FILE NO. 1605

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

APRIL 10, 1980
THIS LICENSE OR PERMIT EXPIRES

Ronald Spahni %Paul Von Gillern, Route 3, Lincoln, NE 68505
LICENSEE OR PERMITTEE — ADDRESS

T10N, R7E, Section 26, Block 7, Lot 5, Addition Hillcrest Heights
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

58968 001 0 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

FILE NO. 1605

DATE: 10-8-79

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 N ; Range 7 E ; Section 26 ;
   Block 7 #: Lot 5 #: Addition Hillcrest Heights
   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: 1 Mile ft.

Spahni
Ronald Spahni
Signature of Applicant (Owner or Lessee)

c/o Paul von Gillern
RT 3
Address
Lincoln, Nebr 68505

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/10/79. Date Frwd. 10/10/79. ACTION: Approved ☒ Disapproved ☐ Signature: Gerald C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. 10-10-79. ACTION: Approved ☒ Disapproved ☐ Signature: Ernest H Brown

3. City or County Engineer: Date Rec'd. 10-10-79. Date Frwd. 10-10-79. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis D Bartels

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11-13-79 by: jw
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-13-79 By: James Wenceles

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
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Phone: 474-1541

B

FILE NO. 1605

PROPERTY WHERE SOIL TESTED:

Location: Township 10N ; Range 7E ; Section & ¼ Section 26 .
Property Dimensions: N 196.9 ft. x W 193.3 ft. Area: 1 ¼ acres. (Attach Sheet C with sketch of property).
E 315 S 148.8 →
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☑ .
Dates of Tests: 10-5-79 to 10-6-79 . Weather: Precip. 0 Temp. 70 .

OWNER: Ronald Spahrii
Address: Rt 3
Lincoln 68505

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	10/5	9:30 PM	10/6	10:00	10/6	10:00	6	2:00 PM	4 ¼	60 Min	1 ¾	60m 1 ¾
2										3 ¾		2 ¼	2 ¼
3										4 ½		1 ½	1 ½
4										4 ¼		1 ¾	1 ¾
5										5 ¼		¾	¾
6										5		1	1
7										3 ½		2 ½	2 ½
8										4 ¼		1 ¾	1 ¾
9										4 ½		1 ½	1 ½

Paul von Gillern
Signature of Person Conducting Test

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

Address 3308 N Palmer Phone 467-4792

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg silty clay loam
Date: October 10, 1979

Approved Percolation Rate (a)
A. 37 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
Lincoln, Nebraska 68502
Phone: 474-1541

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: October 10, 1979

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 208 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed 832 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: 474-1541

D

DATE: 11-12-79

FILE NO. _____

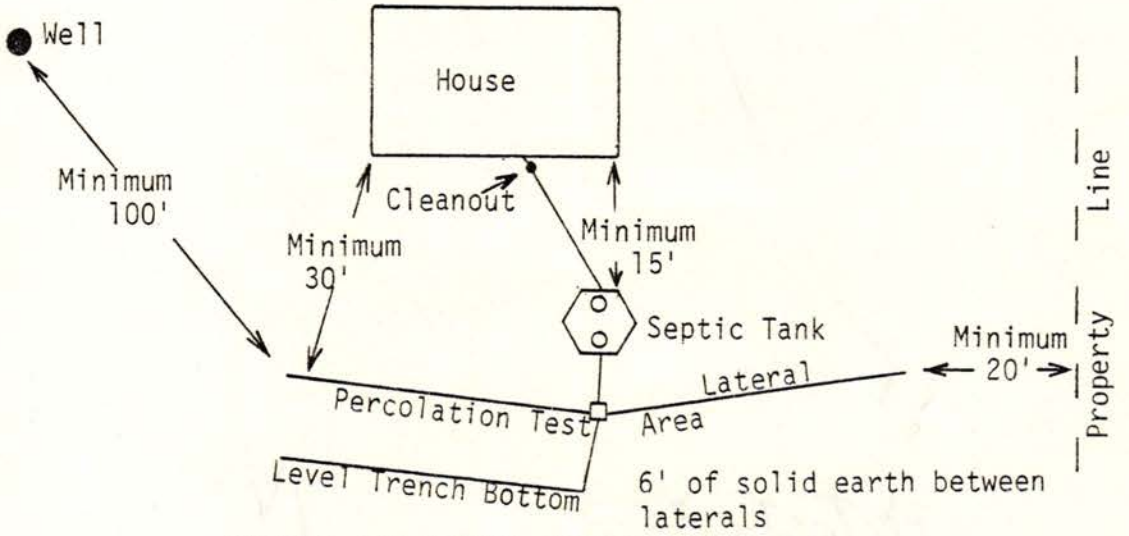
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor 48" in., or below basement floor ___ in.
3. Distance between dwelling and septic tank 40 ft.
4. Number of clean-outs 0.
5. Distances to:
Well or Suction Line 100 ft.; Stream ___ ft.; Pressure Line ___ ft.; Property Line ___ ft.

B. SEPTIC TANK:
1. Material Fiberglass; No. of compartments one.
2. Capacity 1500 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Lann & Glass)
4. Manholes: Over Inlet; diam. 18 in.
Over Outlet; diam. 18 in.
Riser Above ☑ Below ☐ Grade ___ in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☒
7. Depth of top of tank below finished grade 18 in.
8. Distances to:
Well or Suction Line 95 ft.; Stream ___ ft.; Pressure Line ___ ft.; Property Line ___ ft.

C. DISTRIBUTION BOX:
1. Material Plastic; Number - available outlets seven.
2. Factory Built: Yes ☒ No ☐
(Company ___)
3. Distance from Septic Tank 4'6" ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 12" or Perforated Pipe ___.
Material: fiberglass ☒ ; plastic ☐ ; concrete ☐ ; other ___.
2. Lateral Lines:
Number 3; Length of each line 93', 93', 28', ___, ___ ft.;
Total length of laterals ___ ft.;
Distance between lateral lines 12' ft.
3. Trench dimensions: Width 4' ft.;
Slope 0 1/2 in/100 ft.; Average Depth 3' 1/2" in.
4. Filter Material: Road Gravel
Depth of Material 18" in.
5. Distances to:
Well or Suction Line 100' ft.; Stream ___ ft.; Pressure Line ___ ft.; Property Line ___ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 11-12-79 INSTALLER Ralph Gibson

