Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

011114

Permit: SEWAGE INSTALLATION
LAGOON

Establishment: RON PRESTON
T7N R8E SEC 32
12001 FIRTH RD-FIRTH

Permittee: RON PRESTON
10050 SPRINGLAKE NORTH LN
FIRTH NE 68358

Permit # 07380337501

Issued 08/09/07
Expires 08/09/08
Revenue Code 3157

FEES: $290.00

TOTAL: $290.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT

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

A

Permit Number
07380337501

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 12001 Firth Rd. (no rural route) City Firth, NE Zip 68358

Legal Description HR 6020 — 32 — 7N — 8E

1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot

Geographical Location (if known): Longitude: _____ Latitude: _____

☐ Check if system mail address is not the same as the owner's address Total Acres: 7-10 6.91

B. Owner

Name Ron Preston Signature _____

Address 10050 Springlake North LN City/State/Zip Firth Ne 68358

☐ Check if owner designed system Home Phone 791-2111 Work Phone _____

C. Contractor

Name: Brad Southwick Company Name Southwick Sewer & Drain

Address 105 Locust P.O. Box 191 City/State/Zip Hickman Ne 68372

☐ Check if contractor designed system Work Phone 430-7606

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name _____ Firm _____ Work Phone _____

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 2 Is there a Whirlpool Bathtub? ☐ Yes ☒ No

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

Type of Wastewater ☐ Domestic ☐ Non-Domestic Well Permit Applied for ☐ Yes ☐ No ☐ Not Applicable

DO NOT WRITE BELOW THIS LINE

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

1. Health Department
Site visits X X X
Date rec'd 8/7/07
Date frwd 8/9/07
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 _____ 8/20/07 - Lined Lagoon
Date 2/27/08

Business Office Use Only
Date Received 08/09/07 Amount Paid 290.00
Received By _____ Cash/Check No. 1186

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

Form A Updated: 5-07

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1537-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

NOVEMBER 18, 1979 — THIS PERMIT EXPIRES

RANDY KAMENDA by Danny Crosby — ISSUED TO

2128 South 15 Street, Lincoln, NE — ADDRESS

T7N, R8E, Section 32 NW¼ (Alter, Extend) — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

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

20109-0977

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: 475-6221)

FILE NO. 1537C

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

DATE: May 3, 1979

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 8E; Section NW 1/4 32;
Block _____; Lot _____; Addition _____
Street Address _____

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: add 150 FT 4" Perforated pipe in 3' Trenches

5. Work to be done by: Owner ☐; or Contractor ☒, A+M Sewage Danny W Corey
Contractor's Name
475-2913

6. Estimated cost of project:

a. Materials	$ 600
b. Labor	$ 500
c. Other	$
TOTAL	$ 1100

* the septic tank is about 42' from the well, it should be 50' or greater, this is a pre existing system which predates the county Resolution #2832. A cemented PVC sewer pipe is within 50' of the well, but greater than 10' from well.

Randy Kamenda (by Danny Lee)
Signature of Applicant (owner or lessee)

2128 So 15th
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: May-3-79
Filing Fee: $ 30.00

2. Site Visits:
Date: _____ by: _____
Date: _____ by: J.C.H.
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐
by: Ron Moyer

4. * INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ by: _____

CALL MARY BROWN GATEWAY 4601 'O' St. 488-2701 Res. 489-6581 office

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: 4-2-79

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☒ Evaluation of the Individual Water Supply
☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 7N ; Range 8E ; Section 32 ; NW 1/4
Block ; Lot ; Addition .
Street Address 120TH FIRTH ROAD SE CORNER OF INTR .
Directions on how to get to property .

Location of well SOUTH OF HOUSE 50' SEPTIC TANK SOUTH OF HOUSE E. end to S.SE. .
Where is tap: Inside ☐ Outside ☐ .

	NAME	ADDRESS	PHONE
Present Owner:	RANDY L KOMENDA	FIRTH NE	KAWASHAWKI
Tenant:			
Lending Agency:	NEBRASKA FEDERAL (original)	Gaylord Becker (City) 3201 Pioneer	483-4151
	6420 'O' St. Attn: Janet Harrison		

(Do not write below double lines)

Health Department: Date Received 4-2-79
Received $45.00 Check ☒ Cash ☐

Site Visits: Date 4-3-79 by NM
Date by
Date by

ROBERT E WENTZEL
Signature of Applicant

5121 GRASS RIDGE RD
Address 68512

PRELIMINARY STATUS -- DATE 4-3-79

Water System:
Approved ☐ Disapproved ☒

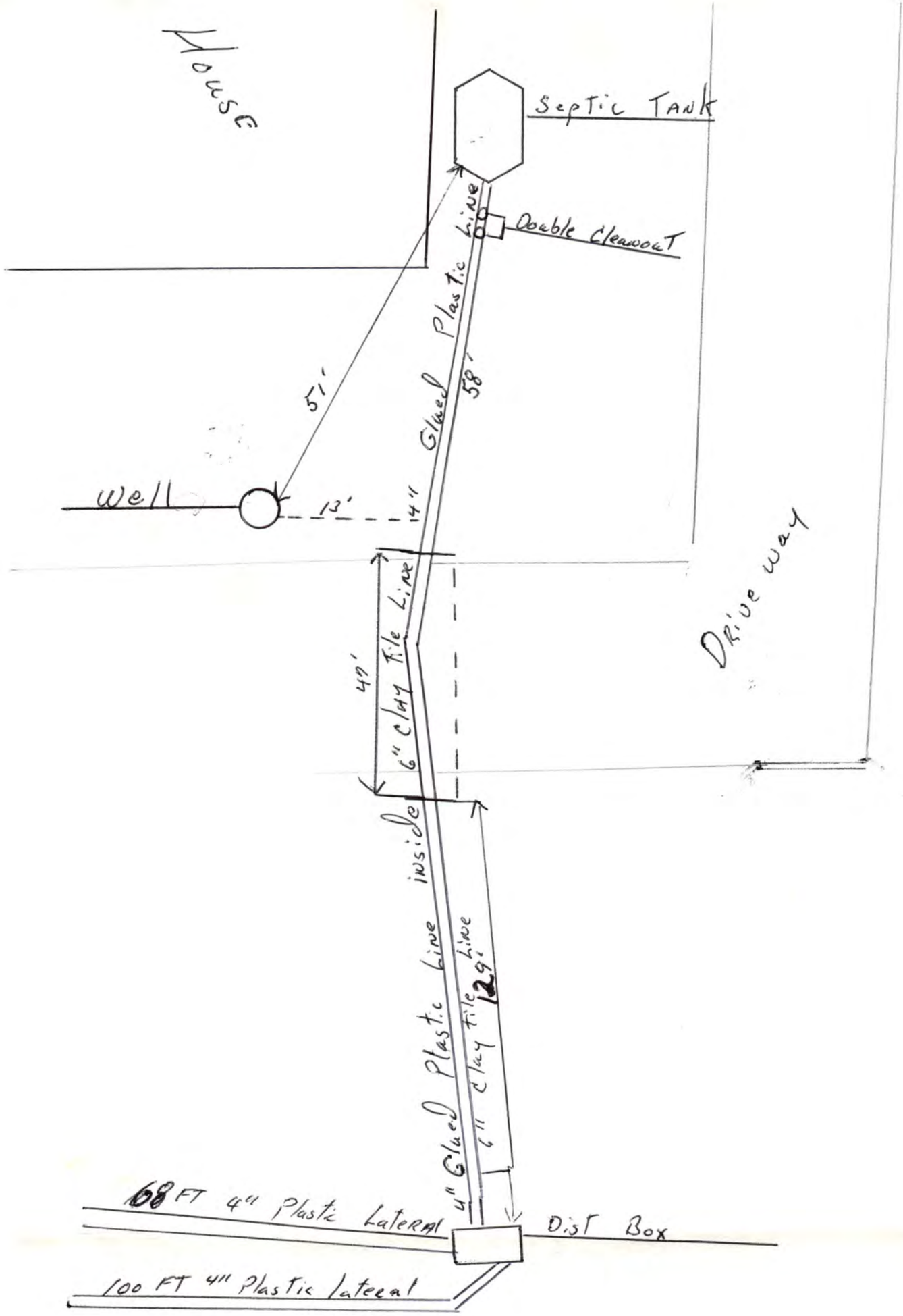
Sewage Disposal System:
Approved ☐ Provisional Approval ☐
Disapproved ☒

Corrections Required or Reasons for Disapproval Well pit & Sewage discharge on ground surface (Correction of sewage violation was made).
☒ See Attached Letter (Copy) with notes on sewage system corrections

FINAL APPROVAL -- DATE

Water System ☒ . Sewage Disposal System ☒ . BY

Form Number 20215-0878



Randy Kemenda
Firth Nebr.
9N, R6E Sec. 16, Lot 9 NE 1/4

A & A SERVICE COMPANY
2128 SOUTH 15TH STREET
LINCOLN NE 68502