Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3140 N Street Lincoln, NE 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT

No. HS000016

System Type: LAGOON

Situs: **NO SITUS** ST RUR-18001 E O ST

Legal Description: T10N-R08E-S25-Lot: 12NW

Owner: NANCY NIEMEYER
5949 ARROW WOOD RD
LINCOLN NE
68526

Permit Fee:	$305.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$305.00
Issued:	09/28/2007
Expires:	09/27/2008

Bruce D. Dart, PhD, Health Director

On-site Waste System Permit Holder:

The above document is your permit to construct a new On-site Waste Water System at the location listed. Please contact this office once the sytem is complete in order to schedule a final inspection before use.

Bruce D. Dart, PhD
Health Director

NANCY NIEMEYER
5949 ARROW WOOD RD
LINCOLN NE 68526

Lincoln-Lancaster County Health Department
Environmental Public Health Division
[illegible] N. Street • Lincoln NE [illegible]
HEALTH DEPARTMENT Phone: [illegible]

A

Permit Number: HS000016

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B [illegible]
Submit Correct Fee with this Application

Permit required for: ☐ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in accordance with appropriate regulations.

2 lots

PLEASE PRINT OR TYPE

A. Onsite System Location

[illegible] 15[illegible] S. [illegible] NE [illegible]

[illegible] 25 10 [illegible]

Addition [illegible]

Legal description if known, if not platted [illegible] Subdivision [illegible]

Additional system location address (if not the same as Property Address) [illegible] Future Address [illegible]

B. Owner

Name Nancy Meemeyer

Mailing Address [illegible] Rosewood NE

Home Phone [illegible] Work Phone [illegible]

Signature Nancy Meemeyer

Date [illegible] 2007

C. Contractor Michael Casement

Name Casement Trenching LLC

Company Name Casement Trenching LLC

Mailing Address [illegible] Hickman NE

Phone [illegible] 423-8560

D. ~~Engineer~~/Installer ☐ Check and complete if engineer designed system

Name Michael Casement Firm [illegible] Work Phone [illegible]

E. This system will serve a

Single Family Dwelling Number of Bedrooms 3 Is there a Sump and Ballast? ☐ Yes ☐ No

☐ Commercial / Industrial / Other Facility Specify [illegible] Design flow in gallons per day [illegible]

Type of Water Supply: ☐ Community ☐ Non-Community Well Permit Applied for ☐ Yes ☐ No ☐ Not Necessary

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Meets requirements of Title 124 County Board Action No. [illegible]

1. Health Department — Date Received 5/24/07 — Date Issued 5/24/07 — ACTION ☐ Approved ☐ Disapproved — Signature [illegible]

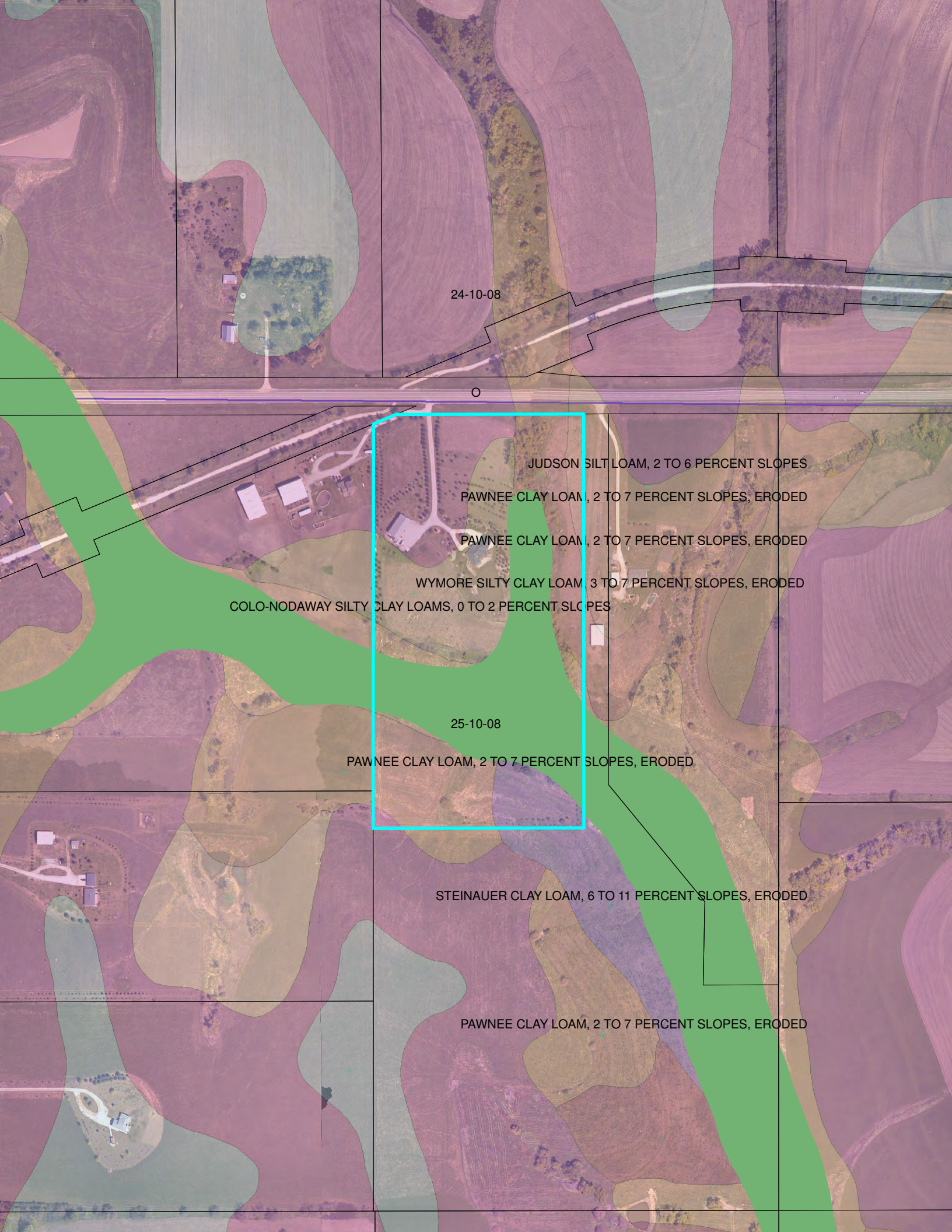
2. Sanit. Bldg. Insp. or Village Clerk — Date Received [illegible] — Date Issued [illegible] — ACTION ☐ Approved ☐ Disapproved — Signature [illegible]

3. City or County Engineer — Date Received [illegible] — Date Issued [illegible] — ACTION ☐ Approved ☐ Disapproved — Signature [illegible]

Installation Final Written Approval

Business Office Use Only
Date Received [illegible] Amount Paid [illegible]
Received By [illegible] Check No. [illegible]

Date Health Department [illegible] Public Inspector's Initials [illegible]


24-10-08
O
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
WYMORE SILTY CLAY LOAM, 3 TO 7 PERCENT SLOPES, ERODED
COLO-NODAWAY SILTY CLAY LOAMS, 0 TO 2 PERCENT SLOPES
25-10-08
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
STEINAUER CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED