LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2407-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

APRIL 2, 1987 — THIS PERMIT EXPIRES

DAVID E. GEIS — ISSUED TO

BOX 46 GARLAND, NE 68360 — ADDRESS

T11N; R5E; Sec 18; Lot 41 & 42 I.T.; NW 126 & West Bluff Rd.
LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
Mg	10-3-86	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

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

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DATE: Sept 29 1986

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. 11N ; Range 5E ; Section 18 ;
   Block ~~RTSE¼~~ : Lot 41+42I, Addition
   Street Address NW 126th & West Bluff Rd.

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 1 . Describe

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

4. Distance to public sewer: Not Applicable ft.

David E Geis
Signature of Applicant (Owner or Lessee)

Box 46 Garland NE 68360
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/2/86. Date Frwd. 10/3/86. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 10-3-86. Date Frwd. 10-3-86. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bowers

3. City or County Engineer: Date Rec'd. 10/3/86. Date Frwd. " . ACTION: Approved ☐ Disapproved ☐ Signature: Don Thomas

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 6/29/87 by: J. C. H. Sewer + Water only
Date: 6/30/87 by: J. C. H.
Date: by:

INSTALLATION FINAL WRITTEN APPROVAL
Date: By:

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
Lincoln, Nebraska 68502
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B

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PROPERTY WHERE SOIL TESTED:

Location: Township 11 N ; Range 5 ; Section & ¼ Section SE¼ & 18
Property Dimensions: 1468 ft. x 304 ft. Area: 10 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☒ ; Clay Loam ☐ .
Dates of Tests: Sept 30 to Oct 1. Weather: Precip. 48 hrs 1½" Temp. 60's.

OWNER: DAVE GEIS
Address: Box 46 GARLAND NE 68360

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	9-30	5:00	10-1	5:30	10-1	5:30	6"	9:30	4"	30	2"	15
2	36	9-30	5:00	10-1	5:30	10-1	5:30	6"	9:30	5½"	30	½"	60
3	36	9-30	5:00	10-1	5:30	10-1	5:30	6"	9:30	4¾"	30	1¼"	24
4	36	9-30	5:00	10-1	5:30	10-1	5:30	6"	9:30	4¾"	30	1¼"	24
5	36	9-30	5:00	10-1	5:30	10-1	5:30	6"	9:30	4"	30	2"	15
6	36	9-30	5:00	10-1	5:30	10-1	5:30	6"	9:30	5¼"	30	¾"	40

David Geis
Signature of Person Conducting Test

Sum of Percolation Rates: 178
Average of Rates: 29.6
Mean of Rates:

Address Same as above Phone 588-2426

(Do not write below this line)

REVIEWING ACTION

Remarks: System should be built high
Soil Type (SCS): Kennebec Silt Loam
Date: OCTOBER 2, 1986

Approved Percolation Rate (a)
A. 25 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Wood
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 ☐

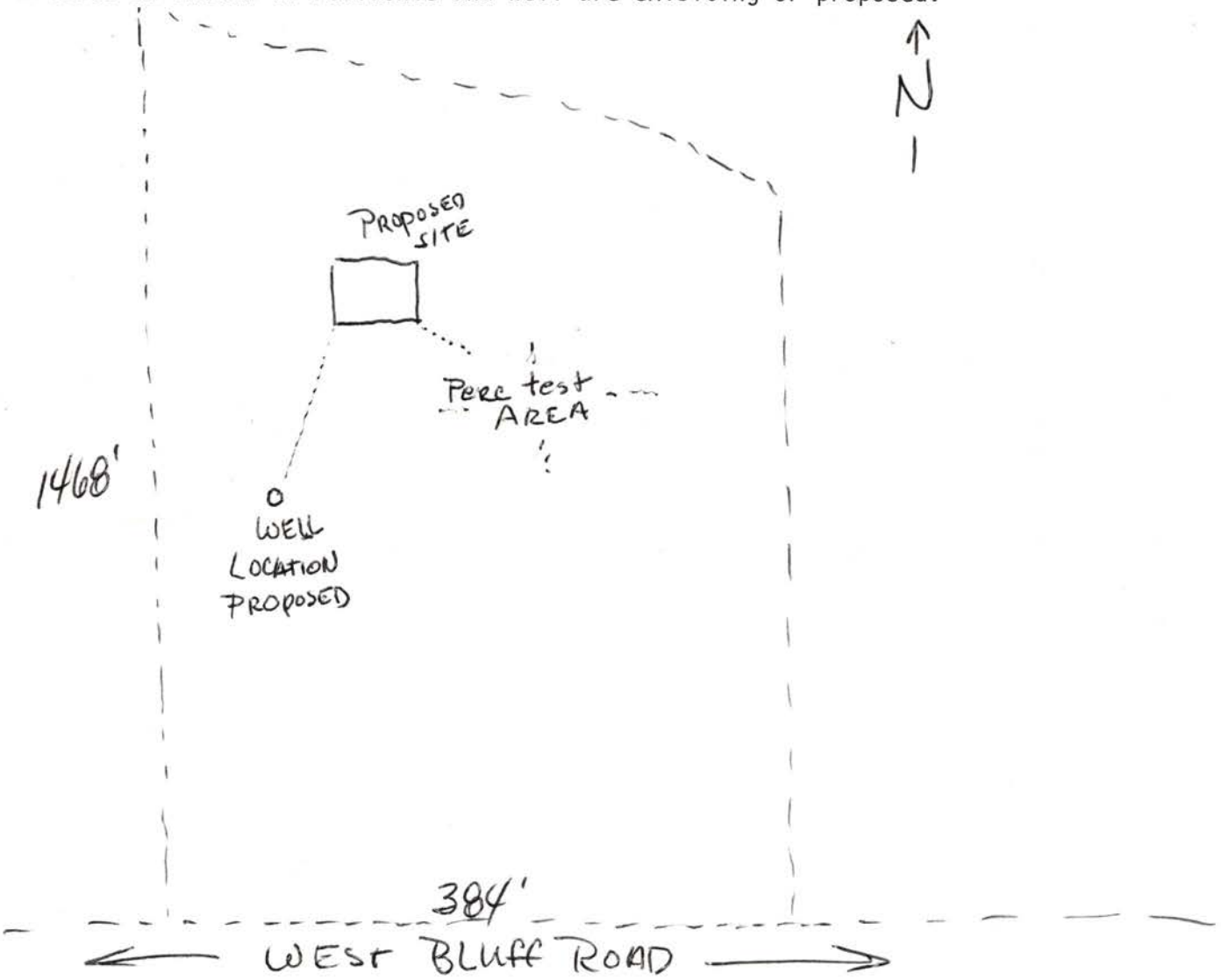
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
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C

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 3, 1986

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 230 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official