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

ON-SITE WASTE WATER SYSTEM
SYSTEM REPLACEMENT PERMIT

No. HS000394

System Type: STANDARD

Situs: 4700 S 93 CIR

Legal Description: T09N-R07E-S11-Lot 2

Owner: SOUCIE, JEFFREY & SCUDDER-SOUC
4700 S 93 CIR
LINCOLN NE
68520

Permit Fee: $0.00

Total Fees: $180.00

Issued: 08/20/2010
Expires 08/20/2011

Bruce D. Dart, PhD, Health Director

Dear Applicant:

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

Bruce D. Dart, PhD
Health Director

JEFFREY SOUCIE
4700 S 93RD
LINCOLN NE 68520

Individual Sewage Disposal System
Application to Alter, Extend or Repair

Municipal Code 24.38 County Resolution Number 2832

Date:	File No.: HS000394

The undersigned hereby applies for a permit to: **Alter** **Extend** **Repair** an existing Individual Seward Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township_____ Range_____ Section_____ 1/4 Section_____
   Block_____ Lot ✓ Addition_____
   Street Address 4700 SOUTH 93rd CR, LINCOLN, NE 68520

2. **Property use:** (residential) commercial other use
   Number of bedrooms 3 Describe _____

3. **Type of Present Individual Disposal System:** (septic tank) lagoon other

4. **Description of proposed alteration, extension or repair:** REPLACEMENT OF CURRENT SEPTIC TANK.

5. **Work to be done by:** owner contractor's name BUD CALLAHAN #2317

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost of less than $400,000 (no fee required.
   (b.) Total cost is greater than $400.00 (Return fee with this application).
   c. A "construction permit" is required if the use, operations, location, or type of system is being changed.

Print Name JEFF SOUCIE Address 4700 SOUTH 93rd CR Phone (402) 486-4367
Applicant Signature (Owner or Lessee) _____

Please include the permit fee ($50.00) with this application

Please do not write below this line

Date rec'd 8/9/10 REVIEW: (approved) disapproved By: _____

Site visits:
Date 8/16/10 By DS
Date _____ By _____
Date _____ By _____

Installation final written approval
Date 8/16/10 By _____

Return to: Lincoln-Lancaster County Health Department - Environmental Health Department
3140 'N' Street, Lincoln, NE 68510
441-8022

1 copy - EH 1 copy - Business Office Revised 1/98

Nebraska Department of Environmental Quality

VERN H CALLAHAN
Is hereby certified as an
Onsite Wastewater Treatment Systems Professional
In the following categories:
• INSPECTOR • MASTER INSTALLER •

Certificate No. C2317
Issued: 07-23-2010
Expires: 12-31-2011


93RD
MAYBERRY CLAY, 2 TO 7 PERCENT SLOPES, SEVERELY ERODED
11-09-07
WATER
BURCHARD-NODAWAY COMPLEX, 2 TO 30 PERCENT SLOPES
MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED