Application to Alter or Repair an Onsite Wastewater Treatment System

HS001293

The applicant is applying for a permit to: ☐ALTER ☐REPAIR an existing Onsite Wastewater Treatment System, and agrees to comply with LMC 24.38 or County Resolution 02-0030.

1. **Street Address (No Rural Route):** 6929 SW 37th

Legal Description of Property: Township:_____ Range:_____ Section:_____

Block 5 Lot 4 SubDivsion South Forty Add:_____

***Parcel ID** 09-17-305-004-000 (i.e. 99-99-999-999-999)

2. **Property use:** ☒ Residential ☐ Commercial ☐ Other use (Describe:_____)
Number of bedrooms 4 Does the system have a: ☒ Garbage Grinder ☐Large Capacity Tub

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

4. **Description of proposed alteration or repair:** Add Infiltrators

5. **Current Type of Lateral-** Infiltrator **Current Linear Ft. Of Lateral -** 320

Current Tank Gallonage- 1500

6.Print Name Mel Gagner Address 4810 w Claire Ave Phone: 402 432 5698

Applicant Signature: Mel Gagner

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

HEALTH DEPARTMENT USE ONLY

☐Municipal Code 24.38 ☐County Resolution Number 02-30

Date received ___/___/___ REVIEW: ☐ Approved ☐ Disapproved By:_____

Comments (if any):_____

Site visits
Date 06/21/16 By DC
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: (402) 441-8643

Business Office Use Only

Received: Date: 6/21/16 Amount $210.00 Check No. 8252 Initials SB

Revised 4/8/13