H S000861

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_____ Range_____ 1/4_____ 1/4_____ Section _____
   Block_____ Lot 6 Addition Sunshine Acres
   Parcel ID 22-33-100 - 009 - 000 (i.e. 99-99-999-999-999)
   Street Address (no rural route) 13400 Sunshine Cir

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** replace collapsing Septic tank

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

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 NE Phone: 440-7006

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

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HEALTH DEPARTMENT USE ONLY

Date received____/____/____ 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: 1/9/14 Amount $200.00 Check No. 2006 Initials SB

Revised 3-09

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. HS000861

System Type: Standard

Situs: 13400 SUNSHINE CIR, RURAL, NE

Issued: 1/22/2014

Expires: 1/22/2015

Description: SUNSHINE ACRES, Lot 6

Owner: FULTON, TONY L & MELISSA K
13400 SUNSHINE CIR
BENNET, NE 68317

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
105 LOCUST STREET
HICKMAN, NE 68372