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: LAGOON

No. HS000280

Situs: 3151 OLIVE CREEK RD

Permit Fee: $175.00

Legal Description: T07N-R07E-S18-Lot 9

Owner:

Total Fees: $175.00

Issued: 09/17/2009
Expires 09/18/2010

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

SOUTHWICK SERVICES
PO BOX 191
HICKMAN NE 68372

LLCHD HS000280

SCANNED

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

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

HS000280

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 7N Range 7E 1/4 ____ 1/4 ____ Section 18
   Block ____ Lot ____ Addition ____
   Parcel ID ____-____-____-____-____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 3151 Olive Creek Rd. Hickman 68372

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** Move Lagoon to meet required Setbacks

5. **Work to be done by:** ☐ owner ☒ contractor's name Brad Southwick Southwick Sewer & Drain

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 Jason Robinson Address ____ Phone: 525-4303

Applicant Signature (owner or lessee) ____

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 9/17/09 REVIEW: ☒ Approved ☐ Disapproved By: ____

Site visits
Date 9/16/09 By DS
Date ____/____/____ By ____
Date ____/____/____ By ____

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

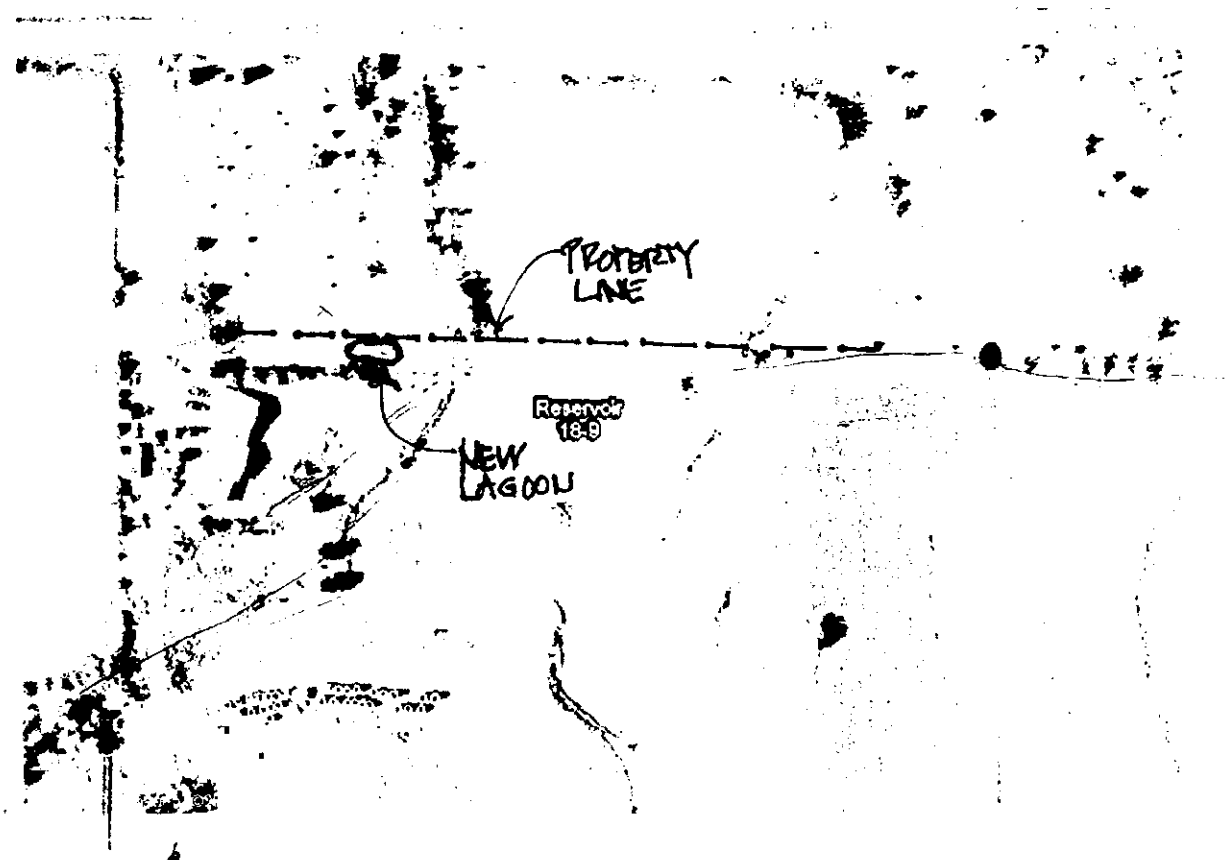
Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only

Received: Date: 9/17/09 Amount 175.00 Check No. 1262 (350.00) Initials BN

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

9-18-2009 14:42:36



I CHARLES DEVRIES ALLOW THE LAGOON FOR JASON ROBINSON TO BE PLACED WITHIN 40' OF MY PROPERTY LINE ON HIS PROPERTY. A FUTURE LAND SWAP TO CORRECT THE 40' RULE IS ACCEPTABLE AT A FUTURE DATE BY BOTH PROPERTY OWNERS AT A FUTURE DATE.

CHARLES DEVRIES

Jason Robinson 9/9/09

LLCHD HS000280

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HEALTH DEPARTMENT USE ONLY

Date received 9/17/09 REVIEW: ☑ Approved ☐ Disapproved By: ____

Site visits
Date 9/16/09 By D.S.
Date ____/____/____ By ____
Date ____/____/____ By ____

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

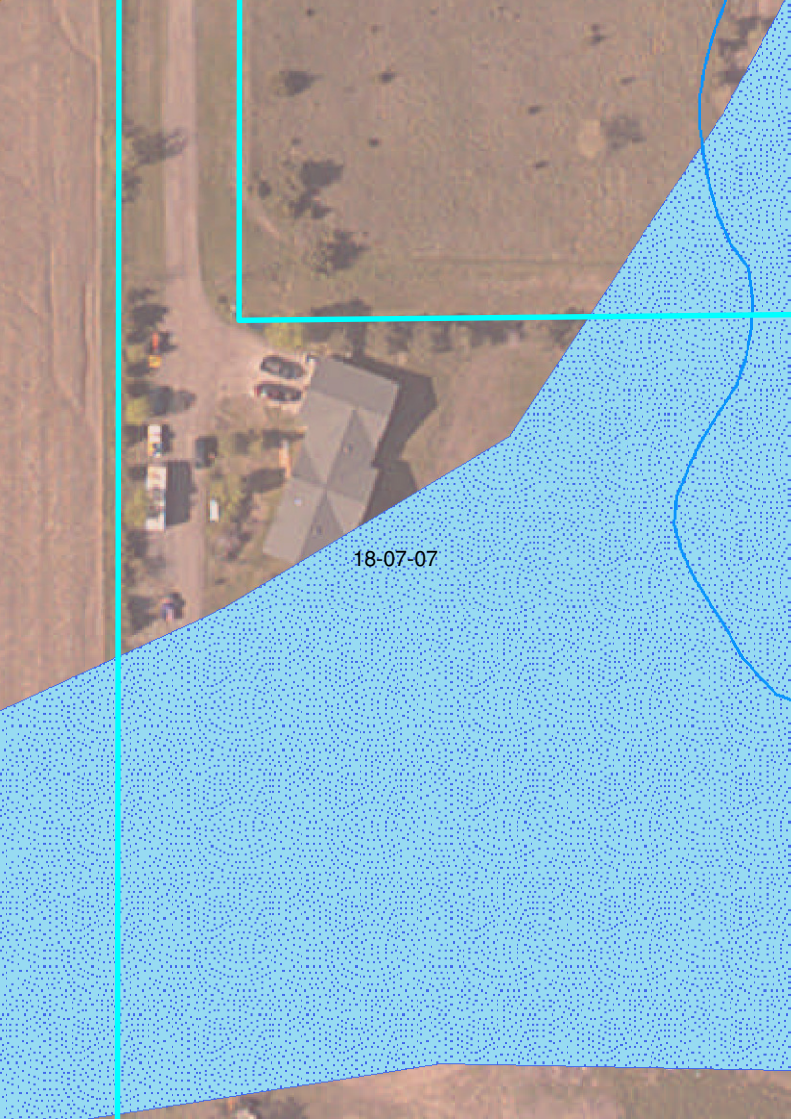
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Business Office Use Only

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

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9-17-2009 13:46:21


18-07-07