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

ON-SITE WASTE WATER SYSTEM REPAIR PERMIT
No. HS000765

System Type: Standard

Situs: 21171 S 68 ST, RURAL, NE

Issued: 6/14/2013

Expires: 6/12/2014

Description: S4, T7, R7, 6th Principal Meridian, LOT 22 NE

Owner: LEATHERMAN, ROBERT L & LINDA J
21171 S 68 ST
HICKMAN, NE 68372

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 repair is complete to obtain final approval before use.

Judith A Halstead
Judith A. Halstead, MS
Health Director

SOUTHWICK LIQUID WASTE
P.O. BOX 191
HICKMAN, NE 68372

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SCANNED

774

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

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

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 South Pass 7 Range 7 1/4 NE 1/4 NE Section 4
   Block ____ Lot 22 NE Addition ____
   Parcel ID 14 - 04 - 200 - 006 - 000 (i.e. 99-99-999-999-999)
   Street Address (no rural route) 21171 S 68th, Hickman NE 68372

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** Replace collapsed 1000 gal fiberglass septic tank with 1500 gallon concrete tank.

5. **Work to be done by:** ☐ owner ☒ contractor's name Southwick Liquid Waste - Jason

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 Kubik Address 105 Locust Hickman Phone: 402-440-7606

Applicant Signature (owner or lessee) Jason Kubik

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 6/12/13 REVIEW: ☑ Approved ☐ Disapproved By: ____

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

Installation final written approval
Date 6/13/13 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: 6/12/13 Amount $195.00 Check No. 1011 Initials BH

Revised 3-09

7-7-4

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