FILE NO. 2044

CITY OF LINCOLN NEBRASKA

October 5, 1983

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

APRIL 5, 1984
THIS LICENSE OR PERMIT EXPIRES

LARRY MARTINEZ — 7120 EASTBOROUGH — LINCOLN, NE 68505
LICENSEE OR PERMITTEE — ADDRESS

T10N; R7E; Sec. 26; Bk 8; Lot 2; Addition: Hillcrest Heights
NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NONTRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 60.00	$	$	$	$ 60.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
018754	XXXXXX 110.16	XXXXXX 148.14	XXXXX 6-2

SERIAL NO.	DATE	AMOUNT
65571	83	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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2044

DATE: Oct 5, 1983

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: Replot Lot-C and part of Lot-D
   Twp. 10N ; Range 7E ; Section 26 ;
   Block 8 : Lot 2 : 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: _____ ft.

Larry Martinez
Signature of Applicant (Owner or Lessee)

7120 East Burnham (464-8188
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/5/83. Date Frwd. 10/5/83. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 10-5-83. Date Frwd. 10-5-83. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Boeshart

3. City or County Engineer: Date Rec'd. 10/5/83. Date Frwd. 10/5/83. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bazelak

REMARKS OR REASONS FOR DISAPPROVAL WELL PERMIT NOT RECIEVED YET.

Site Visits:
Date: 7/11/84 by: J.C.H. * SWITCHED TO EXPERIMENTAL AT TIME OF INSTALLATION.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7/17/84 By: Jerrold C. Hood *

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

* EXPERIMENTAL, PROVISIONAL APPROVAL

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: 471-7800

B

FILE NO. 2044

PROPERTY WHERE SOIL TESTED: Hillcrest Heights

Location: Township 10 ; Range 7-E ; Section & ¼ Section 26 .
Property Dimensions: _____ 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: Aug 20 to 21st . Weather: Precip. _____ Temp. _____ .

OWNER: Larry Martinez

Address: 7120 Eastborough

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												1½	
2												1	
3												1¾	
4												¾	
5												2	
6												1¼	

John Stuhmyer
Signature of Person Conducting Test

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

Address 4401 No. 27th Phone 467-1627

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: October 5, 1983

Approved Percolation Rate (a)
A. 21 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hoos
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. 20644

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

REVIEWING ACTION

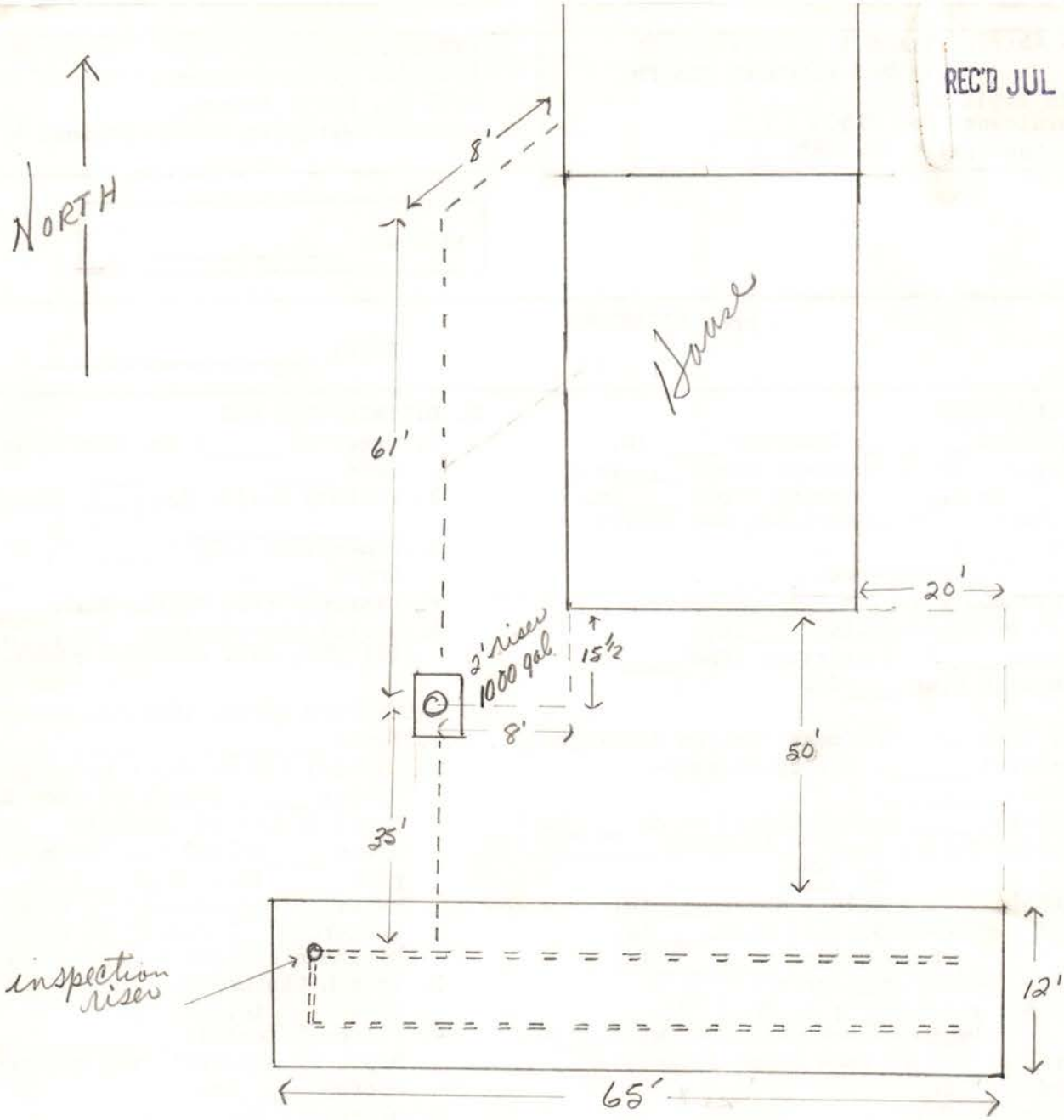
Remarks: _____

Date: October 5, 1983

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 641 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

REC'D JUL 1 7 1984



4" sched 30 plastic
4" sched 30 drain pipe in lateral

From Strohmyer Ex.
467-1627

84 +1 4 Anthony Lane
LARRY MARTINEZ