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. HS000188

System Type:	STANDARD
Situs:	3901 SW 84 ST RUR
Legal Description:	T09N-R05E-S03-Lot 25
Owner:	FOWLER, RODNEY J & LAURIE 3901 SW 84 ST DENTON NE 68339

Permit Fee:	$175.00
Total Fees:	$175.00
Issued:	11/13/2008
Expires	11/13/2009

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

MATT TAYLOR
2610 S 11TH ST
LINCOLN NE 68502

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

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

HS000188

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 9 Range 5 1/4 ____ 1/4 ____ Section 3
   Block ____ Lot ____ Addition ____
   Parcel ID ____-____-____-____-____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 3901 SW 84

2. **Property use:** ☑ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe ____

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

4. **Description of proposed alteration, extension or repair** expose D-Box
   Instal New D Box

5. **Work to be done by:** ☐ owner ☐ contractor's name Matt Taylor

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.

call

Print Name Rod Faller Address 3901 SW 84 Phone: 499-7727
Home 435-2024
Applicant Signature (owner or lessee) ____ News 436 2255

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 10/31/08 REVIEW: ☑ Approved ☐ Disapproved By: ____

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

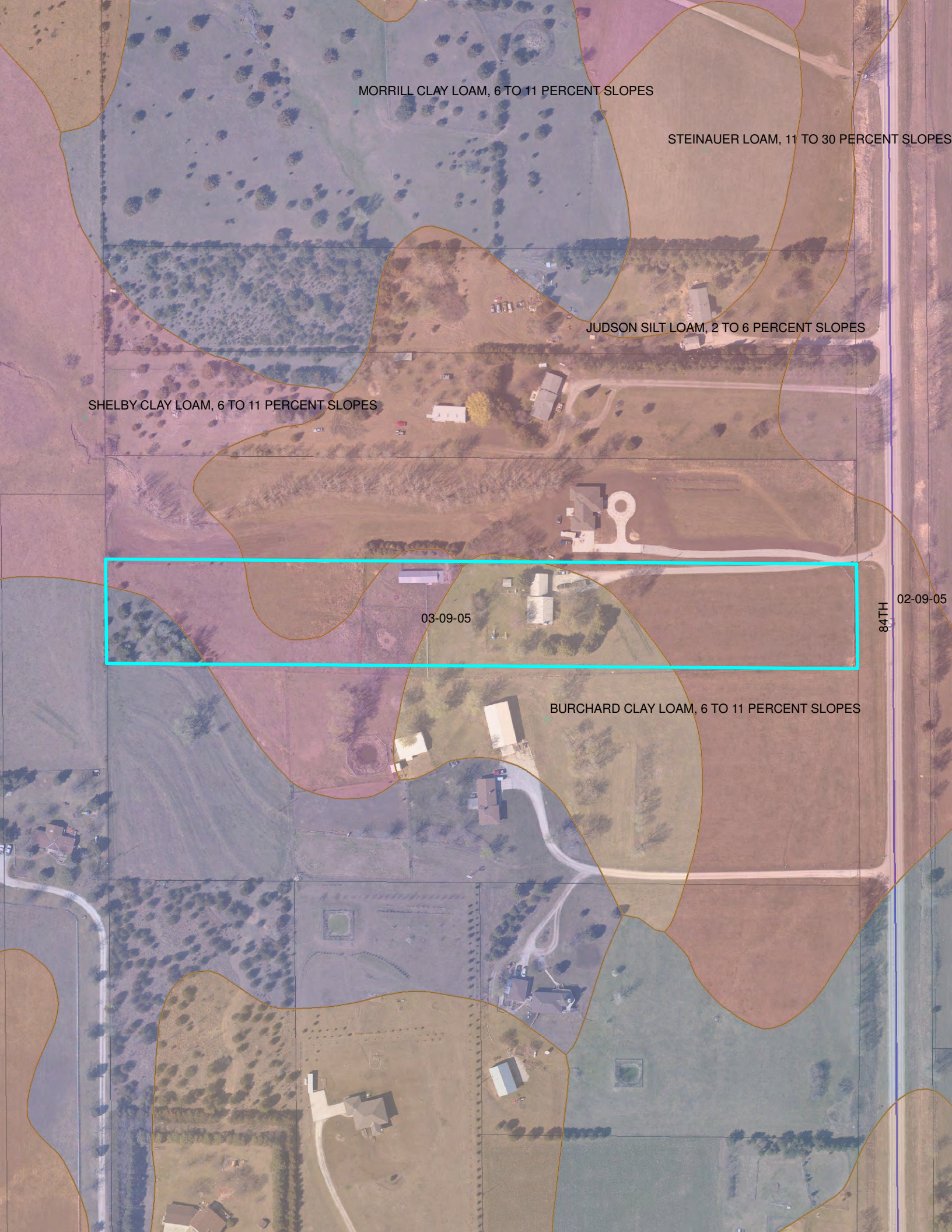
Installation final written approval
Date ____/____/____ By ____

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: ____/____/____ Amount ____ Check No. ____ Initials ____

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


MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
03-09-05
02-09-05
84TH
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES

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

SCANNED

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

H5000188

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News 436 2255

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HEALTH DEPARTMENT USE ONLY

Date received 12/13/08 REVIEW: ☑ Approved ☐ Disapproved By: ____

Site visits
Date 12/2/08 By JM
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date 12/2/2008 By JM

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: 12/13/08 Amount 175 Check No. 4493 Initials TdJ

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