LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 90380010601

Issued 04/06/90
Expires 10/06/90

ESTABLISHMENT

DENIS APPLEBEE
T10N R8E SEC 21
LOT 27

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

DENIS APPLEBEE
14441 DANVES ST A
WAVERLY NE 68462

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE AMOUNT

Paid

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

9038001060

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: $ 150.00

FILE NO. _____

DATE: 3-26-90

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. 10N ; Range 8E ; Section 21 ;
   Block _____ : Lot 27 & 29 : Addition IT
   Street Address _____

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

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

4. Distance to public sewer: NA ft.

402-786-5405

Dennis K Applebee
Signature of Applicant (Owner or Lessee)

14441 DANIELS, WAVERLY, Ne 68462
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 3/26/90 . Date Frwd. 4/9/90 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 4-9-90 . Date Frwd. 4-9-90 . ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bauma

3. City or County Engineer: Date Rec'd. _____ . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: Jim Flowers

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 8-8-90 by: rm
Date: _____ by: _____
Date: _____ by: _____

EXPERIMENTAL PROVISIONAL [shallow laterals in Pawnee soil]

INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 8-14-90 By: Ron Morgan

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

FORM 23-43

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

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
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: 5-14-90 to 5-15-90. Weather: Precip. _____ Temp. _____

OWNER: Dennis Attleberg

Address: 440 So 13th Lincoln

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	22	5-14	8A	5-14	12	5-15	11A	6	12A	4¾	60	1¼	
2	↓								↓	4⅞	↓	1⅛	
3	↓								↓	4⅞	↓	1⅛	
4								↓		4⅞	↓	1⅛	
5										4⅞		1⅛	
6										4¾		1¼	

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

J. J. Sintek
Signature of Person Conducting Test

Address 6710 No 7th Lin Phone 435-8868

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): _____

Date: _____

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

_____
Signature of Reviewing Official

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

Test Taken 1/4 mi So of 148+ Plum Ridge Rd.

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
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: 3-17-90 to 3-18-90. Weather: Precip. 0 Temp. 40°.

All hole's had water in From Pre-Test

OWNER: Denis K. Applebee
Address: 14441 Danvers Waverly NE. 68462
474-3559

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"	3-17	2:00 pm	3-18	10:30 Am	3-18	10:30 Am	6"	11:00 Am	5 7/8"	30m	1/8"	
2	36"	3-17	2:00 pm	3-18	10:30 Am	3-18	10:30 Am	6"	11:00 Am	5 7/8"	30m	1/8"	
3	36"	3-17	2:00 pm	3-18	10:30 Am	3-18	10:30 Am	6"	11:00 Am	5 7/8"	30m	1/8"	
4	36"	3-17	2:00 pm	3-18	10:30 Am	3-18	10:30 Am	6"	11:00 Am	5 7/8"	30m	1/8"	
5	36"	3-17	2:00 pm	3-18	10:30 Am	3-18	10:30 Am	6"	11:00 Am	5 7/8"	30m	1/8"	
6	36"	3-17	2:00 pm	3-18	10:30 Am	3-18	10:30 Am	6"	11:00 Am	5 7/8"	30m	1/8"	

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

Mike Hoogland
Signature of Person Conducting Test

Address 2700 Dan Ave Lincoln Phone 464-0638

(Do not write below this line) Pre-Cast Step Co.

REVIEWING ACTION

Remarks: Too slow for conventional septic
Soil Type (SCS): Dawnee Clay Loam
Date: March 26, 1990

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

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
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D

DATE: _____

FILE NO. _____

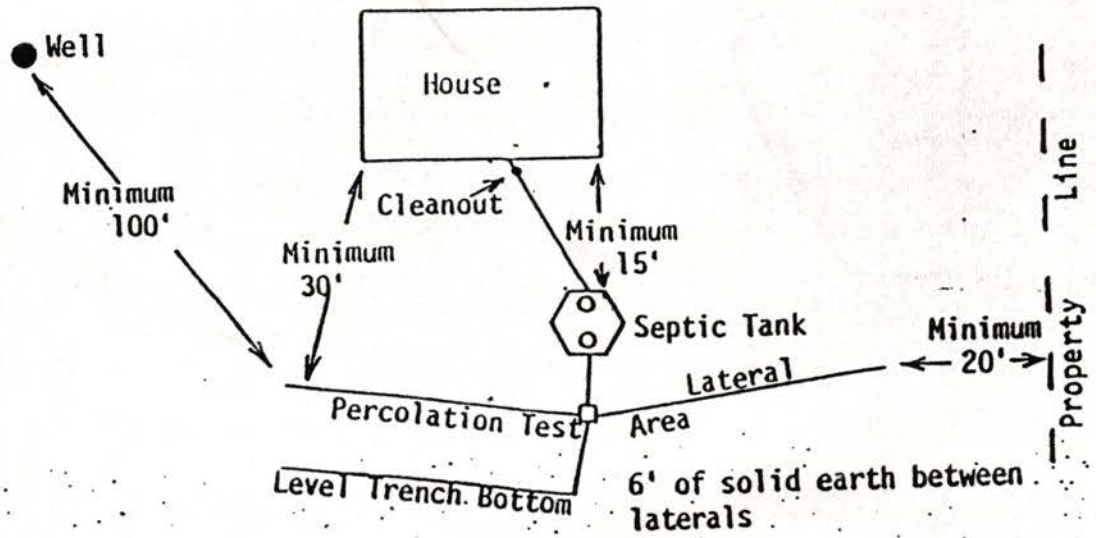
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Schedule 40; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 37 ft.
4. Number of clean-outs _____.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

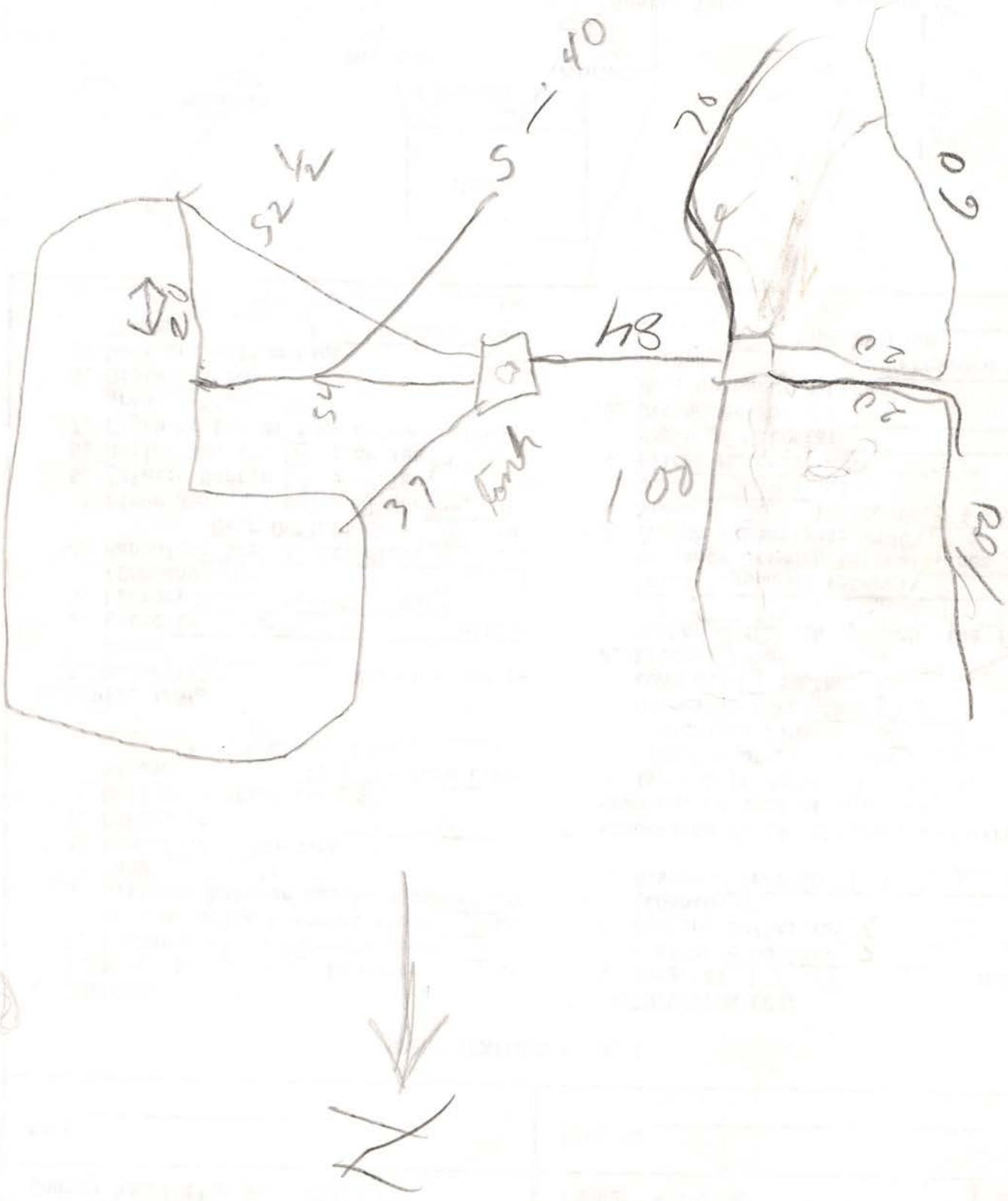
B. SEPTIC TANK:
1. Material Cement; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Precast)
4. Manholes: Over Inlet; diam. 4 in.
Over Outlet; diam. 4 in.
Riser Above ☐ Below ☒ Grade 2 in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 12 in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Plastic; Number - available outlets 7.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank 80 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 100, 100, 70, 60, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines 20 ft.
3. Trench dimensions: Width 36 ft.;
Slope 2 in/100 ft.; Average Depth 20 in.
4. Filter Material: Gravel
Depth of Material 12 in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


S - 40
70
60
48
25
25
37 Fork
100
80