FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

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

FILE NO. _____

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 11-3-94

The undersigned hereby applies for a permit to ALTER ☒, EXTEND ☐, or REPAIR ☐ an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 7N; Range 7E; Section 1 SW¼;
Block _____; Lot _____; Addition _____
Street Address 10500 Panama Rd.

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

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

4. Description of proposed alteration, extension or repair: Abandon Septic System, Install Sewage Lagoon & Building Sewer

5. Work to be done by: Owner ☐; or Contractor ☒, SOUTHWICK SERVICES
Contractor's Name

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$

Tim Obermeyer
Signature of Applicant (owner or lessee)

10500 Panama Rd
Address
Hickman, Ne 68372

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 50.00

2. Site Visits:
Date: 11-3-94 by: P.D.
Date: 12-5-94 by: P.D.
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 12-23-94 by: Pam

LINCOLN



JOHN L. BRADLEY, AICP
Interim Planning Director

NEBRASKA'S CAPITAL CITY

BARBARA J. HOPKINS, *Chair*
City-County Planning Commission

July 8, 1998

Dennis Kavanaugh
Rt 1, Box 186
Hickman, NE 68372

RE: County Subdivision, east of Holland on Panama Rd - A.S.# 98055

Dear Mr. Kavanaugh,

The county administrative subdivision permit which you submitted on June 16, 1998, has been reviewed by other agencies and the Planning staff. The review found the following items must be completed in order for us to complete the processing of your permit:

1. Provide a certificate of title from an abstractor or attorney, indicating the record owner(s) and any lienholder(s) of the property. A subdivision permit will be prepared and sent to you for signature based on the legal description and the record owners and lienholders provided.

2. The Building and Safety Department indicates no problems with the subdivision as submitted.

3.The County Health Department notes that the hand pump located on Parcel 2 must be decommissioned or repaired to meet health standards.

4. The County Engineer is requiring that the second access to Parcel 3 be removed prior to approval of the subdivision. They also note that future access permits for Parcels 1 and 2 will require permits from the County Engineers office.

5. Submit to the Planning Department the attached form indicating all taxes and assessments are paid up and current

December 14, 1994

Re: Location of sewage lagoon at 10500 Panama Road. Holland, Ne.

To Whom it may concern,

The above address is the property located directly east and adjacent to my residence and acreage. The sewage lagoon is located near the property line about 400 feet north of Panama Road. The property line is difficult to locate, however. It appears the lagoon is well within the property owned by Tim Obermier at 10500 Panama Road.

Because the sewage lagoon is located well inside the Tim Obermier property we have no objection to its location.

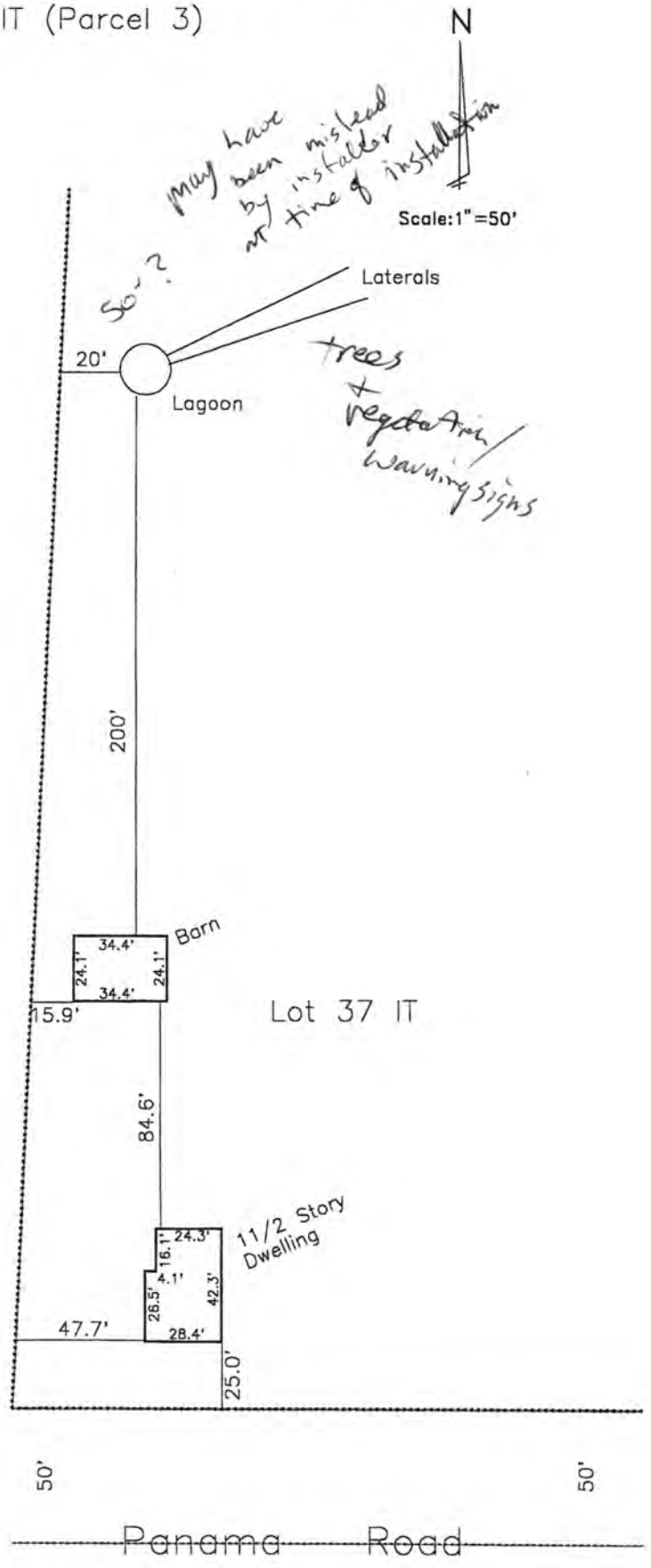
Sincerely,

Arzie Kelly

Arzie Kelly
RFD 10400 Panama Road
Hickman, Ne. 68373

Existing Conditions Sketch

Lot 37 IT (Parcel 3)



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

No. 94390042501

Permit
SEWAGE SYSTEM REPAIR

Issued 11/18/94
Expires 05/18/95
Revenue Code 18754

Establishment
TIM OBERMEYER
T7N R7E SEC 1
10500 PANAMA ROAD

FEES: $50.00

TOTAL $50.00

Permittee
TIM OBERMEYER
10500 PANAMA RD
HICKMAN NE 68372

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

JUL 1 1998

WATER CHEMISTRY

STATE LAB NO. 158-5460

COMPLETE INFORMATION BELOW

FOR LABORATORY USE ONLY

DATE COLLECTED 6-26-98 (MO DAY YEAR) 11:20 (HOUR)

TEST METHOD: USEPA METHOD 353.2

SAMPLE COLLECTED BY P. DROTZMANN

SAMPLE LOCATION Kavanaugh ; 10500 Panama Rd

PROPERTY LEGAL DESCRIPTION: COUNTY

QRTR SECT 1 TWNSHP 7 (N) (S) RANGE 7 (E) (W)

NITRATE ANALYSIS FOR DRINKING WATER

NITRATE — N Less than 0.1 mg/l

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

NOT TESTED BECAUSE OF:
☐ DAMAGE
☐ INSUFFICIENT AMOUNT
☐ IMPROPER CONTAINER

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:

Lincoln-Lancaster County Health Dept.
3140 "N" Street
Lincoln, NE 68510

TEST(S) BY

FOR ACCOUNTING USE ONLY

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

LWN 86

REPORTED '98 JUN 30 PM 3 30

RECEIVED '98 JUN 26 PM 1 39

JUN 30 1998

WATER MICROBIOLOGY

STATE LAB NO 148-12620

COMPLETE INFORMATION BELOW

DATE COLLECTED 6-26-98 11:20
MO. DAY YEAR HOUR

SAMPLE COLLECTED BY P. DROTZMANN

SAMPLE LOCATION Kavanaugh; 10500 Panama Rd

PROPERTY LEGAL DESCRIPTION: COUNTY LANC

QRTR ____ SECT 1 TWNSHP 7 N S RANGE 7 E W

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:

Lincoln-Lancaster County Health Dept.
3140 "N" Street
Lincoln, NE 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

FOR LABORATORY USE ONLY

TEST METHOD: ☐ MEMBRANE FILTER ☐ MPN

COLIFORM PURITY TEST FOR DRINKING WATER

TOTAL COLIFORMS 0 PER 100 ML.

☑ THE WATER MEETS BACTERIOLOGICAL STANDARD
☐ WATER DOES NOT MEET BACTERIOLOGICAL STANDARD
☐ RESULTS MAY BE INVALID DUE TO EXCESSIVE AGE*
*SAMPLES RECEIVED BETWEEN 30-48 HRS. AFTER COLLECTION

SAMPLE NOT ANALYZED BECAUSE OF:
☐ EXCESSIVE AGE ☐ INSUFFICIENT AMOUNT
☐ DAMAGE ☐ IMPROPER CONTAINER

TEST METHOD NUMBER: NIPDWR 141.27

TEST(S) BY RB

FOR ACCOUNTING USE ONLY

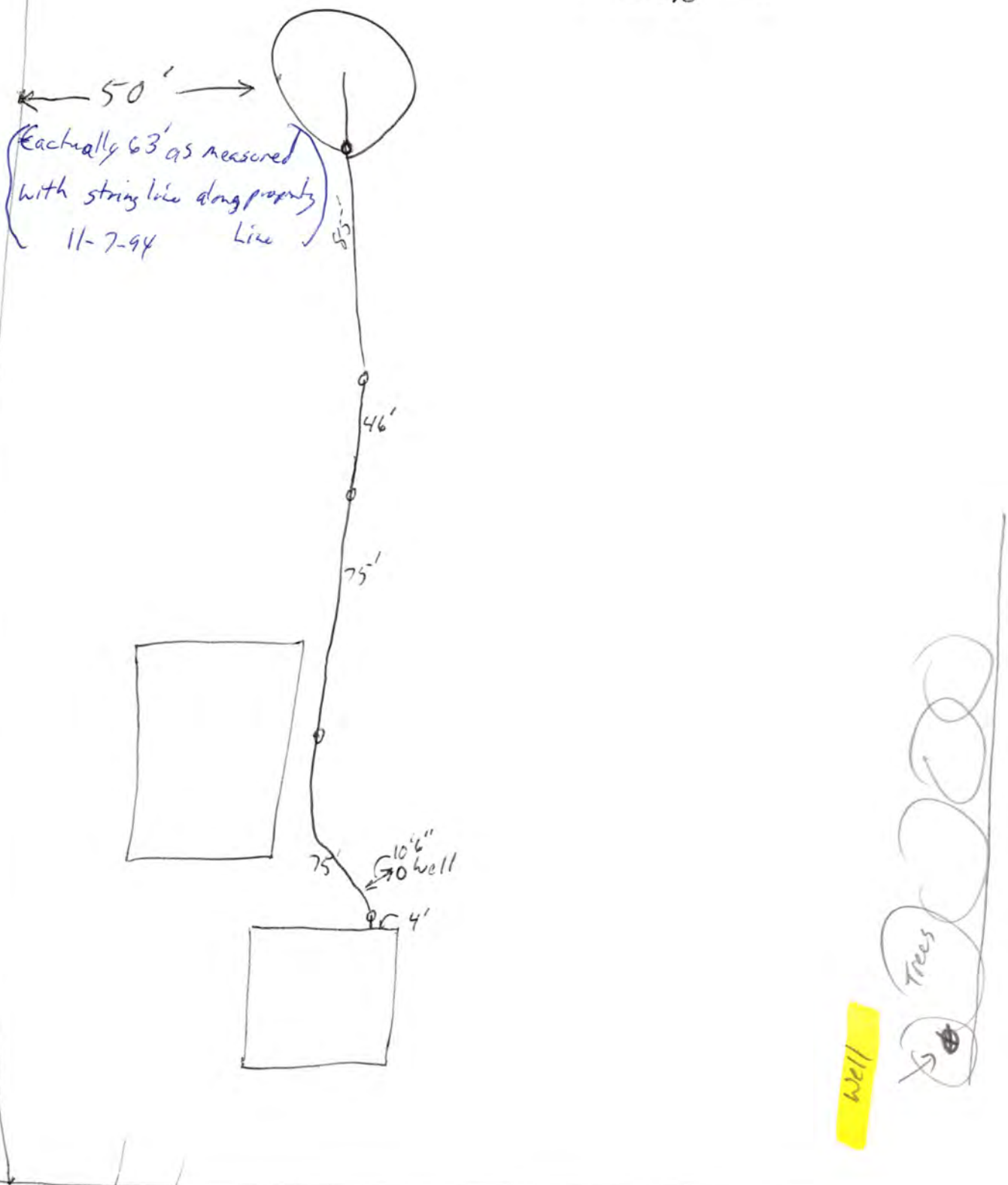
LWB 91

'98 JUN 27 PM 5 27 REPORTED

'98 JUN 22 PM 1 39 RECEIVED

survey of property shows lagoon fence to be 20' of the property line

Paul Drotzmann
6-25-98



6. Submit to the Planning Department the Register of Deeds recording fee (The Register of Deeds charge is $5.00 per 8 ½ x 11 item recorded, 50 cents per quarter section).

Upon submitting the above requirements to the Planning Department, the review will continue. Please address any questions to Mike DeKalb, (402) 441-6370.

Sincerely,

John Bradley, AICP
Interim Director of Planning

cc: Larry Worrell, County Engineering
Paul Drotzmann, Health Department
Roger Harris, Building and Safety

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