, Nebr 68504

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: _____ ft.

Willacine F. Walton
Signature of Applicant (Owner or Lessee)

5100-N-48th St Lancaster Co Lincoln, Nebr 68504
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 1/24/80. Date Frwd. 1/24/80. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 1/24/80. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Guy N. Sherwood

3. City or County Engineer: Date Rec'd. 1-24-80. Date Frwd. 1-28-80. ACTION: Approved ☒ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL public sanitary sewer service is expected to be available to this property within 12-18 months. The annexation of the property is required before public sewer service is provided. Copy of this sent to Willacine Walton

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

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
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PROPERTY WHERE SOIL TESTED:

Location: Township 10-North; Range 7-E of the 6th P.M.; Section & ¼ Section 5.
Property Dimensions: 480 x 1675 ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: JAN-21-80 to JAN-23-80. Weather: Precip. Ø Temp. 25.

OWNER: Willacine N. Walton

Address: 5100-N. 48th St. Lancaster Co. Lincoln

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"	1/21	9:02	1/22	1:01	1/23	9:00	Ø	1:02	2½"	30	3½	30 3½
2	36"	1/21	9:03	1/22	1:02	1/23	9:01	Ø	1:05	4"	30	2	30 2
3	36"	1/21	9:04	1/22	1:03	1/23	9:02	Ø	1:07	3"	30	3	30 3
4	36"	1/21	9:05	1/22	1:04	1/23	9:04	Ø	1:10	2½"	30	3½	30 3½
5	36"	1/21	9:06	1/22	1:05	1/23	9:06	Ø	1:13	2"	30	4	30 4
6	36"	1/21	9:07	1/22	1:07	1/23	9:07	Ø	1:15	1¾"	30	4¼	30 4¼

Sum of Percolation Rates: 20¼
Average of Rates: 3.38
Mean of Rates: _____

Claude L. Walton
Signature of Person Conducting Test

Address 5100-N 48th Lincoln Neb Phone 464-8792

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 9 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: Mr. Walton reports no groundwater in two observation holes 6' deep.
Soil Type (SCS): Salmo Silty Clay Loam
Date: January 24, 1980

Gerald 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 ☐

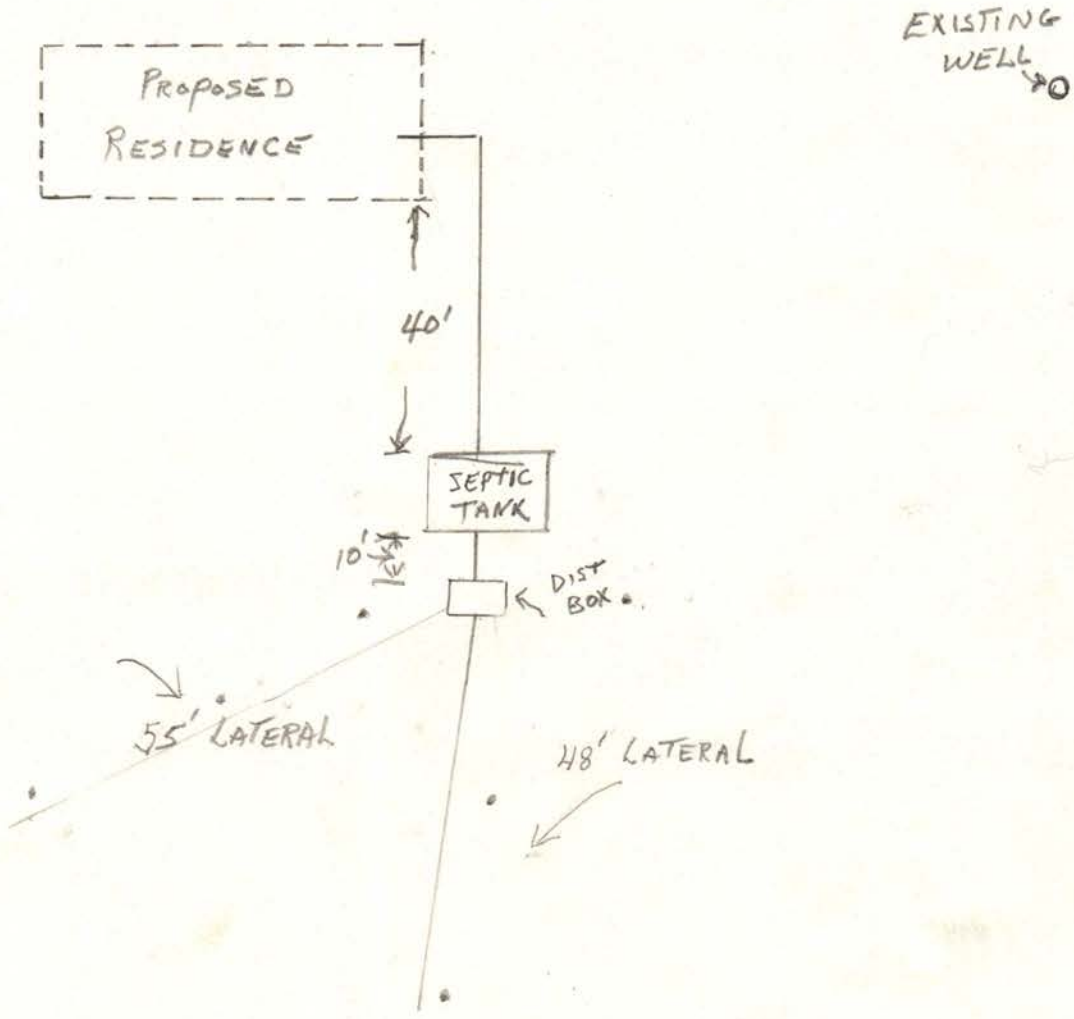
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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C

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: January 24, 1980

Minimum Design Requirement
1. Capacity of Septic Tank 1,000 gals.
2. Total Length of Laterals 238 ft.
3. With a Trench Width of 24" in.
4. Total Area of Lateral needed 476 sq.ft.

Jerrold C Hood
Signature of Reviewing Official