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. HS000584

System Type: STANDARD

Situs: 11601 S 2 ST

Legal Description: T08N-R06E-S02-3-Lot 3

Owner: ZIMMER, JOHN F IV & LYNDA
11601 S 2 ST
ROCA NE
68430

Permit Fee:	$190.00
Total Fees:	$190.00
Issued:	01/25/2012
Expires	01/24/2013

Judith A Halstead

Judith A. Halstead, MS, Health Director

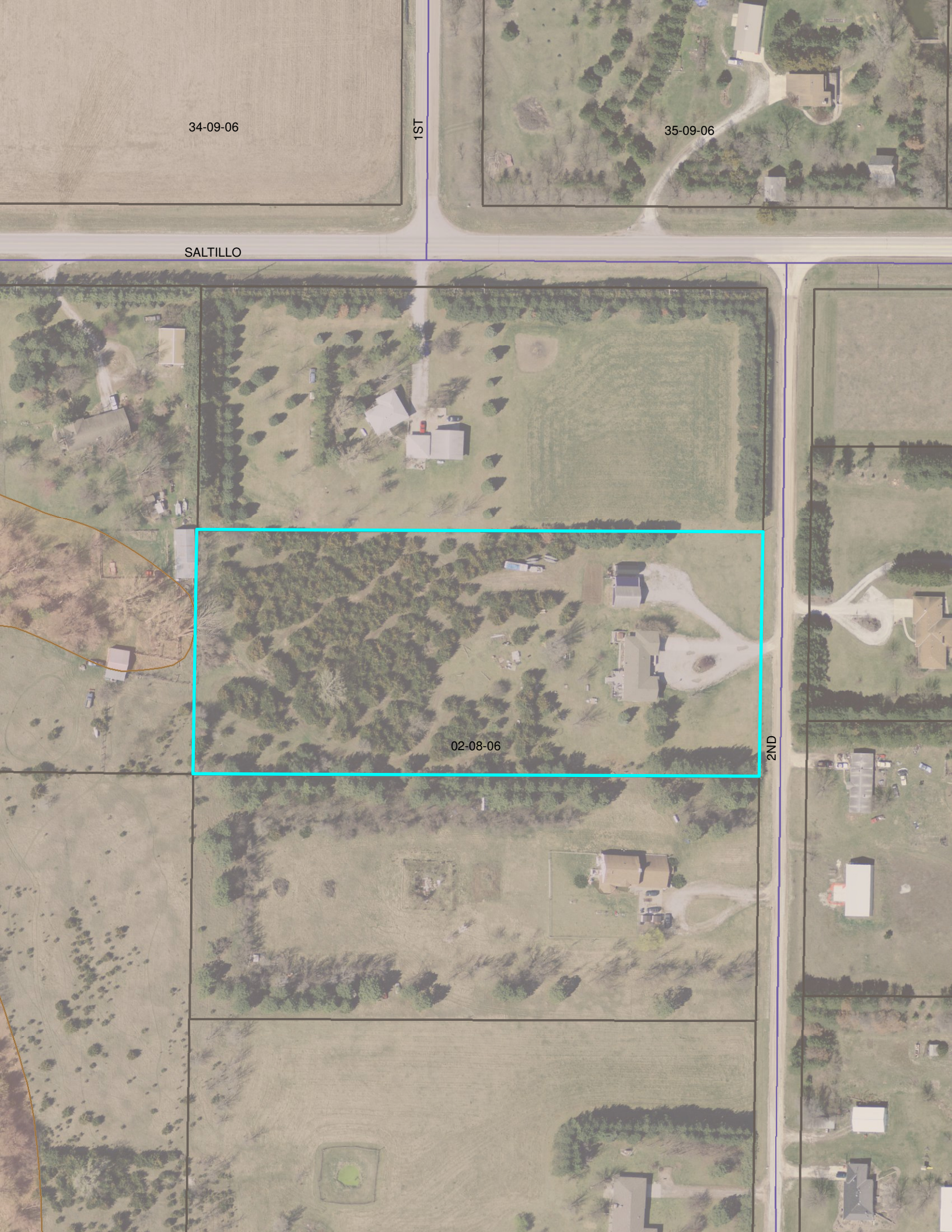
Dear Applicant:

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.

Judith A Halstead

Judith A. Halstead, MS
Health Director

SOUTHWICK SEWER
PO BOX 191
HICKMAN NE 68372


34-09-06
1ST
35-09-06
SALTILLO
02-08-06
2ND

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

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

1A50000584

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 8N Range 6E 1/4 ____ 1/4 ____ Section 2
   Block ____ Lot ____ Addition Wilderness Estates
   Parcel ID ____-____-____-____-____-____ (i.e. 99-99-999-999-999)

   Street Address (no rural route) ____

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** avg. perc 39.3/min/in
   system

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 John Zimmer Address 11601 S 2nd Roca Phone: ____

Applicant Signature (owner or lessee) Brad Southwick

Please contact LLCHD for the permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

Date received 1/25/12 REVIEW: ☑ Approved ☐ Disapproved By: ____

Site visits
Date 01/13/12 By DS
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date 01/13/2012 By Doug Ames

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8643

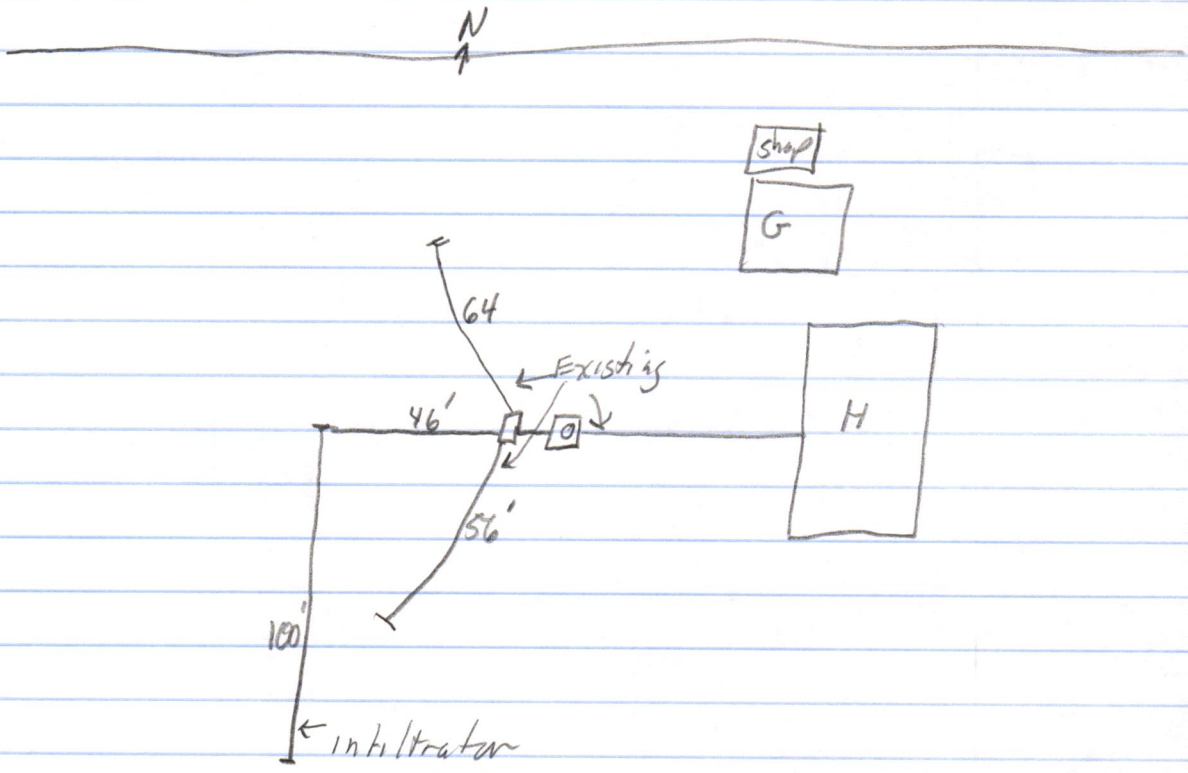
Business Office Use Only

Received: Date: 1/25/12 Amount 190.— Check No. 1353 Initials BH

Revised 3-09

8-6-Z

11601 So. 2nd Roca
John Zimmer



1/16/12

11601 S. 2nd
T8 R6 Sec2 LoT3 Add 100'

HS000584

