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

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

HS000677

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 11 Range 7 1/4 ____ 1/4 ____ Section 11
   Block ____ Lot 28 Addition ____
   Parcel ID ____-____-____-____-____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 12500 N 84

2. **Property use:** ☑ residential ☐ commercial ☐ other use
   Number of bedrooms 4 Describe ____

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

4. **Description of proposed alteration, extension or repair** replace line from house to tank & tank

5. **Work to be done by:** ☐ owner ☑ contractor's name H. L. Mahlbach Const.

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 Rick Perkins Address 12500 N 84 Lincoln Ne 68517 Phone: 402-325-9516

Applicant Signature (owner or lessee) Gary T. Mahlbach

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

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HEALTH DEPARTMENT USE ONLY

Date received 10/22/12 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: 441-8643

Business Office Use Only

Received: Date: 10/23/12 Amount 190.00 VISA ~~Check No.~~ 4735 Initials BH
Approval Code 514855

Revised 3-09

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. HS000677

System Type: STANDARD

Situs: 12500 N 84 ST

Legal Description: T11N-R07E-S11-Lot 28

Owner: PERKINS, JAMES R & HEATHER M
12500 N 84 ST
LINCOLN NE
68517

Permit Fee: $190.00

Total Fees: $190.00

Issued: 10/23/2012
Expires 10/23/2013

Judith A Halstead

Judith A. Halstead, MS, Health Director

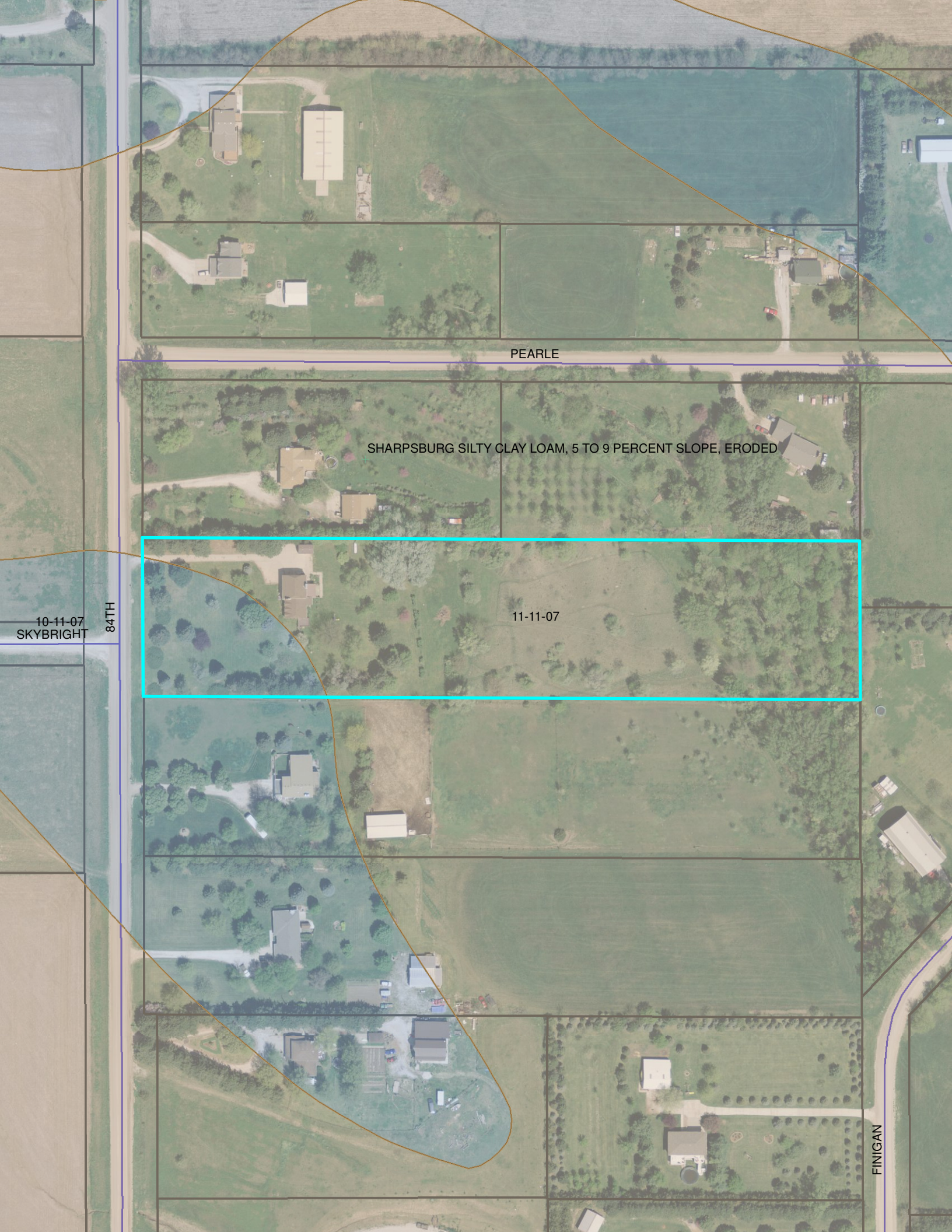
Dear Applicant:

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

HARRY MUHLBACH
5701 VINE ST
LINCOLN NE 68505


PEARLE
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
11-11-07
10-11-07
SKYBRIGHT
84TH
FINIGAN

SCANNED

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Print Name Rick Perkins Address 12500 N 84 Lincoln Ne 68517 Phone: 402-325-9516

Applicant Signature (owner or lessee) Nancy T. Mahlback

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HEALTH DEPARTMENT USE ONLY

Date received 10/22/12 REVIEW: ☒ Approved ☐ Disapproved By: [signature]

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