LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2243-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

FEBRUARY 20, 1986 — THIS PERMIT EXPIRES

ROBERT A. PACULA — ISSUED TO

4000 NO. 9 STREET LINCOLN, NE 68521 — ADDRESS

T11N; R5E; Sec 9; Lot P 13 I.T.; 12205 NW 98 Street — 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
BB	2/25/5	

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: 474-1541

A

FILING FEE: $ 60.00

FILE NO. 2243-C

DATE: 8-20-85

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. 11 No; Range 5E ; Section 9 ;
   Block ____ : Lot P/3 I.T. ; Addition ____
   Street Address 12205 NW 98th

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.

West ½ of Lot in
Flood Plain
P-B

Robert A. Pacula
Signature of Applicant (Owner or Lessee)

4000 N. 9th Lincoln Nb 68521
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/20/85. Date Frwd. 8/20/85. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 8-20-85. Date Frwd. 8-22-85. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Baumert

3. City or County Engineer: Date Rec'd. 8/20/85. Date Frwd. 8/20/85. ACTION: Approved ☒ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL ____

Site Visits:
Date: 9-18-85 by: JMM ~~sewer line would cleanouts not at 75' interval~~
Date: 2/4/87 by: J.C.H
Date: ____ by: ____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2/4/87 By: Jerrold Hood

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
Phone: 471-7800

B

FILE NO. 2243-C

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: 8-10-85 to 8-11-85. Weather: Precip. 0 Temp. 67°.

Hole 2 still had water in from Pre-test

OWNER: Robert Palula

Address: 4000 N. 9th Lincoln 68521
477-8033

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"	8-10	8:00 Am	8-11	6:00 Am	8-11	6:00 Am	6"	10:00 Am	5½"	30 m	½" .50	
2	36"	8-10	8:00 Am	8-11	6:00 Am	8-11	6:00 Am	6"	10:00 Am	5¾"	30 m	¼" .25	
3	36"	8-10	8:00 Am	8-11	6:00 Am	8-11	6:00 Am	6"	10:00 Am	5½"	30 m	½" .50	
4	36"	8-10	8:00 Am	8-11	6:00 Am	8-11	6:00 Am	6"	10:00 Am	5¼"	30 m	¾" .75	
5	36"	8-10	8:00 Am	8-11	6:00 Am	8-11	6:00 Am	6"	10:00 Am	5¼"	30 m	¾" .75	
6	36"	8-10	8:00 Am	8-11	6:00 Am	8-11	6:00 Am	6"	10:00 Am	5¼"	30 m	¾" .75	

William M. Hoogland
Signature of Person Conducting Test

Address 2701 N 27th Phone 464-0638

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: August 29, 1985

Approved Percolation Rate (a)
A. 5.3 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

Test taking At
N.W. 98th + W. Waverly Rd.
1/4 mi. N. west side

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: 471-7800

C

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

FILE NO. 2243-C

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

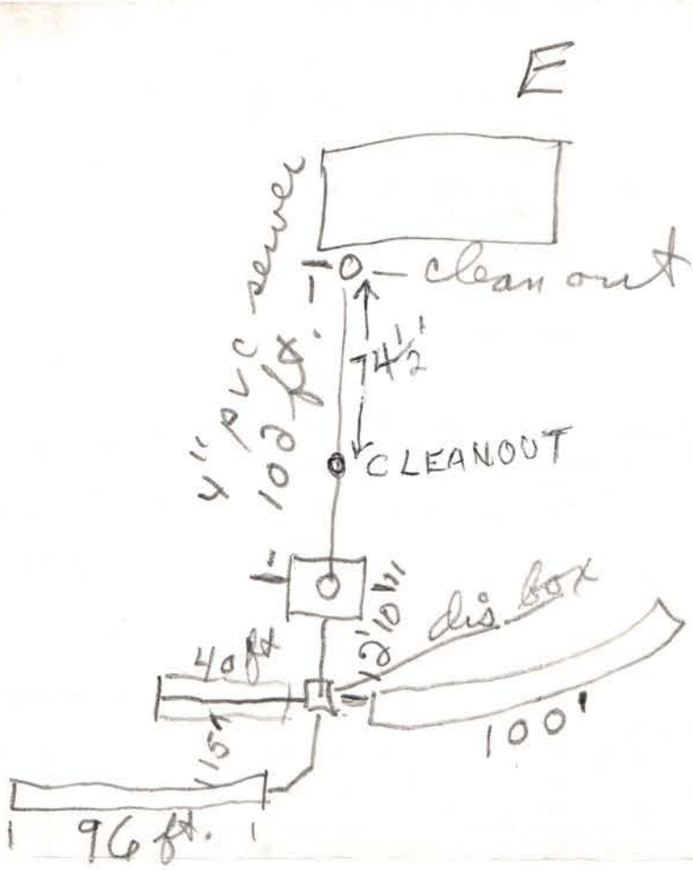
REVIEWING ACTION

Remarks: _____

Date: AUGUST 20, 1985

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 938 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official


E
waverly Rd. NW 98th
Bob. Pacula
Home
Bureau plumb.
valparaiso
Ne.
clean out.
4" PVC sewer
100 ft.
74 1/2'
CLEANOUT
dis box
40 ft
20
100'
15'
96 ft.
N
50
W