Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

A

Permit Number
HS002111

Existing Home

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B and C.
Submit correct fee
with this Application

3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 9084 N 14th St (no rural route) City Lincoln, NE Zip 68521

Legal Description SW (1/4) SW (1/4) 24 (Section) 11N (Township) 6E (Range) Sullivan Heights (Subdivison) 1 (Addition) (Block) (Lot)

PID 12-24-301-001-000

B. Owner

Name Mark & Judith Sullivan Signature Mark Sullivan Judith Sullivan

Address 9084 N 14th St City/State/Zip Lincoln, NE 68521

Home Phone 402-430-5525 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-890-6009 or 402-783-2663

D. Engineer

☐ Check and complete if engineer designed system P.E. License Number:

Designer Name Firm Work Phone

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 3 Whirlpool Bathtub? ☑ Yes ☐ No Total Acres 3.63

Garbage Grinder? ☑ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

1. Health Department
Site visits Date rec'd Date frwd
Comments
ACTION ☐ Approved ☐ Disapproved Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments Date rec'd Date frwd
ACTION ☐ Approved ☐ Disapproved Signature

3. City or County Engineer
Comments Date rec'd Date frwd
ACTION ☐ Approved ☐ Disapproved Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 10-06-20 Amount Paid $440.00
Received By JAO Cash/Check No. 5040

White - Health Department Yellow - Engineer Pink - Building & Safety

Lincoln-Lancaster County Health Department (LLCHD)
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

B

Permit Number:

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 9084 N 14th St (no rural route) City Lincoln NE, Zip 68521

Owner Mark Sullivan Address Same

Date of Tests 7/2/18 to 7/3/18 Weather: Precipitation 0 Temperature 88°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					Results		
		Start		End		Start		Initial	End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	32	7/2	2:00p	7/2	6:00p	7/3	4:00p	6	7/3	4:30p	30	1/2	60
2	35	"	"	"	"	"	"	6	"	"	"	2-1/8	14
3	24	"	"	"	"	"	"	6	"	"	"	3-3/8	9
4	72	"	"	"	"	"	3:20p	6	"	3:30p	10	1-1/2	7
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Terri L Jakoubek, Raymond Contracting, Inc.

Phone: 402-783-2663 or 402-890-6009

Address 13800 NW 70th St

Raymond, NE 68428 Cert #1198

Sum of Percolation Rates: 90

Average of Rates: 23

Rate Used for Calculation: 60

Soil type (NRCS Maps/Other) Clay Loam/Silty Clay Loam/Sandy Loam

Groundwater Depth >8'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official Date

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

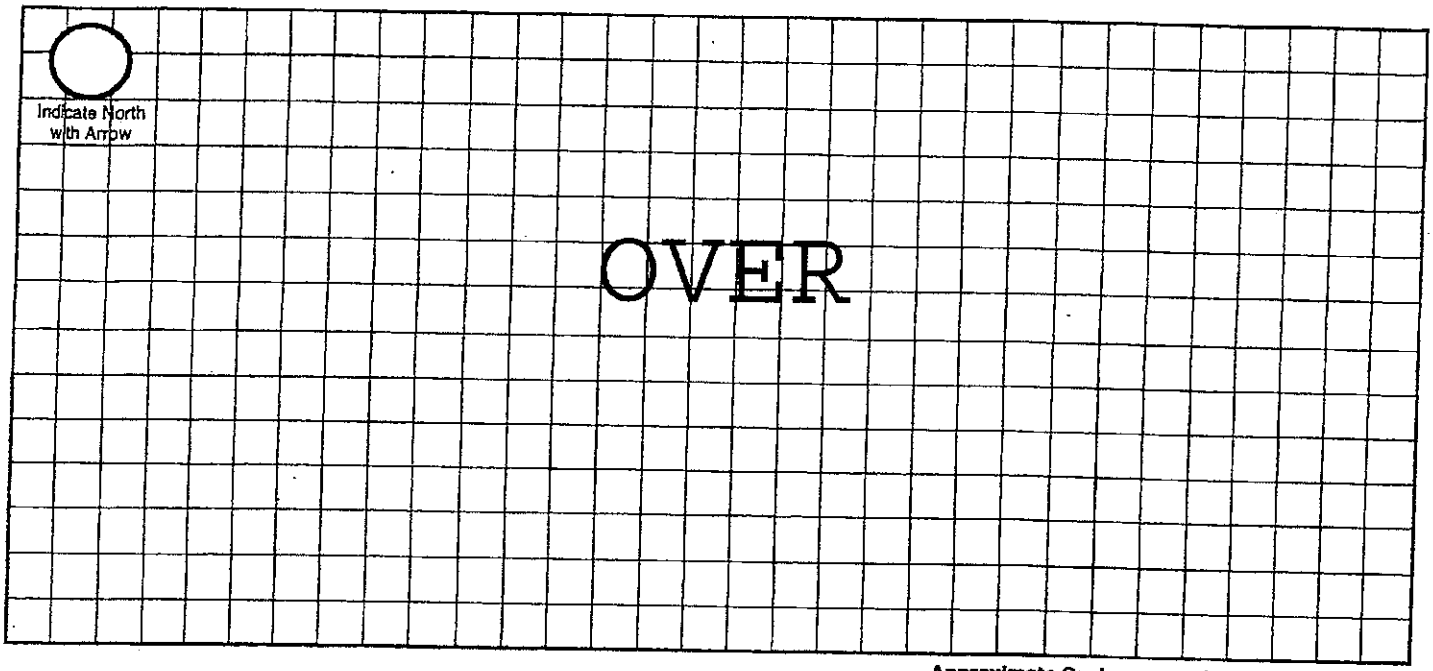
C

Permit Number:

Onsite Wastewater Treatment System

Preliminary Plan Specifications

Draw a plot plan showing onsite system sewer lines, drop of distribution boxes, tank, drainfields, percolation test holes, well, residence, direction of groundwater flow, property lines, and reserve area for replacement onsite system.



Approximate Scale: _____ft. = _____ grid line/s

A. Onsite System Location

Address (no rural route) 9084 N 14th St City Lincoln NE, Zip 68521

B. Proposed Septic Tank/s

Septic Tank Cap. 1000 gals(new) Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____ ☐ Lagoon(Max. seepage 1/8" per day)
1000 existing

C. Reserve Area for Replacement Onsite System

☐ Drainfield Absorption Area (percolation test required) ☒ Lagoon

D. Drainfield Absorption System

Percolation Rate 60 (min/inch = mpi) No. of Bedrooms 3 Soil Type Silty Clay Loam Land Slope _____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1080 sq.ft.

Total length of laterals 240 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☒ Other EZFlow 1203H

No. of absorption trenches 3 Width 38" No. of drop boxes 1 Distrubtion Box _____

No. of absorption beds _____ Width _____ No of Distribution lines per bed _____

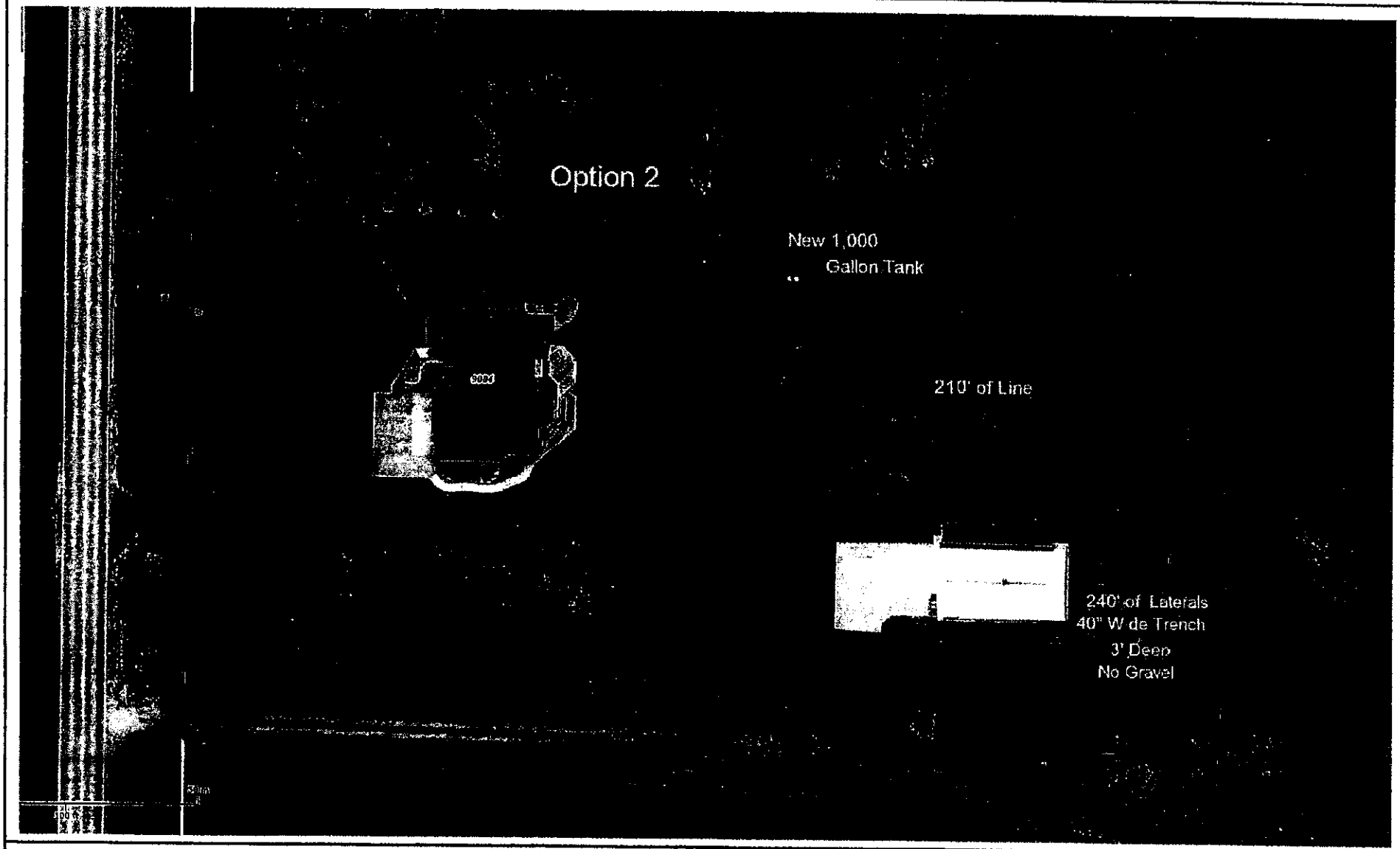
E. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☒	25 ☒	20 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☒	40 ☒	☒
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

F. Required Signatures

Home Building Contractor Existing Home Date _____

Installer Kurt L. Johnston Date 10/7/20



N
W E
S

Lancaster County/City of Lincoln GIS Map

Mark Sullivan 9084 N 14th St, Lincoln, NE 68521

Printed: Jul 11, 2018

DISCLAIMER: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email ags@lincolnne.gov and you will be directed to the appropriate department.

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS002111

System Type: Standard

Situs: No Site Address Specified

Issued: 10/9/2020

Expires: 10/9/2021

Description: SULLIVAN HEIGHTS, Lot 1

Owner: SULLIVAN, MARK & JUDITH TRUST
9084 N 14 ST
LINCOLN, NE 68531

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, Interim Health Director

Dear Applicant:

The above document is your permit to construct a new On-site Waste Water System at the location listed. Please contact this office once the sytem is complete in order to schedule a final inspection before use.

Patricia D. Lopez

Patricia D. Lopez, RN, MSN
Interim Health Director

RAYMOND CONTRACTING INC
13800 NW 70TH ST
RAYMOND, NE 68428

SCANNED

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

A

Permit Number
HS002111

Existing Home

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B and C. Submit correct fee with this Application

3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 9084 N 14th St (no rural route) City Lincoln, NE Zip 68521

Legal Description: SW (1/4) SW (1/4) 24 (Section) 11N (Township) 6E (Range) Sullivan Heights (Subdivison) 1 (Addition) (Block) (Lot)

PID 12-24-301-001-000

B. Owner

Name Mark & Judith Sullivan Signature Mark Sullivan Judith Sullivan

Address 9084 N 14th St City/State/Zip Lincoln, NE 68521

Home Phone 402-430-5525 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature Lloyd L. Jakoubek

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-890-6009 or 402-783-2663

D. Engineer

☐ Check and complete if engineer designed system P.E. License Number:

Designer Name Firm Work Phone

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 3 Whirlpool Bathtub? ☑ Yes ☐ No Total Acres 3.63

Garbage Grinder? ☑ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 82-30

1. Health Department
Site visits 10/21/20 DS Date rec'd 10/9/20 Date frwd 10/9/20
ACTION ☑ Approved ☐ Disapproved
Signature
Comments

2. Supt. Bldg. Insp. or Village Clerk
Comments Date rec'd Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments Date rec'd Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date 11/10/20

Business Office Use Only
Date Received 10-06-20 Amount Paid $440.00
Received By JAO Cash/Check No. CC 5040

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 1/13

Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

Exhibit 5

Permit Number: HS002111

Onsite Wastewater Treatment System

Inspection Sheet

Date 11/10/20 Legal Description ____ ¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 9084 N 14th City ____

Owner ____ Address ____

Mark One: ☒ Dwelling ☐ Non-dwelling

☒ New System ☐ Alteration [☐ Tank Only ☐ Trench Only] ☐ Lateral Only

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification): ____

Drainfield Absorption System:

☒ Lateral ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) ☐ Holding Tank ☐ Trench

Total square feet of drainfield 1,080 Sq. Ft. Tank Size 2,000 total gals 1,000 existing – added 1,000 new

Total length of laterals 240' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) EZ Flow

No. of Absorption Laterals 4 Width 4.5 Factor No. of Drop Boxes ____ Distribution Box 1

Leveling Method Used Laser

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Distance From	Private Well	Public Well	Surface Water	Ground water	Pressure Water Lines	Property Lines
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	10 ☐	5 ☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	25 ☐	5 ☐

Geographical Coordinates to 6 Decimals:

Tank NA

Lateral #1 ____ Lateral #3 ____

Lateral #2 ____ Lateral #4 ____

Comments:

Inspections prior to Final Approval
Initial DG Date 10/21/20

Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By Doug Rust

Date 11/10/20

Field Note Drawing (See Reverse Side):

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

D Exhibit 4

Permit Number HS002111

Onsite Wastewater Treatment System
As-Built Description and Drawing

Type of Onsite Wastewater System: ☐ Lagoon (Skip to Back Page) ☒ Subsurface Septic ☐ Mound

Onsite Wastewater System Location PID = 12-24-301-001-000

Address or Legal Description or Parcel Identification Number (PID): 9084 N 14th St, Lincoln, NE 68521

Owner: Mark & Judith Sullivan Address: 9084 N 14th St, Lincoln, NE 68521

A. Wastewater Piping Existing

1. Material: Unkown Diameter: ____ in
2. Distance between dwelling and septic tank: 100 ft.

B. Septic Tank

1. Material: Concrete Existing/Concrete New
2. Capacity: 1000g Existing/1000g New
3. Depth to top of tank, below unfinished grade: 24-30 in.
4. Distance to:
   - Well 100 ft.+
   - Pressure line N/A ft
   - Property Line 80 ft.+
   - Foundation 100 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: 199 ft. E

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other

   Material brand and inside width of Chamberless: EZFlow 1203H Bundles
2. Number of Laterals: 4
3. Length of each lateral (linear): ft 60 ft 60 ft 60 ft 60
4. Drainfield size: 1,080 sq ft.
5. Distance to:
   - Well 100 ft +
   - Pressure line N/A ft
   - Property line 5 ft +
   - Depth of Groundwater >10'

Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No

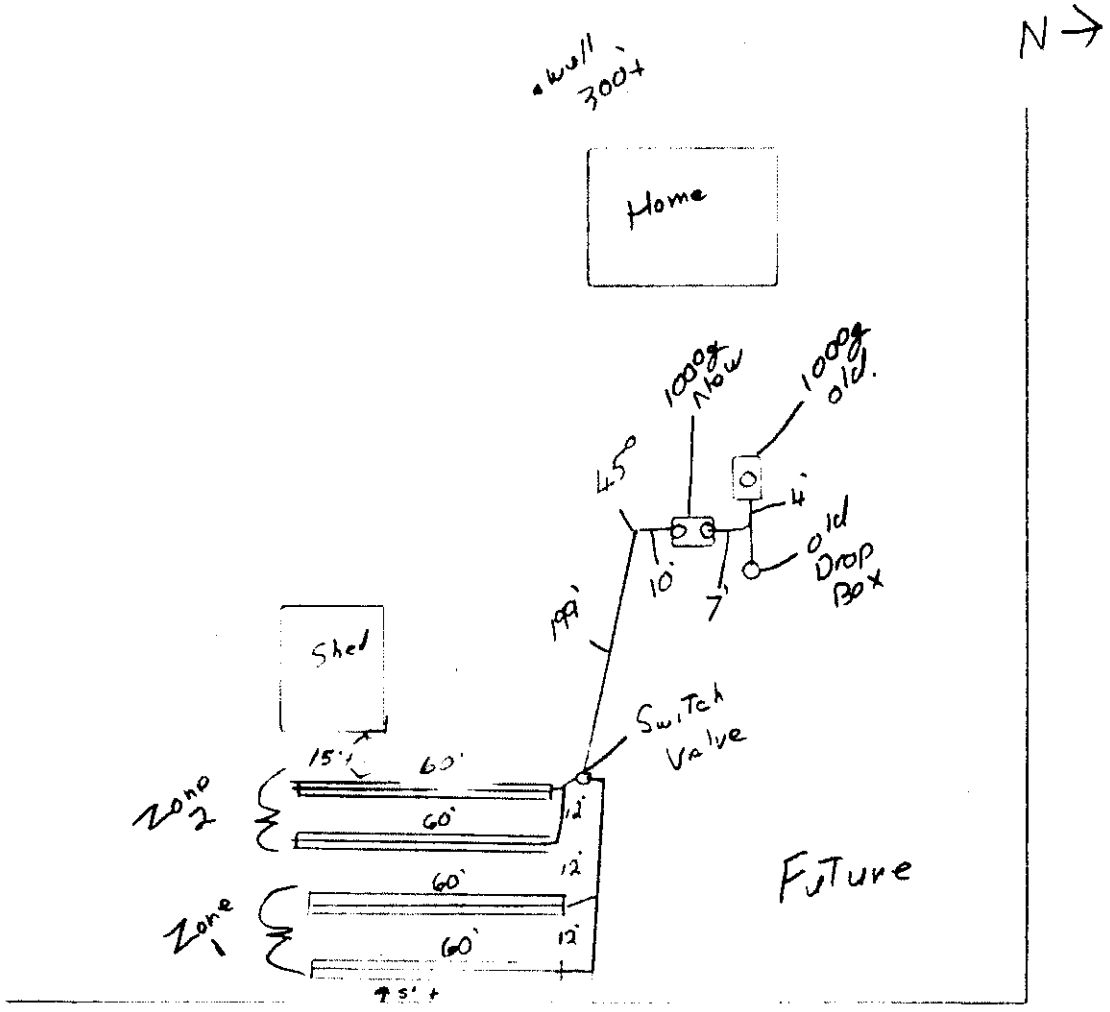
If Yes, the Certified Professional must sign below for final approval: (Partially)

I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: [signature] Date 10/21/20

Complete As-Built drawing on the back of this form.

Updated 4/15



60mpz
3130d yes/yes.

9084 N 14Th.
Lincoln, NE 68521

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663

10/2020

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE # 2785

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

6 MONTHS — THIS LICENSE OR PERMIT EXPIRES

SCOTT FITZGERALD GENERAL EXCAVATING 4401 NO. 27TH ST. LINCOLN, NE 68521 — LICENSEE OR PERMITTEE / ADDRESS

T11N; R6E; Sec. 24; 9200 No. 14th — NAME OF ESTABLISHMENT, IF ANY / ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 60.00	018754	$ 60.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☒
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2785

DATE: 12-28-88

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 11N ; Range 6E ; Section 24 SW 1/4 SW 1/4 ;
   Block _____ : Lot _____ : Addition Lancaster County
   Street Address 9200 N 14

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☐ ; Other ☐

4. Distance to public sewer: _____ ft. Experimental per drawing

Scott Fitzgerald General Excavating
Signature of Applicant (Owner or Lessee)

4401 N 27th Lincoln
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 12/28/88. Date Frwd. 12/29/88. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Neef

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 12/29/88. Date Frwd. 12/29/88. ACTION: Approved ☑ Disapproved ☐ Signature: Mel Hoddar

3. City or County Engineer: Date Rec'd. 12/29/88. Date Frwd. 12/29/88. ACTION: Approved ☒ Disapproved ☐ Signature: Donna Mastin

REMARKS OR REASONS FOR DISAPPROVAL ~~No WELL PERMIT YET.~~

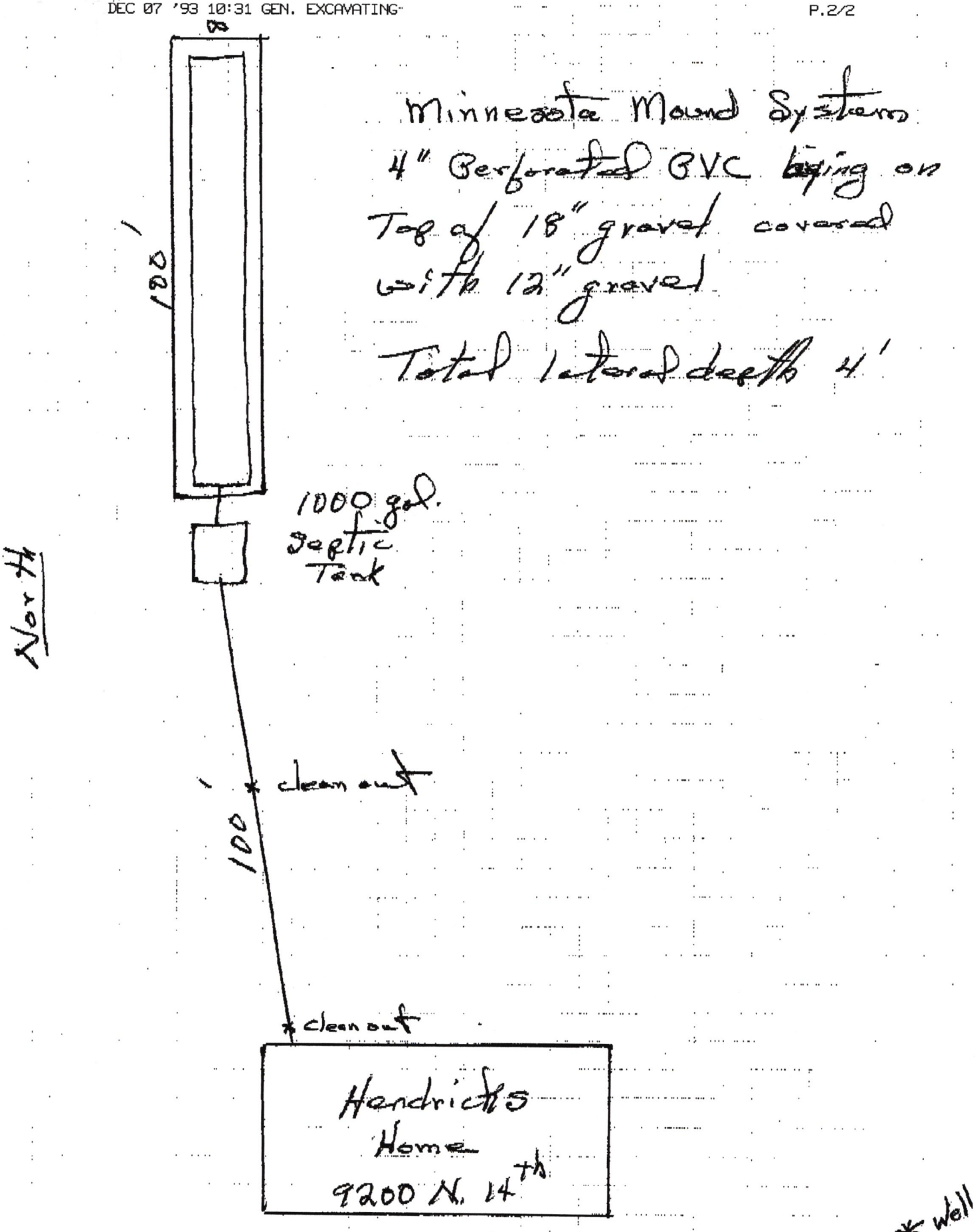
Site Visits:
Date: 12/30/88 by: [illegible] Line covered
Date: 1/4/89 by: [illegible]
Date: _____ by: _____

EXPERIMENTAL - Provisional

INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 12-8-93 By: Ron Mayhew

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM 23-43


Minnesota Mound System
4" Perforated PVC laying on
Top of 18" gravel covered
with 12" gravel
Total lateral depth 4'
100'
1000 gal.
Septic
Tank
clean out
100'
clean out
Hendricks
Home
9200 N. 14th
North
* well

004

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: Lincoln-Lancaster County Health Department or LLCHD

☐ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

☐ Evaluation of the Individual Water System ☐ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 9200 North 14th St, Lincoln NE 68521

Twp 11 Range 6 Section 24 1/4 SW 1/4 Block ____ Lot ____ Addition ____

Directions to Property 3/4 mi. N of Arbor Rd. on N. 14th St. - East side of road

Location of Well Front Yard-So.side 150' E of 14th street Tap Location: Inside ☐ Outside ☐

Location of Sewage System Back Yard -northeast corner near pine trees Year Installed 1989

Laterals to the East

	NAME	ADDRESS	PHONE
Present Owner:	George W. Hendricks (contact person) John Hendricks	9200 No. 14th St., Lincoln NE	467-1627
Tenant/Buyer:	Mark & Judith Sullivan	4310 No. 14th St.,Lincoln NE 68521	476-7429
Return to:	Meridian Title Co. Crowne Closing Co.	6940 "O" St. #312, Lincoln NE 68510	464-1200

Signature of Applicant Ruth Black Address 6940 "O" St. #312 Lincoln NE 68510 Date 04 / 08 / 97

HEALTH DEPARTMENT USE ONLY

Date Received 4 / 9 / 97 LP Received $150.00 Check ☒ Cash ☐ #6801

PRELIMINARY STATUS--By Ron Marquart **DATE:** 4 / 10 / 97

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ____ /ml
Nitrate	☒ <0.1 ppm	☒ 16.3 ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☒
Disapproved ☐

Additional Site Visits
Date 4 / 11 / 97 by RM
Date 4 / 17 / 97 by RM
Date ___ / ___ / ___ by ____

Comments: Experimental wide seepage bed for onsite septic system, thus a provisional approval. Recommend checking to see if septic tank needs pumping. There was

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☒ * **SEWAGE DISPOSAL SYSTEM** Approved: ☐ Provisional Approval: ☒

Approved by Ron Marquart, RS Date 4 / 23 / 97

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

* Approval applies to treated water only, not the raw water. High nitrate water must not be used for infant feeding.

012

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 12-1-93

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $150.00

Legal Description of Property: TWP. 11N; RANGE 6E; SECTION 24; BLOCK ____

LOT ____; ADDITION _____; Street Address 9200 N 14th St. Lincoln

Directions to Property _____

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System _____ Year Installed ____

	NAME	ADDRESS	PHONE
Present Owner:	George & Barbara Hendricks	9200 N 14th, Lincoln	476-2272 (H)
~~Tenant/Buyer:~~		Geral	467-1627 (W)
Return to:	Security Federal	P.O. Box 80849, Lincoln 68501	474 4444

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant George Hendricks Address Security Federal

==========

HEALTH DEPARTMENT USE ONLY

Date Received 12/02/93 Received $150.00 Check ☒ Cash ☐

#49856

PRELIMINARY STATUS--DATE 12-3-93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒ corrected	☒ depression	Approved:	☐	Date 12-3-93 by [illegible]
Bacteria	☒	☐	Provisional:	☒ corrected	Date 12-23-93 by [illegible]
Nitrate	☒ < 0.1	☒ 13.7 raw water	Disapproved:	☒ no drawing	Date _____ by ____

Comments: Recommend checking to see if septic tank needs pumping. An experimental wide seepage bed was installed for this home. Thus, a provisional approval.

See Attached Letter ☐

FINAL STATUS * Approval applies to treated water only, not raw water nitrate.

WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM:	
Approved: ☒	Approved: ☐	Provisional Approval: ☒

APPROVED BY Ron Mangnant R.S. DATE 1-5-94

Approval or disapproval is based on written standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

268