019

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER /

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: 2-24-92

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

Legal Description of Property: TWP. 7 N; RANGE 7 E; SECTION NE¼ 22; BLOCK ____

LOT ____; ADDITION _____; Street Address 25,200 South 82

Directions to Property 4 miles South of Hickman on 68TH to Princeton Rd, Turn East on Princeton Rd and go one mile. Two story house on the south west corner of the intersection of 82 & Princeton Rd.

Location of Well 75' East of House Tap Location: Inside ☒ Outside ☐

Location of Sewage System 26' West of House Year Installed 1978

	NAME	ADDRESS	PHONE
Present Owner:	Leroy & April Novratil	RR1 Box 885 Firth NE	791 5765
Tenant/Buyer:	" " "	" " "	" "
Return to:	Firstier Bank Susan E. Hinrichs	Box 81008 Lincoln, NE 68501-1008	434-1179

Present Owner PHONE: WORK 473-1307

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

Signature of Applicant [signature] Address RR1 Box 885 Firth NE 68358

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HEALTH DEPARTMENT USE ONLY

Date Received FEBRUARY 27, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 2/28/92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date 2/28/92 by J.C.H
Bacteria	☒	☐	Provisional:	☒	Date 3/5/92 by J.C.H
Nitrate <0.1 P.P.M	☒	☐	Disapproved:	☐	Date _____ by ____

Comments: PORTIONS OF THE SEWAGE SYSTEM PREDATE REGULATIONS HENCE APPROVAL IS PROVISIONAL, NO EVIDENCE OF MALFUNCTION See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Donald C. Hood R.E.H.S. DATE MARCH 9, 1992

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

BIOLOGICAL EXAMINATION OF DRINKING WATER

SAMPLE TO BE COLLECTED AND MAILED ON:

MO. ____ (2-3) WK. ____ (4) DAY ____ (5) SAMP/DAY ____ (6-7)

ACCOUNT NO. ____ (16-22) ADD. TESTS 1 (23) 1. FL 2. N 3. BOTH 4. TPC

DATE COLL. 3/5/92 1:52PM (9-16) BY J.C. Hood (17-28)

ADDRESS OR LOCATION NE¼ SEC. 22, T7N, R7E (29-41)

NAME AND ADDRESS OF OWNER
LARRY NAVRATIL
LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FOR LABORATORY USE ONLY

SPECIAL REQUEST: ____ (42)
0. NONE 1. CHECK 2. REPLACEMENT

SAMPLE CONDITION: ____ (43)
1. GOOD 2. DAMAGED 3. INSUFFICIENT 4. OLD 5. RETURNED UNUSED

LABORATORY NO. 5105 (44-47)

DATE EXAMINED ____ (48-53)

COLIFORM 0 (54-56) /100 mL.

FLUORIDE ____ (57-60) mg/LITER

NITRATE ____ (61-64) mg/LITER

TPC ____ (65-68) /100 mL.

LAB. PROCEDURE ____ (69-75)

ANALIZED BY ____ (76-79)

IN '92 MAR -5 P2:36

OUT '92 MAR -6 P3:35

WATER CHEMISTRY

STATE LAB NO. 15 124

COMPLETE INFORMATION BELOW

DATE COLLECTED 3 (MO.) 5 (DAY) 92 (YEAR) 1:52 P.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION LARRY NAPRATIL

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NE SECT 22 TWNSHP 7 N RANGE 7 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

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

REPORTED MAR -6 '92 P6:06

RECEIVED MAR -5 '92 P2:36

FOR LABORATORY USE ONLY

TEST METHOD: USEPA METHOD 353.2

NITRATE ANALYSIS FOR DRINKING WATER

NITRATE – N less than 0.1 mg/l

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

TEST(S) BY CC

FOR ACCOUNTING USE ONLY

LWN 88