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. HS000096

System Type: STANDARD

Situs: 14900 NW 40th

Legal Description: T11N-R06E-S05-1-Lot 1

Owner:

Permit Fee:	$305.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$305.00

Issued: 05/02/2008
Expires: 05/02/2009

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

NEIGHBORS FAMILY HOMES
8240 EASTWOOD DR.
LINCOLN, NE 68506

LLCHD HS000096

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8022

A

Permit Number HS000096

Onsite Wastewater Treatment System Request for Site Clearance and Permit

Include Form B and C. Submit correct fee with this Application

3 acres or more 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 conformance with appropriate regulations.

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 14900 N.W. 40th Street (no rural route) City Ray Town, NE Zip 68428

Legal Description ____ ____ ____ Oak Valley Estates 1 1
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Longitude: ____ Latitude: ____

☐ Check if system mail address is not the same as the owner's address Total Acres: ~5

B. Owner

Name Dorin Grenly Signature ____

Address ____ City/State/Zip ____

☐ Check if owner designed system Home Phone ____ Work Phone ____

C. Contractor

Name: Nielsen Family Homes, Inc. Company Name Nielsen Family Homes, Inc.

Address 8240 Eastman Drive City/State/Zip 8240 Eastman Drive

☐ Check if contractor designed system Work Phone (402) 432-1688

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

Designer Name Alvs (Dan Anderson) Firm Alvs Work Phone (402) 443-7161

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub? ☐ Yes ☑ No

☐ Commercial Establishment/Other Facility Specify ____ Design flow in gallons per day ____

Type of Wastewater ☐ Domestic ☐ Non-Domestic Well Permit Applied for ☐ Yes ☐ No ☐ Not Applicable

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

1. Health Department
Site visits ____
Date rec'd ____ Date frwd ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

2. Supt. Bldg. Insp. or Village Clerk
Comments ____
Date rec'd ____ Date frwd ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

3. City or County Engineer
Comments ____
Date rec'd ____ Date frwd ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

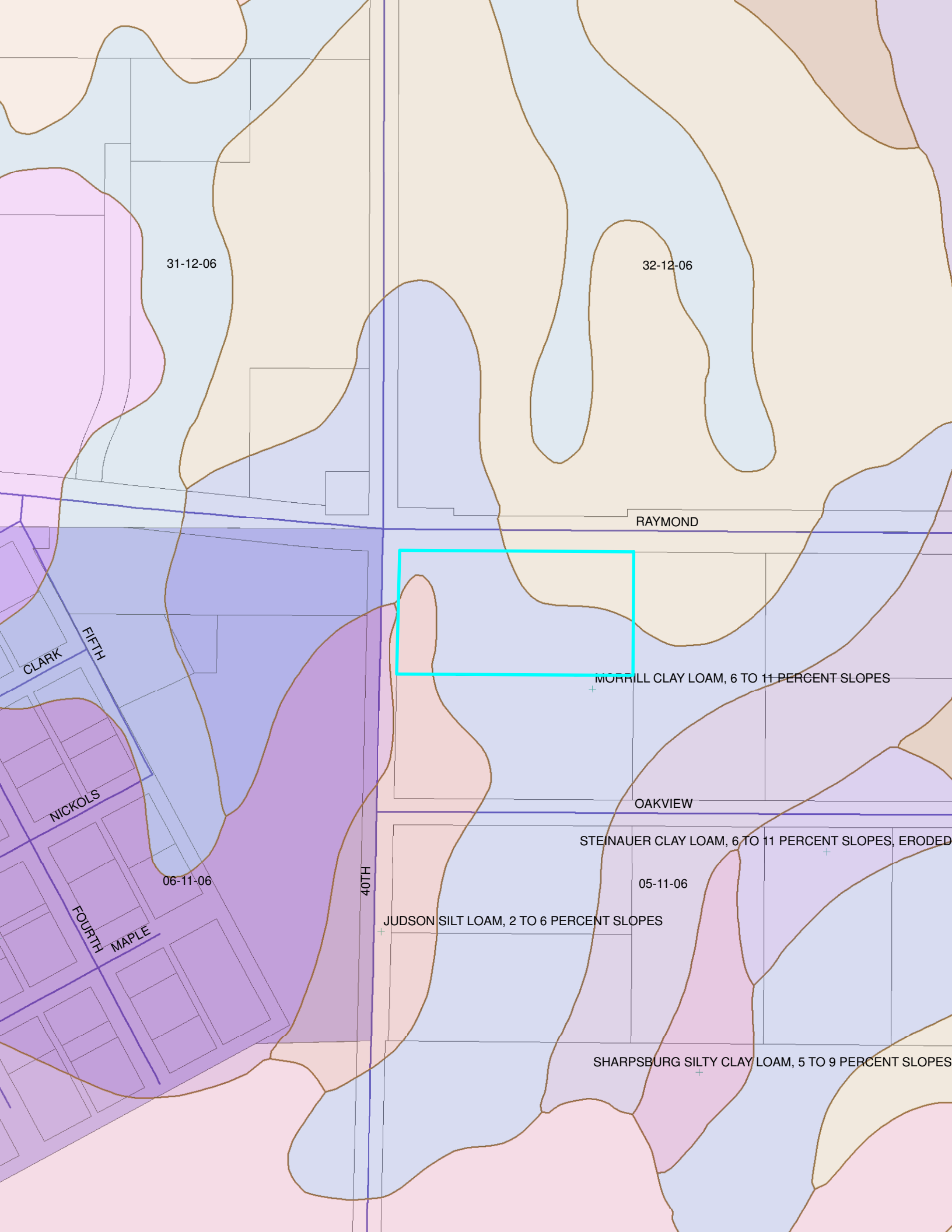
Installation Final Written Approval
By ____
Date ____

Business Office Use Only
Date Received 05/01/08 Amount Paid 305 cc
Received By ____ Cash/Check No. 4684

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 5-07

5-6-2008 12: 9:50


31-12-06
32-12-06
RAYMOND
CLARK
FIFTH
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
NICKOLS
OAKVIEW
STEINAUER CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
06-11-06
40TH
05-11-06
FOURTH
MAPLE
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES