FILE NO. 1514

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

OCTOBER 18, 1979
THIS LICENSE OR PERMIT EXPIRES

Stanley Jensen by Don Pentico 1520 Pioneers Blvd., Lincoln, NE
LICENSEE OR PERMITTEE ADDRESS

T10N, R7E, Section 26, Block 7, Lot 6, 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
110.15	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
018754		

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

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

FILING FEE: $ 60.00

FILE NO. 1514

DATE: APRIL 17, 1979

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 6 : Addition Hillcrest Heights
   Street Address _____

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms ~~4~~ 4. Describe _____

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

4. Distance to public sewer: - N/A - ft.

Stanley Jensen by Don Prentice
Signature of Applicant (Owner or Lessee)

1520 PIONEERS BLVD.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/18/79. Date Frwd. 4/18/79. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 4-18-79. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis

3. City ~~or County~~ Engineer : Date Rec'd. 4-18-79. Date Frwd. 4-18-79. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 7-18-79 by: jw
Date: _____ by: _____
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7-18-79 By: James Weverka

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: 474-1541

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FILE NO. 1514

PROPERTY WHERE SOIL TESTED:

Location: Township 10N ; Range 7E ; Section & ¼ Section 26 .
Property Dimensions: 205 ft. x 335 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: _____ to _____. Weather: Precip. _____ Temp. _____.

OWNER: Stanley Jensen

Address: 1520 Pioneers Blvd.

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	48"	4/15	9:00	4/15	2:00	4/16	6:00	8	6:30	6⅞	30	1⅛	
2	48"	"	"	"	"	"	6:00	8½	6:30	7¾	30	¾	
3	50"	"	"	"	"	"	6:10	6¼	6:40	5	30	¾	
4	51"	"	"	"	"	"	6:10	6½	6:40	5⅝	30	1⅜	
5	54"	"	"	"	"	"	6:20	6½	6:50	5¾	30	¾	
6	51"	"	"	"	"	"	6:20	8	6:50	7¼	30	¾	

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

Don Prentice Pottko Inc.
Signature of Person Conducting Test

Address 1520 Pioneers Bl. Phone 423-0121

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): Sharpsburg Silty Clay Loam

Date: April 18, 1979

Approved Percolation Rate (a)
A. 32 min./inch
B. _____ min./inch
C. _____ min./inch

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 ☐

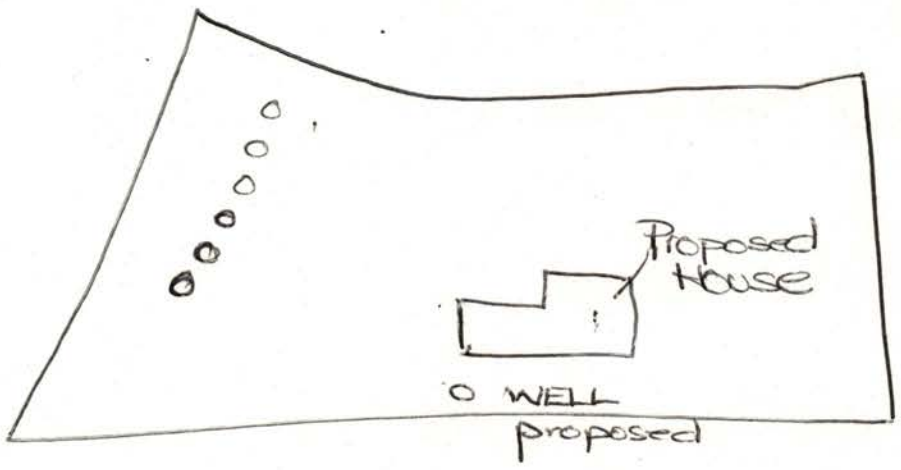
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

FILE NO. 1514

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



REVIEWING ACTION

Remarks: _____

Date: April 18, 1979

Minimum Design Requirement 1250
1. Capacity of Septic Tank ~~1000~~ 1250 gals.
2. Total Length of Laterals ~~344~~ 344 ft.
3. With a Trench Width of 36 in.
4. Total Area of Lateral needed ~~774~~ 1033 sq.ft.

Gerrold 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: _____

FILE NO. _____

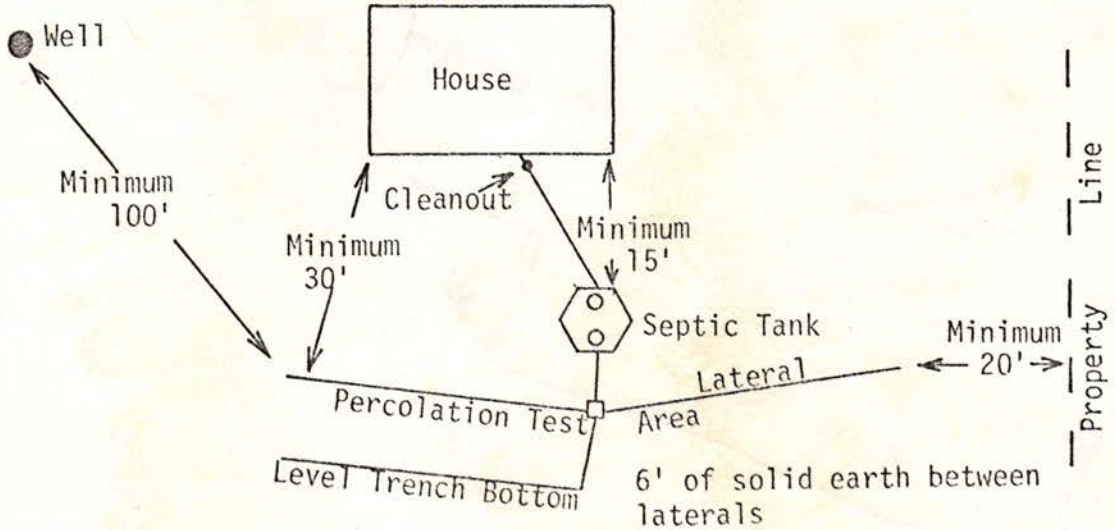
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 6 in.
3. Distance between dwelling and septic tank 30 ft.
4. Number of clean-outs 2 .
5. Distances to:
Well or ~~Suction Line~~ 86 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 37 ft.

B. SEPTIC TANK:
1. Material Fiberglass ; No. of compartments 1 .
2. Capacity 1250 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Calvert)
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. _____ 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 40 in.
8. Distances to:
Well or ~~Suction~~ Line 76 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 37 ft.

C. DISTRIBUTION BOX:
1. Material Plastic ; Number - available outlets 7 .
2. Factory Built: Yes ☐ No ☐
(Company Corrugation)
3. Distance from Septic Tank 10 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 4 ; Length of each line 90 , 100 , 80 , 74 , _____ ft.;
Total length of laterals 344 ft.;
Distance between lateral lines 8 ft.
3. Trench dimensions: Width 3 ft.;
Slope 6 in/100 ft.; Average Depth 32 in.
4. Filter Material: Gravel
Depth of Material 18 in.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line 20 ft.; Property Line 20 ft.

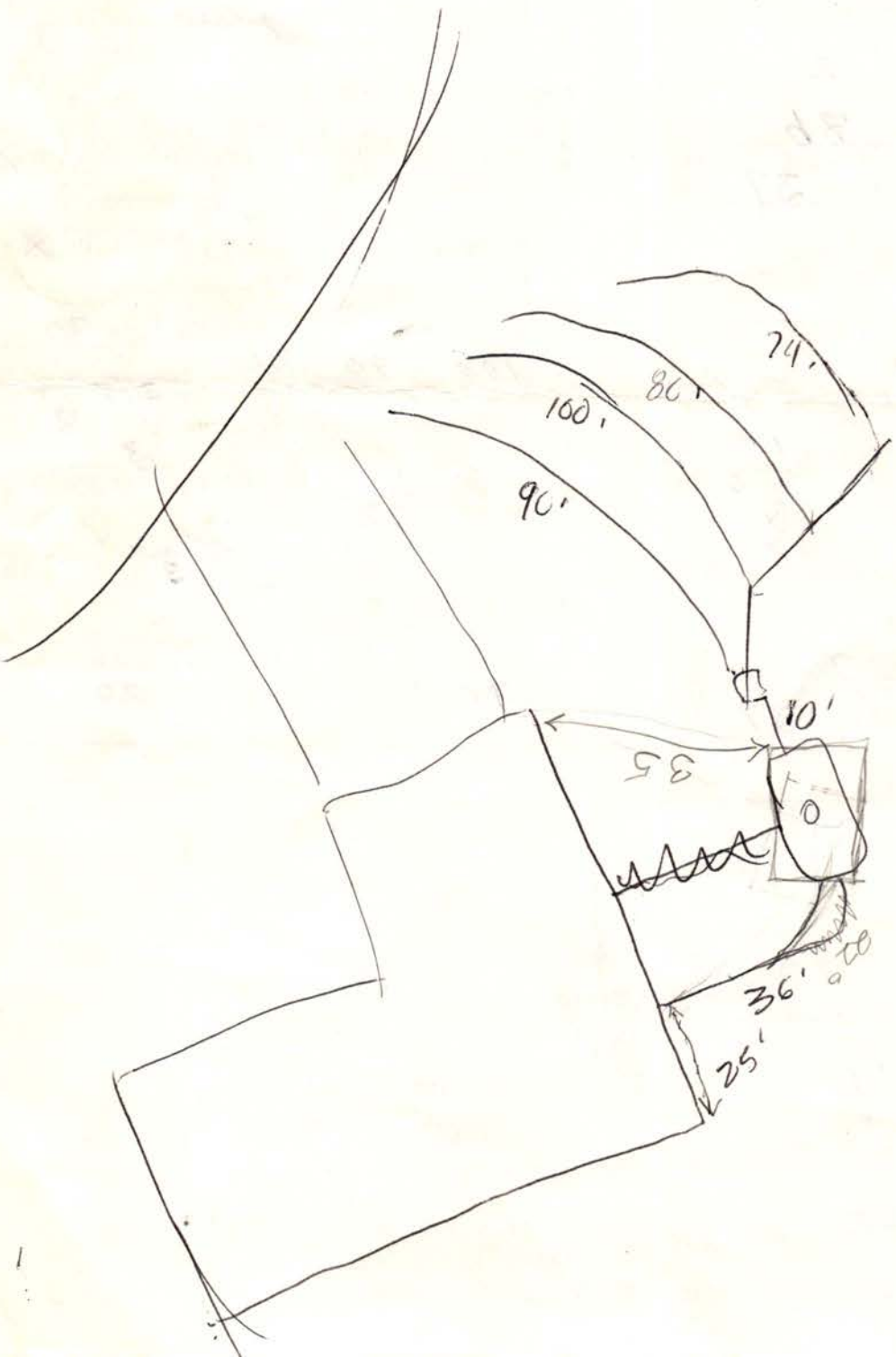


TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 7/18/79 INSTALLER Pottyco Plumbing

N



Survey Record

BROOKINGS S.D. #57006
1630 ELMWOOD DR
STANLEY G. JENSEN

LANCASTER COUNTY, NEBRASKA

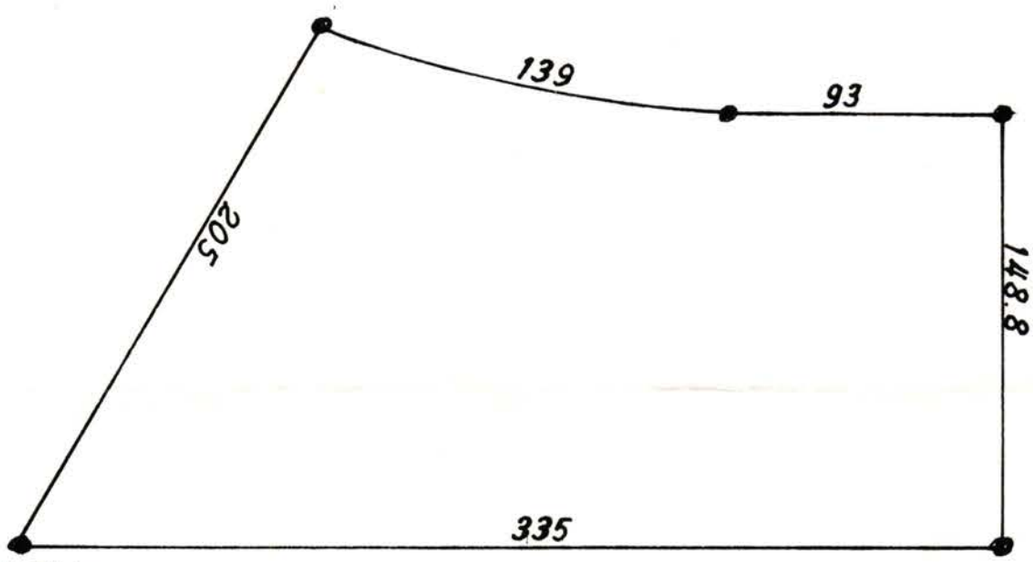
Survey of: Lot 6, Block 7 Hillcrest Heights

Section 26 **T** 10 **N,** **R** 7 **E of 6th P.M.**

Survey No. .....**(To be assigned by County Surveyor)**

Date March 23 **19** 79 **Weather**.....





Field Notes:

Show descriptions of corners found and restored; distances chained; angles measured, if any; courses and bearings of irregular tracts surveyed; and ties taken to corners. Use reverse side if necessary.

●-Indicates corners found

Signed this 7 **day of** April **19** 79

Name Eugene R. Schiefelbein

Surveyor's license No. L.S. 288

Land Surveyor's Seal

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: Sept 25, 1979

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☒ Evaluation of the Individual Water Supply Fluoride also
☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 10N Lancaster; Range R7E; Section 26;
Block 7; Lot 6; Addition Hillcrest Heights Addition.
Street Address 930 Anthony Lane.
Directions on how to get to property 1/2 mi E of 84th & O then S 0.6 mi on E side of road.
Location of well SE of house 50 ft.
Where is tap: Inside ☒ Outside ☐ Sillcock on N & S side.

	NAME	ADDRESS	PHONE
Present Owner:	copy Stanley Jensen	930 Anthony Lane	483-6124 472-6023
Tenant:	" "		
Lending Agency:	original First Federal	135 N Cother PO box 5204	475-0521

(Do not write below double lines)

Health Department: Date Received 9/26/79
Received $45.00 Check ☒ Cash ☐

Site Visits: Date 10-1-79 by mm
Date _____ by _____
Date _____ by _____

Stanley J Jensen
Signature of Applicant
930 Anthony Ln.
Address

PRELIMINARY STATUS -- DATE 10-1-79

Water System:
Approved ☒ Disapproved ☐

Sewage Disposal System:
Approved ☒ Provisional Approval ☐
Disapproved ☐

Corrections Required or Reasons for Disapproval Comment Bact samples collected [illegible]

☐ See Attached Letter.

FINAL APPROVAL -- DATE 10-10-79

Water System ☒ . Sewage Disposal System ☒ . By [signature]

Form Number 20215-0878