LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 91380077101

Issued 10/25/91
Expires 04/25/92

ESTABLISHMENT

STEVE HOLDSWORTH
T7N R7E SEC 22 QTR NE

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

STEVE HOLDSWORTH
RR0001
BOX 0099C
FIRTH NE 68358

Issued By COUNTY HEALTH

I,T.

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

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
10/31/91	PAID

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: $ 150.00

FILE NO. _____

DATE: 10-23-91

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. 7 North ; Range 7 East ; Section 22 ; NE¼ NE¼
   Block _____ : Lot 18 I.T. : Addition _____
   Street Address _____

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

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

4. Distance to public sewer: _____ ft.

Steve Holdsworth
Signature of Applicant (Owner or Lessee)

RT. # 1, BOX 99C, FIRTH, NEBR 68
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/24/91. Date Frwd. 10/25/91. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 10-25-91. Date Frwd. 10-29-91. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Boeve

3. City or County Engineer: Date Rec'd. 10-25-91. Date Frwd. 10-25-91. ACTION: Approved ☒ Disapproved ☐ Signature: Terry Uhrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11/6/91 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

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

FORM 23-43