CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

File No. 62

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION

TYPE OF LICENSE OR PERMIT

January 16, 1969

THIS LICENSE OR PERMIT EXPIRES

Carl R. Yost

LICENSEE OR PERMITTEE

700 East Hillcrest Drive

ADDRESS

T 10N; R 7E; Sec. 26; Blk. 7; Lot 3; Hillcrest Heights

NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: Non-transferable

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
143-1535	10.0116	24.0114	6-2

SERIAL NO.	DATE	AMOUNT
13978	JA16 68	30.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

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

FORM HD-30(67) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 62

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

12 July 1968

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with Lincoln City Ordinance No. 9150, as described herein:

1. Legal description of property: Twp. 10N; Range 7E; Section 26;
Block 7; Lot 3; Addition *;
Street Address _____.

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. of Bedrooms 3. Describe: _____
_____
Other Use _____ [ ]
Describe: _____
_____

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

4. Distance to public sewer: _____ ft.

* Hillcrest Heights, Lincoln, Lancaster County, Nebraska.

Earl R. Yost
Signature of Applicant (owner or lessee)

700 East Hillcrest Drive
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 7/16/68. ACTION: Approved [X] Disapproved [ ]
Date Frwd. 7/16/68. Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 7/16/68. ACTION: Approved [X] Disapproved [ ]
Date Frwd. 7/16/68. Signature: R. F. Spahn

3. City Engineer: Date Rec'd. _____. ACTION: Approved [✓] Disapproved [ ]
Date Frwd. 7-16-68. Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

FINAL ACTION ON SITE CLEARANCE: Approved [ ] Disapproved [ ]

Date Applicant Notified: _____ Signature _____

FORM HD-33(67) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 432-7611)

FILE NO. 62

PROPERTY WHERE SOIL TESTED: BLK 7 LOT 3
Location: Township Hill Crest Heights
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: CARL R YOST
Address 2510 So 36th

Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
SHARPSBURG
Silty Loam ☒; Clay Loam ☐; Sandy Clay ☐

Dates of Tests: 7-13-68 to 7-14-68. Weather: Precip. ____ Temp. 90 F.

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	36	7-13	11 AM	7-14	11:00	7-14	11:00	34"	3:00		4 hr	28"	
2	36	7-13	11 AM	7-14	11:00	7-14	11:00	34	3:00		4 hr	27	
3	36	7-13	11 AM	7-14	11:00	7-14	11:00	34	3:00		4 hr	34	
4	36	7-13	11 AM	7-14	11:00	7-14	11:00	34	3:00		4 hr	15	
5	36	7-13	11 AM	7-14	11:00	7-14	11:00	34	2:00		4 hr	21	
6	36	7-13	11 AM	7-14	11:00	7-14	11:00	34	3:00		4 hr	22	

Sum of Percolation Rates 127
Average of Rates: 21.1
Mean of Rates:

Don Jamer
Signature of Person Conducting Test

Address 3645 Adams
Phone: 466-3706

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 15 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: July 15, 1968

Gerrold C. Hood
Signature of Reviewing Official

FORM HD-32a(67) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
Ordinance No. 9150

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 432-7611)

FILE NO. 62

SPECIFICATIONS

DATE: _____

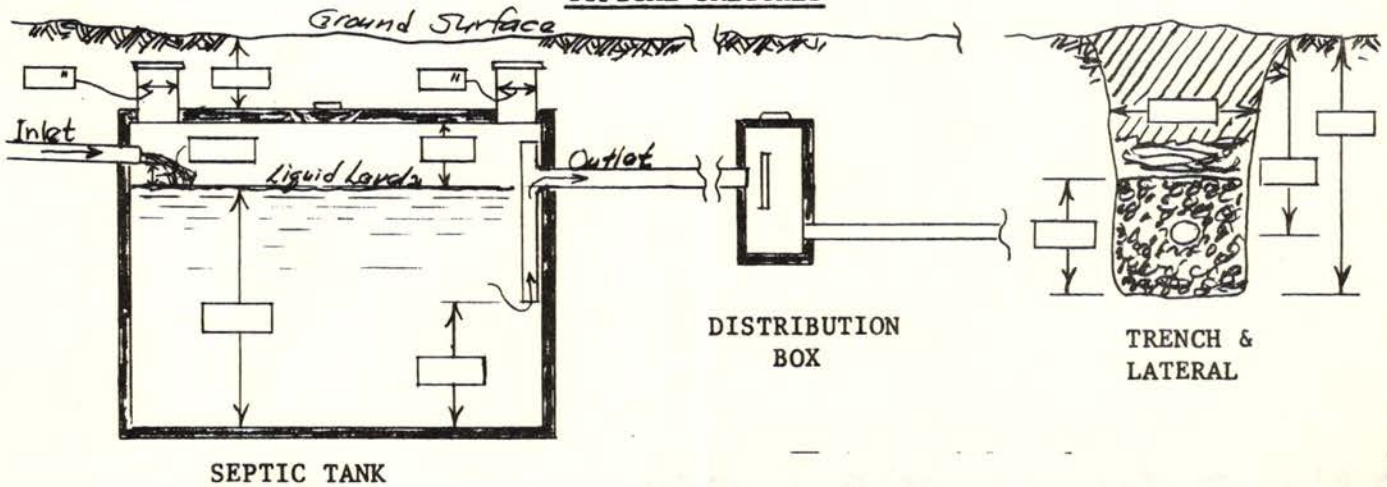
A. BUILDING SEWER:
1. Material CAST IRON; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 24 in.
3. Distance between dwelling and septic tank 23 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material CON.; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☒ (Company PRE-CAST) 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 ___ in.
7. Depth of top of tank below finished grade ___ in.
8. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

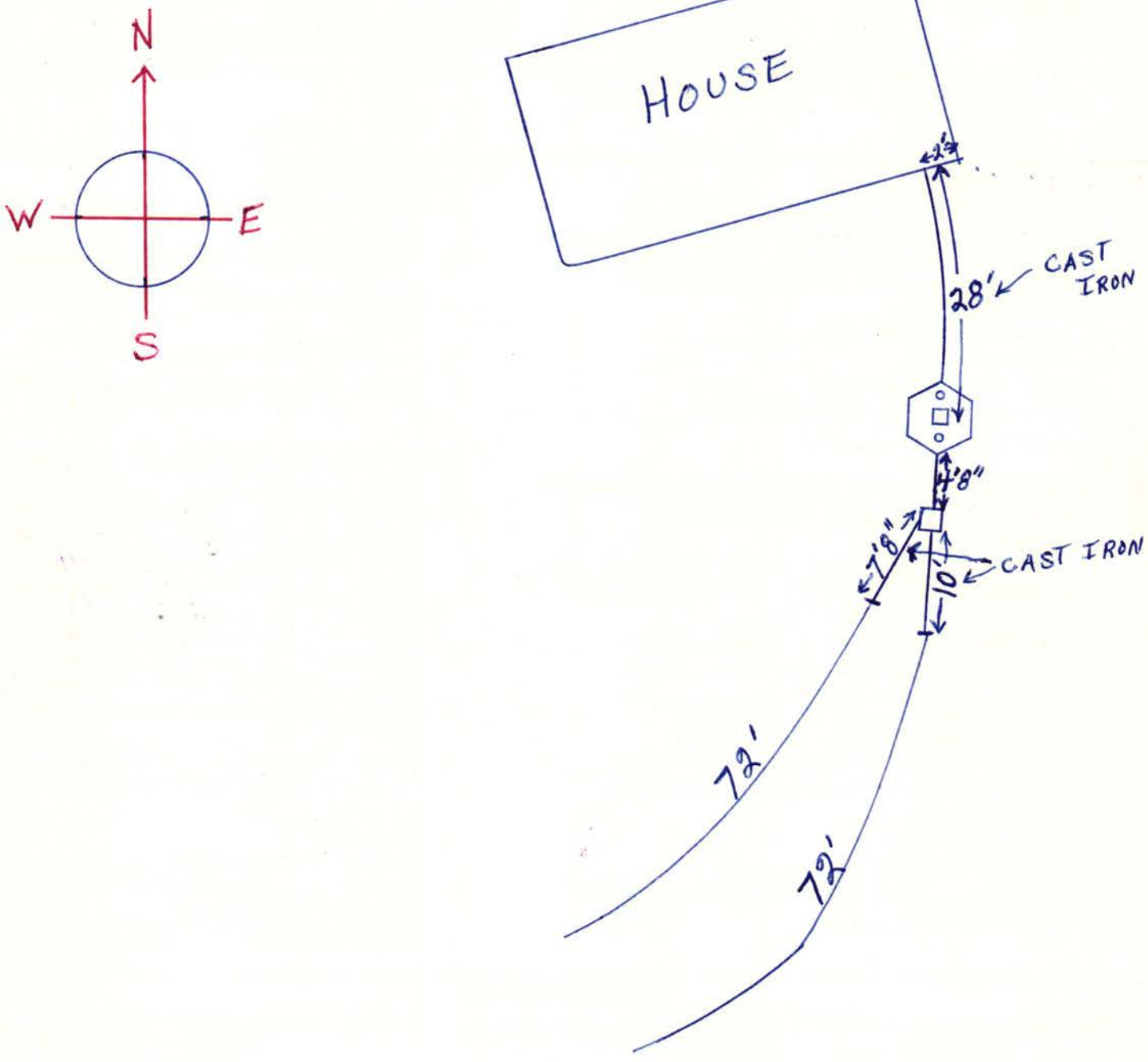
C. DISTRIBUTION BOX
1. Material CON; No. available outlets 5.
2. Factory Built: Yes ☒, (Company PRE-CAST) No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank 4'8" ft.
5. Serial Distribution: Yes ☒, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: CONCRETE HALF MOON
2. Lateral Lines: Depth below grade ___ in. Number 2; Length of each line 72 ft Total length of Laterals 144 ft.; Slope 4 in/100 ft. Diameter of pipe 24 in.; Shape ∩
Material: concrete ☒; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines 15 ft.
3. Trench Dimensions: Depth 48 in.; Width 48 in.
4. Filter Material: GRAVEL.
Depth of material from trench bottom ___ in.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line OVER 20 ft.
6. Percolation Rate: 15 minutes/inch

TYPICAL SKETCHES



Signature of Applicant



Obed October 11, 1968 J. C. H.