LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1724-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

MAY 3, 1981 — THIS PERMIT EXPIRES

Bill Becker — ISSUED TO

Box 75-A, Raymond, NE — ADDRESS

T11N, R5E, Section 3 NW¼ — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

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

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. 1724-C

DATE: 9-29-80

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 05E ; Section 3 NW¼;
   Block _____ : Lot _____ : Addition _____
   Street Address _____

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

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

4. Distance to public sewer: _____ ft.

Bill Becker
Signature of Applicant (Owner or Lessee)

BOX 75-A, RAYMOND, NEBRASKA
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 11/3/80. Date Frwd. 11/3/80. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 11-3-80. Date Frwd. 11-3-80. ACTION: Approved ☐ Disapproved ☐ Signature: Paul Bouma

3. City or County Engineer: Date Rec'd. 11-3-80. Date Frwd. 11-3-80. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11-10-80 by: *
Date: 11/12/80 by: J. C. H.
Date: _____ by: _____

* 1. water line in same trench as sewer line - Above * cased - sewer cast iron.
2. septic tank within 15' of bldg. - Not bldg served - Downspout directed away.
3. laterals within 30' of bldg. - Moved

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 12/15/80 By: Jerrold C. Hood

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

* dee

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: 474-1541

B

REC'D OCT 31 1980

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PROPERTY WHERE SOIL TESTED:

Location: Township 11 ; Range N. 5 ; Section & ¼ Section NW Corner of Section 3.
Property Dimensions: _____ ft. x _____ ft. Area: 20 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 9-25-80 to 9-27-80. Weather: Precip. None Temp. 80°.

OWNER: Bill Becker

Address: _____

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	9-25	12:00	9-26	12:00	9-27	~~4:00~~	18"	4:30		30	1 7/8	
2	36	"	"			"	"	"	"		"	2"	
3	36	"	"			"	"	"	"		"	2 1/4	
4	36	"	"			"	"	"	"		"	7/8"	
5	36	"	"			"	"	"	"		"	1 1/2"	
6	36	"	"			"	"	"	"		"	2 3/4"	

Dan Bryenton
Signature of Person Conducting Test

Address 3605 N. 40 Phone 466-8118

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

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): Dickenson Sandy Loam

Date: ~~October~~ November 3, 1980

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

Jerrold C. Hood
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 ☐

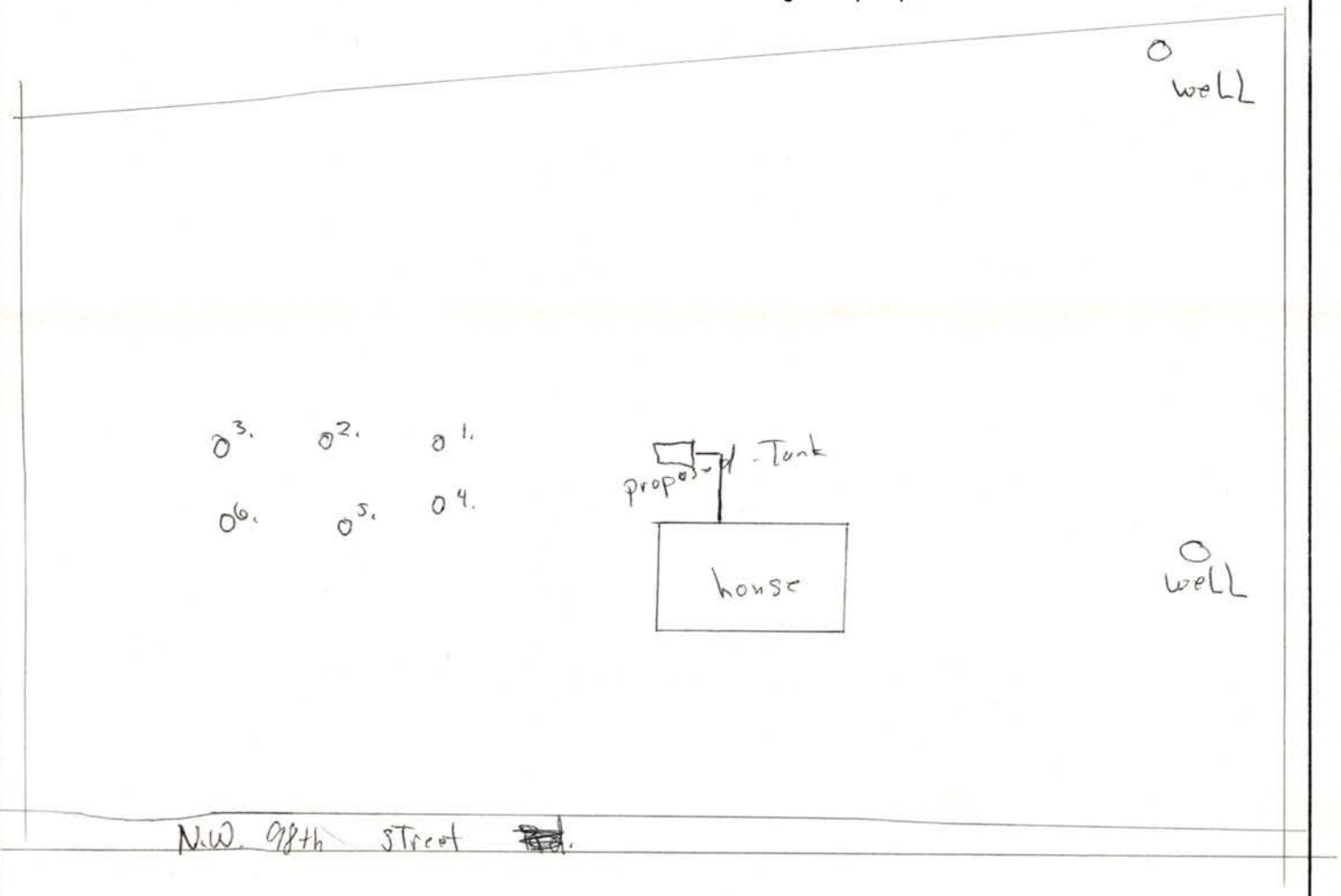
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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C

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

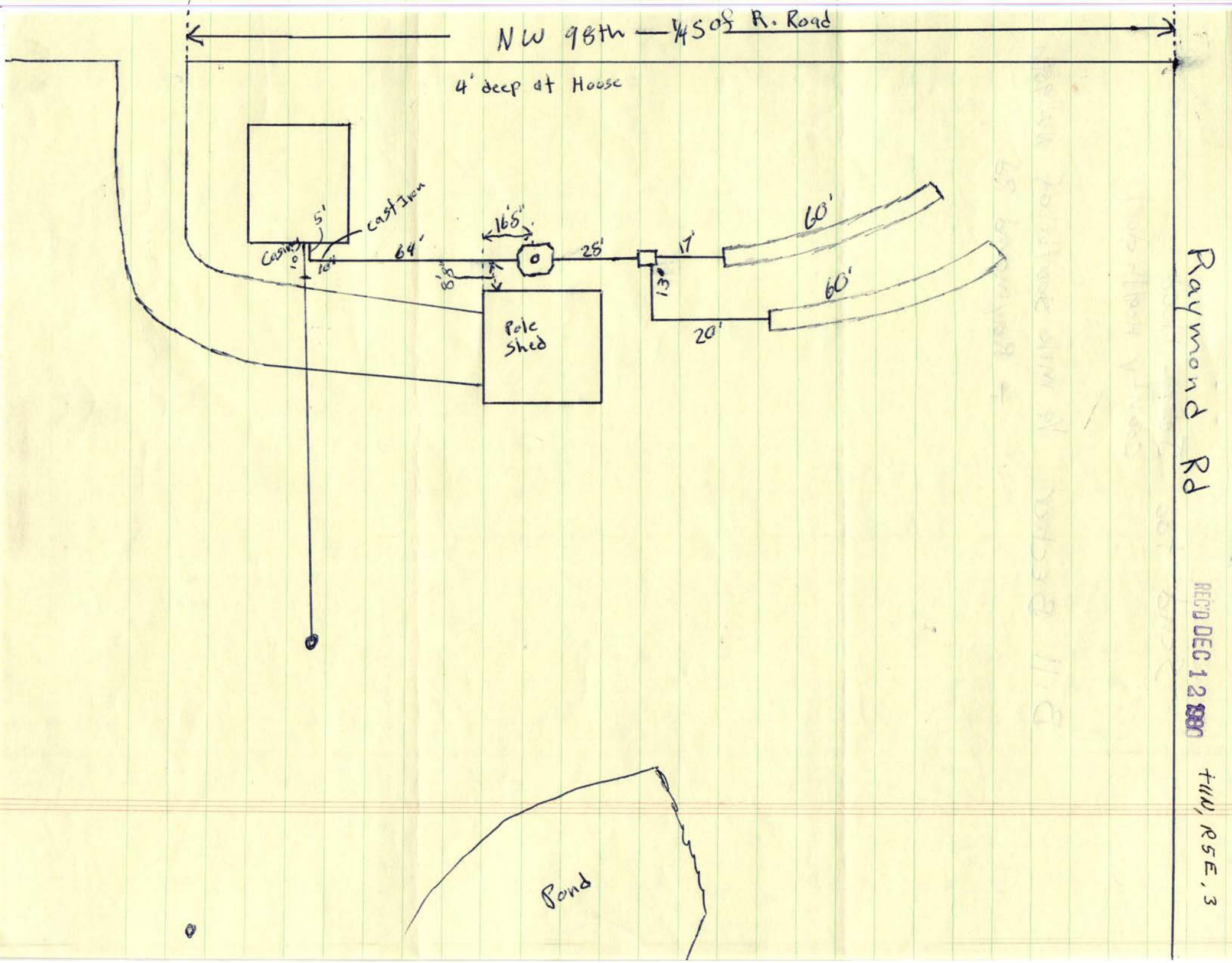
Remarks: _____

Date: October 3, 1980

165 sq. ft.
4 | 459
4
59
59

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 459 sq.ft.

Jerrold C.
Signature of Reviewing Official


NW 98th — ¼ S of R. Road
4' deep at House
5'
cast Iron
Casing
10'
64'
16'5"
6'8"
25'
17'
60'
13'
60'
20'
Pole Shed
Pond
Raymond Rd
RECD DEC 12 1980
T11N, R5E, 3