Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

HS000017

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

The undersigned hereby applies for a permit to: ☐ **ALTER** ☑ **EXTEND** ☐ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

1. **Legal description of property:**
   Township 8 Range 5 1/4 ____ 1/4 ____ Section 31
   Block ____ Lot 7 Addition ____
   Parcel ID 02-31-200-001-000 (i.e. 99-99-999-999-999)
   Street Address (no rural route) 13387 West Sprague Rd

2. **Property use:** ☑ residential ☐ commercial ☐ other use
   Number of bedrooms 2 Describe ____

3. **Type of Present Individual Disposal System** ☑ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** adding 100' lateral

5. **Work to be done by:** ☐ owner ☑ contractor's name Priby1 Plumbing

6. **Estimated project:**
   a. Repair, replace, or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A permit is required if the use, operation, location, or type of system is changed.

Print Name Brian Priby1 Address 336 Ne Highway 103 Phone: 402-826-0192

Applicant Signature (owner or lessee) Glenn Prochaska

Please include the permit fee ($160) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 9/29/07 REVIEW: ☑ Approved ☐ Disapproved By: [signature]

Site visits
Date ____/____/____ By ____
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date ____/____/____ By ____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only

Received: Date: 9/26/07 Amount 170.00 Check No. 5223 Initials [signature]

White - Division Copy Pink - Business Office Revised 9-06

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

ON-SITE WASTE WATER SYSTEM
REPAIR PERMIT

System Type: STANDARD

No. HS000017

Situs: 13387 W SPRAGUE RD RUR

Permit Fee: $170.00

Legal Description: T08N-R05E-S31-Lot: 7

Owner: PROCHASKA, GLENN H & MATTIE M
13387 W SPRAGUE RD
CRETE NE
68333

Total Fees: $170.00

Issued: 09/26/2007
Expires 09/25/2008

Bruce D. Dart, PhD, Health Director

Dear Water Well Permit Holder:

The above document is your permit to repair an existing On-site Waste Water System at the location listed. Please contact this office once repairs are complete to obtain final approval before use.

Bruce D. Dart, PhD
Health Director

PROCHASKA, GLENN H & MATTIE M
13387 W SPRAGUE RD
CRETE NE 68333

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. HS000017

System Type:	STANDARD
Situs:	13387 W SPRAGUE RD RUR
Legal Description:	T08N-R05E-S31-Lot: 7
Owner:	PROCHASKA, GLENN H & MATTIE M 13387 W SPRAGUE RD CRETE NE 68333

Permit Fee:	$0.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$160.00
Issued:	09/25/2007
Expires:	12/31/2099

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

PROCHASKA, GLENN H & MATTIE M
13387 W SPRAGUE RD
CRETE NE 68333

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H3000017

SCANNED

❒ Municipal Code 24.38 ❒ County Resolution Number 02-30

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HEALTH DEPARTMENT USE ONLY

Date received 9/29/07 REVIEW: ☑ Approved ❒ Disapproved By: [signature]

Site visits
Date ___/___/___ By ____
Date ___/___/___ By ____
Date ___/___/___ By ____

Installation final written approval
Date 10/15/07 By [signature] for Doug Smith

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only

Received: Date: 9/26/07 Amount 170.00 Check No. 5023 Initials [initials]

White - Division Copy Pink - Business Office Revised 9-06