LLCHD HS000141

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

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

HS000141

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 Raymond Range _____ 1/4 _____ 1/4 _____ Section _____
   Block _____ Lot 8 NW Addition S/2-T11-R6-6th Principal Meridian
   Parcel ID _____-_____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 13050 N. 14th Raymond NE 68428

2. **Property use:** ☑ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe Extension Permit For Lateral

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

4. **Description of proposed alteration, extension or repair**
   Extend laterals 180'

5. **Work to be done by:** ☐ owner ☑ contractor's name Dirt works plus Pat Stechmyer

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 Lynn/Kay Rupel Address 13050 N. 14 Raymond Phone: 880-6388 Pat-

Applicant Signature (owner or lessee) Jean Dale for Pat Stechmyer DLP

Please include the permit fee ($170) 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 ____/____/____ REVIEW: ☑ Approved ☐ Disapproved By: _____

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: 7/25/08 Amount $170.00 Check No. 10323 Initials TDL

White - Division Copy Pink - Business Office Revised 9-07

7/25/08
#10323
PDL TOTAL P.01

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

No. HS000141

System Type: STANDARD

Situs: 13050 N 14 ST RUR

Legal Description: T11N-R06E-S12-Lot 8

Owner: RUPLE, KAY L & LYNN C
13050 N 14 ST
RAYMOND NE
68428

Permit Fee:	$170.00
Total Fees:	$170.00
Issued:	07/25/2008
Expires	07/25/2009

Bruce D. Dart, PhD, Health Director

Dear Applicant:

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

DIRTWORKS PLUS
6667 NW 48TH STE. 1
LINCOLN NE 68524