CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 865

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

December 23, 1976
THIS LICENSE OR PERMIT EXPIRES

Glenn Holthus
LICENSEE OR PERMITTEE

6918 Aylesworth
ADDRESS

T11N: R5E: Sec. 26: Lot 17 I.T.:
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	
110.15	110.16	148.14	6-2	
SERIAL NO. 624-1535	DATE	AMOUNT		

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH DEPARTMENT

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 865

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

DATE: _____

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 11N ; Range 5E ; Section 26
Block _____; Lot 17I.T.; Addition _____
Street Address _____

2. Property Use: Residential _____ ☒ ; Commercial _____ ☐
No. of Bedrooms 3 . Describe: _____
Other Use _____ ☐
Describe: _____

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

4. Distance to public sewer: _____ ft.

Mrs Glenn Holthus
Signature of Applicant (Owner or Lessee)

6918 aylesworth
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 6/23/76. Date Frwd. 6/23/76. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 6-23-76. Date Frwd. 6-23-76. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

3. City or County Engineer: Date Rec'd. 6/23/76. Date Frwd. 6/23/76. ACTION: Approved ☒ Disapproved ☐ Signature: Joe Bred

REMARKS OR REASONS FOR DISAPPROVAL _____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 865

DATE: _____

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 11N ; Range 5E ; Section 26 ; Block _____ ; Lot 17 I.T. ; 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. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Mrs Glenn Holthus
Signature of Applicant (owner or lessee)

6918 aylesworth
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; _____
Filing Fee: $ 30.00

2. Site Visits:
Date: 8-17-76 by: [illegible]
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ] 8/23/76
by: Jerrold C. Rood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-17-76 by: Ron Mynard

FORM HD- 43(73) 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 475-6221)

FILE NO. 865

PROPERTY WHERE SOIL TESTED:
Location: Township 11 ; Range 5
Section & ¼ Sect. 26
Property Dimensions: ___ft. x ___ ft.
Area: _____acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☒

Owner: Glen Holthus
Address 6918 Hayes Wortth

Dates of Tests: June 21-76 to June 22-76 Weather: Precip. 0 Temp. 80's 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	32"	6/21	6 PM	6/22	6 PM	6/22	6 PM	6"	8 PM	1½	30	¾	
2										1		1	
3										2		¾	
4										2½		¾	
5										3		½	
6										1		1	

Robert D Johnson
Signature of Person Conducting Test

Address 2618 no 33rd
Phone: 432 3595

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

(Do not write below this line)

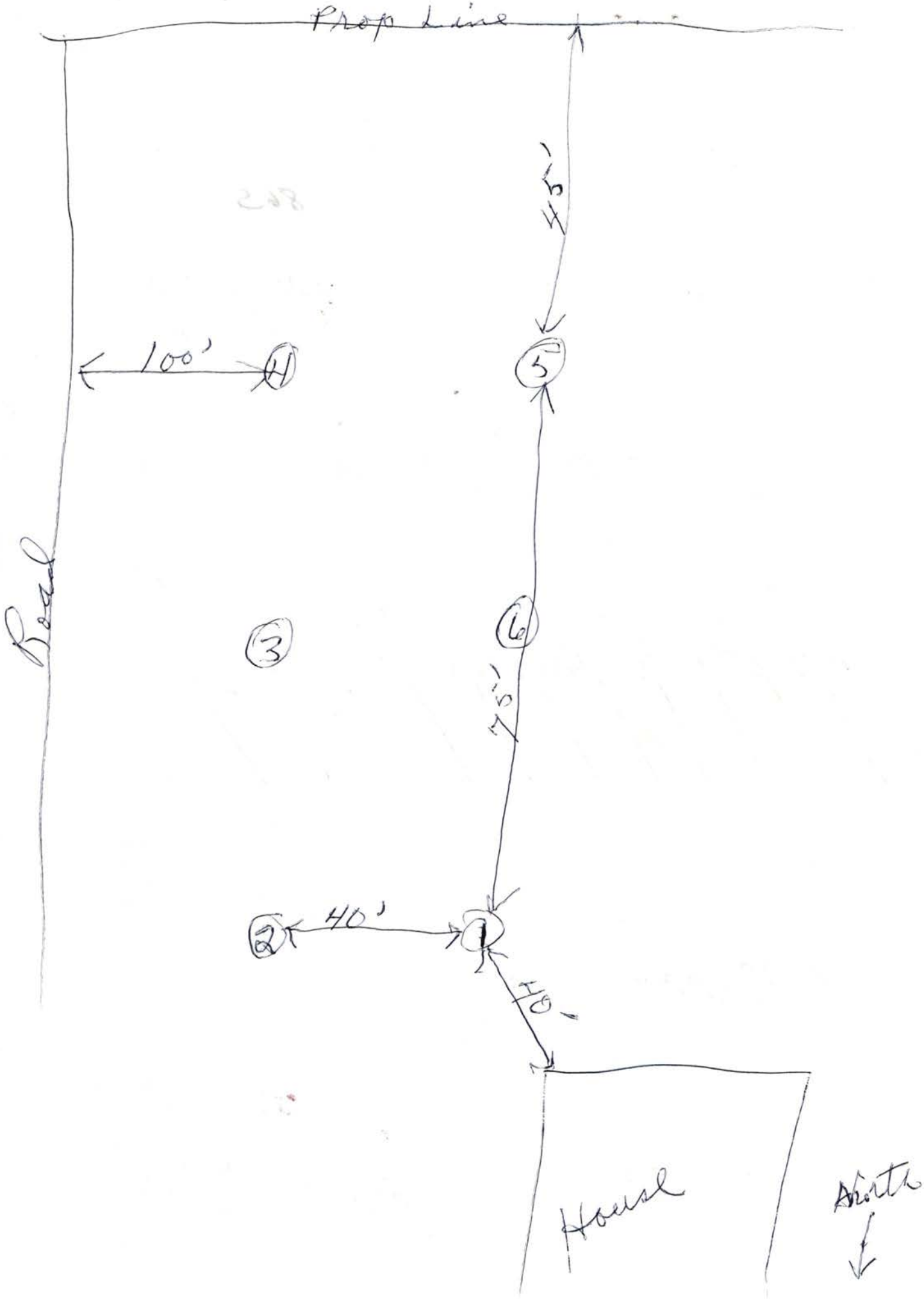
REVIEWING ACTION

REMARKS:

Approved Percolation Rate(s)
A. 37 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: June 23, 1976

Gerald C. Hoal
Signature of Reviewing Official


Prop Line
45'
100'
4
5
Road
3
6
75'
2
40'
1
40'
House
North

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. _____

SPECIFICATIONS

DATE: _____

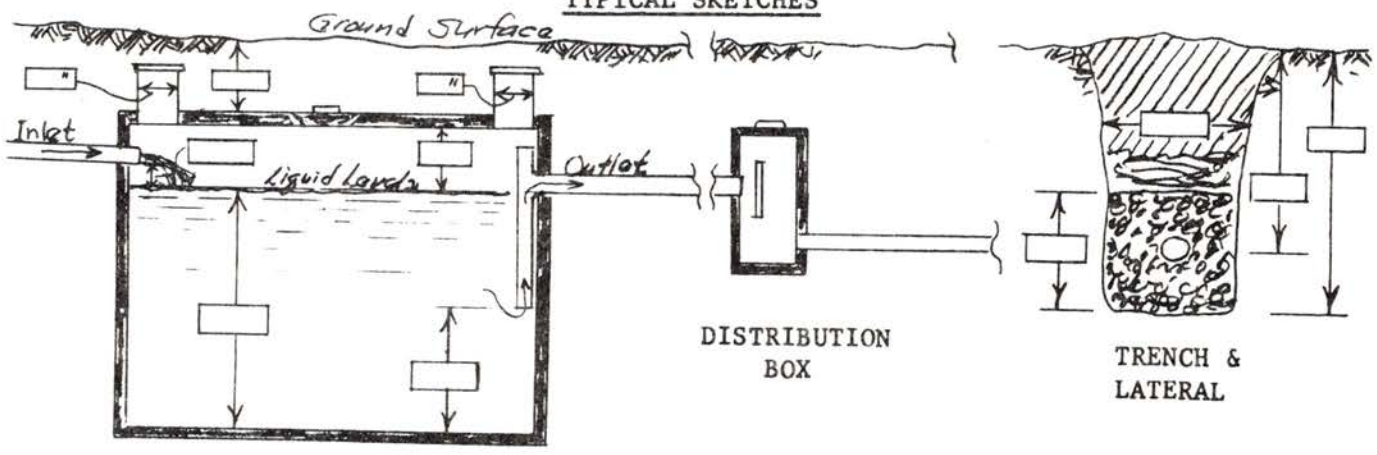
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 51" in.
3. Factory Built: Yes ☒ (Company Pre Cast Step) 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 1 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 Concrete No. available outlets 5.
2. Factory Built: Yes ☒, (Company Pre Cast Step Co) No ☐
3. Dimension: Length 20 in.; Width 14 in. Depth 14 in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half moon
2. Lateral Lines: Depth below grade ___in. Number ____; Length of each line ___ft Total length of Laterals ____ft.; Slope ____in/100 ft. Diameter of pipe 20 in.; Shape Half moon Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____ Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48" in.
4. Filter Material: road gravel. Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Signature of Applicant

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. 865

SPECIFICATIONS

DATE: _____

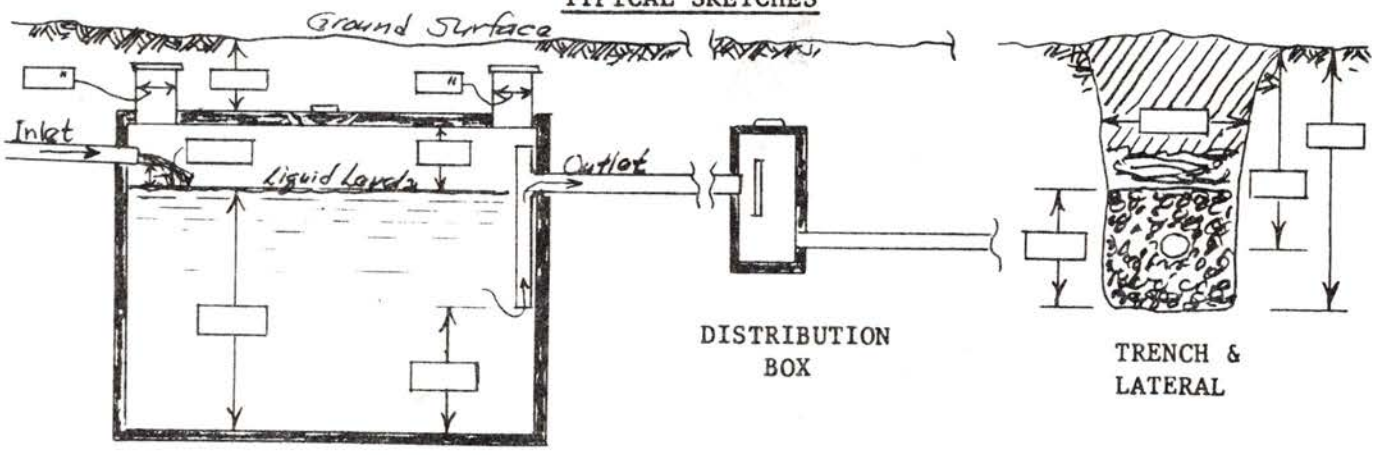
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 51 in.
3. Factory Built: Yes ☒ (Company Pre Cast Step) 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.

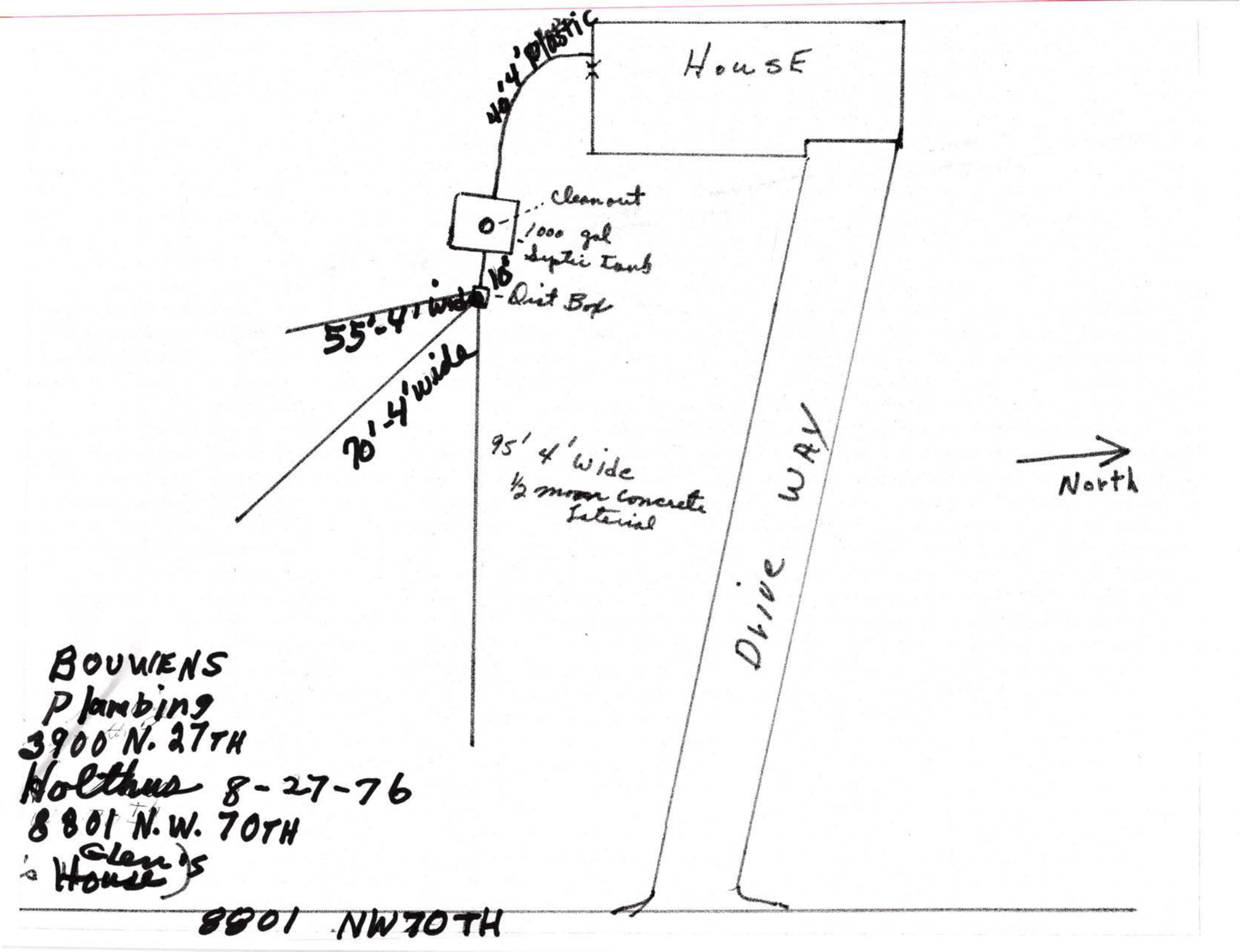
C. DISTRIBUTION BOX
1. Material Concrete No. available outlets 5.
2. Factory Built: Yes ☒, (Company Pre Cast Step Co) No ☐
3. Dimension: Length 20 in.; Width 14 in. Depth 14 in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half-moon
2. Lateral Lines: Depth below grade ___in. Number 3; Length of each line ___ft Total length of Laterals 208 ft.; Slope ____in/100 ft. Diameter of pipe 20 in.; Shape Half moon Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____ Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 48 in.
4. Filter Material: road gravel. Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



Signature of Applicant


40'-4" Plastic
HOUSE
Cleanout
1000 gal Septic Tank
18'
Dist Box
55'-4' wide
70'-4' wide
95' 4' Wide
½ moon Concrete Material
DRIVE WAY
North
BOUWENS
Plambing
3900 N. 27TH
Holthus 8-27-76
8801 N.W. 70TH
Glen's House
8801 NW70TH

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

COPY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☐ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address L 17 NE 26-11-5, 8805 Northwest 70th Street
Twp____ Range____ Section____ 1/4____ 1/4____ Block____ Lot____ Addition Malcolm, Ne 68402
Directions to Property HW 34 TO NW 70 3/4 MILE NORTH WEST SIDE OF ROAD

Location of Well NORTH OF GARAGE Tap Location: Inside ☐ Outside ☒
Location of Sewage System____ Year Installed 1976

	NAME	ADDRESS	PHONE
Present Owner:	GLENN HOLTHUS	8805 NW 70TH MALCOLM NEBR	402-796-2357
Tenant/Buyer:			
Return to:			

Signature of Applicant Glenn Holthus Address 8805 NW 70 MALCOLM, NEBR Date 2/12/04

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 02/17/04
Initials JS
Amount 200.00
Check No. 1621

DATA ENTRY
Date __/__/__
Case No.
Initials

PRELIMINARY STATUS--By Ron Marquardt **DATE:** 2/17/04

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM		Additional Site Visits
Construction	☒	☐	Approved	☒	Date__/__/__ by__
Bacteria	☒ 0 /ml	☐ ____ /ml	Provisional	☐	Date__/__/__ by__
Nitrate	☒ 5.7 ppm	☐ ____ ppm	Disapproved	☐	Date__/__/__ by__

Comments: Recommend checking to see if septic tank needs pumping and that tank is water tight

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved ☒ **SEWAGE DISPOSAL SYSTEM:** Approved ☒ Provisional Approval ☐

Approved by Ron Marquardt, R.S. Date 2/19/04

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

Rec'd 2-19-04 $200

P24882-21

White - Applicant after approval Yellow - Environmental Health

Revised/Reprint: 10-95