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. 2134-C

DATE: 8-16-84

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. Sec. 32 ; Range SW 1/4 of SW 1/4 5 East of the 6th P.M. ; Section Township 7 North ;
   Block _____ : Lot _____ : Addition Lancaster County
   Street Address 29300 S.W. 128th

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

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

4. Distance to public sewer: — ft.

Steven Lape
Signature of Applicant (Owner or Lessee)

1831 S.W. 15th
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/16/84 . Date Frwd. 8/20/84 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. _____ . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: Ernest Dlemmo

3. City or County Engineer: Date Rec'd. 8/20/84 . Date Frwd. 8/20/84 . ACTION: Approved ☐ Disapproved ☒ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

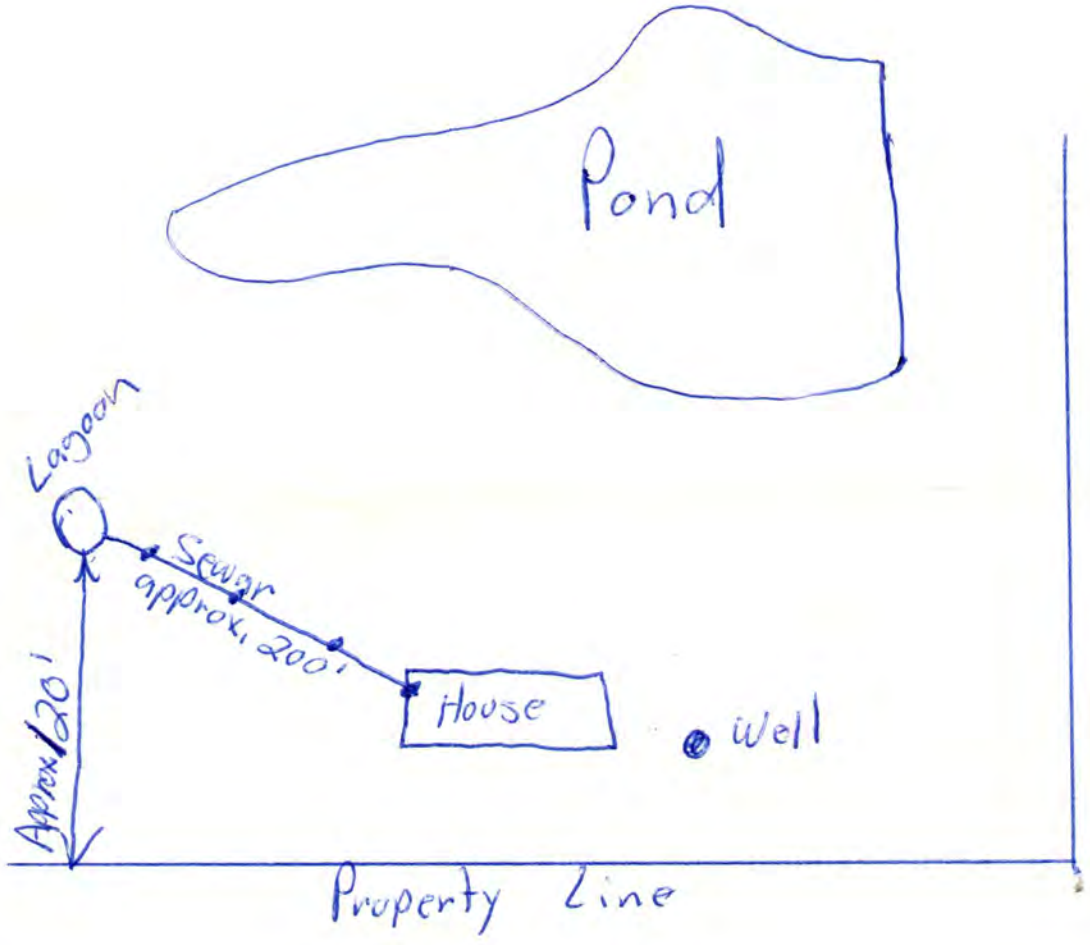
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 7134-C

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank _____ gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed _____ sq.ft.

_____
Signature of Reviewing Official

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 South 14th Street
Lincoln, NE 68502
(402) 471-2122
(402) 471-2080 (fax)

OCT 28 1998

Laboratory Report Run on: OCT-26-98

LLCHD
LINCOLN LANCASTER COUNTY HEALTH DEPT.
JOHN CHESS
3140 N STREET
LINCOLN, NE 68510

Results for: **EPA 353.2**

Laboratory Number: **P3705-15**
Sampled By: **JERROLD HOOD**
Location:
Well ID:

Date Collected: **16-Oct-1998 02:20 PM**
Date Received: **20-Oct-1998**

LEE NEELY

Parameters	Method	Prep Date	Analysis Date	Analyst	Results	Qual	Units	Report Limits
NITRATE/NITRITE	353.2			VR	4.6		mg/l	10

Note: see backside of report for description of acronyms and data qualifiers

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 South 14th Street
Lincoln, NE 68502
(402) 471-2122
(402) 471-2080 (fax)

NOV 2 1998

Laboratory Report Printed on OCT-29-98

LLCHD
LINCOLN LANCASTER COUNTY HEALTH DEPT.
JOHN CHESS
3140 N STREET
LINCOLN, NE 68510

Results for: **PRIVATE T/E COLI**

Laboratory Number: **P4223-14**
Sampled By: **JERROLD HOOD**
Location:
Sample Point: **LEE NEELY**

Date Collected: **28-Oct-1998 02:10 PM**
Date Received: **28-Oct-1998**

Parameters	Method	Analysis Date	Analyst	Results	Qual	Units	Report Limits
BACT REPORT LEVEL	COLILERT	10/29/98	RG	Final Report			
E. COLI	COLILERT	10/29/98	RG	E. coli negative		cfu/100ml	0
TOTAL COLIFORM	COLILERT	10/29/98	RG	Total coliform negative - meets bacteriological standards		cfu/100ml	0

Note: see reverse of report for description of acronyms and data qualifiers

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 South 14th Street
Lincoln, NE 68502
(402) 471-2122
(402) 471-2080 (fax)

OCT 27 1998

Laboratory Report Run on: OCT-23-98

LLCHD
LINCOLN LANCASTER COUNTY HEALTH DEPT.
JOHN CHESS
3140 N STREET
LINCOLN, NE 68510

Results for: **EPA 353.2**

Laboratory Number: **P3705-15**
Sampled By: **JERROLD HOOD**
Location:
Well ID:

Date Collected: **16-Oct-1998 02:20 PM**
Date Received: **20-Oct-1998**

LEE NEELY

Parameters	Method	Prep Date	Analysis Date	Analyst	Results	Qual	Units	Report Limits
NITRATE/NITRITE	353.2			VR	4.6		mg/l	10

Note: see backside of report for description of acronyms and data qualifiers

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2134-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

FEBRUARY 17, 1985 — THIS PERMIT EXPIRES

STEVEN LAPE PAINTING — ISSUED TO

1831 S.W. 15th LINCOLN, NE 68522 — ADDRESS

T7N; R5E; Sec 32 SW¼ of SW¼; 29300 SW 128 Street — LEGAL DESCRIPTION

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
JM	2/20/85	60.00

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977