LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 1841-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF PERMIT

May 12, 1982
THIS PERMIT EXPIRES

BARB ERLICH
ISSUED TO

RFD 1 MARTELL, NE
ADDRESS

T8N; R5E; Sec NE¼ 2
LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE ALTERATION

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._____

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

DATE: 11/9/81

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. 8N ; Range 5E; Section NE¼ 2 ;
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: change to lagoon system

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

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	800 00

Burt Erlich
Signature of Applicant (owner or lessee)

RFD 1 martell
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd:_____
Filing Fee: $ 30.00

2. Site Visits:
Date: 1-10-81 by: JMN
Date: 4-23-82 by: JMN
Date:_____ by:_____

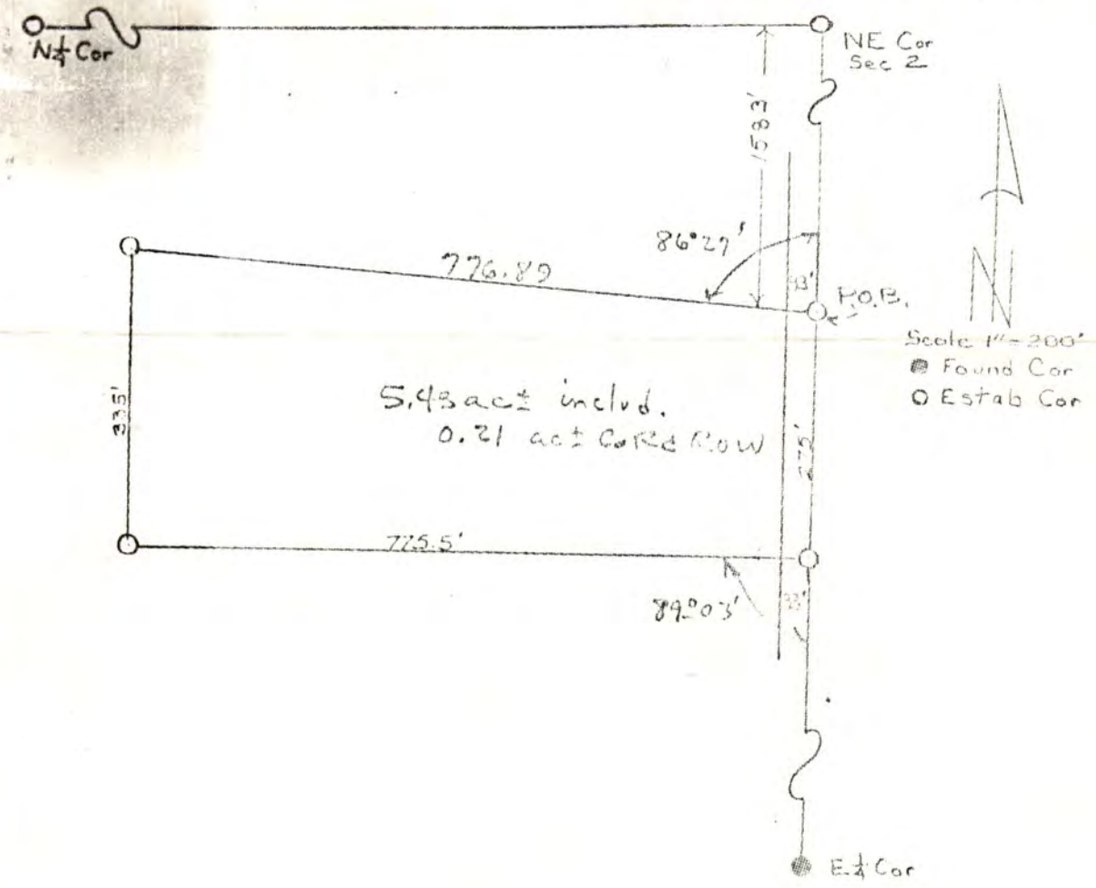
3. Date: Approved ☒; Disapproved ☐
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 4-23-82 by: John Olson

BATES AND ASSOCIATES
911 ADAMS – LINCOLN, NEBRASKA PHONE 432-3724

Survey of: An Irregular Tract Of Land Situated In

NE¼ of **Section** 2 **T.** 8 **N, R.** 5 **E of 6th P.M.**



An irregular tract of land located in the NE¼ Section 2 T8N R5E of the 6th P.M. Lancaster County, Nebraska more particularly described as follows:

Referring to the NE Corner of Section 2 T8N R5E, thence South on the East line of said Section, 1582', to the Point of Beginning, thence continuing on last described line 275', thence West on a line parallel to the North line of said Section 775.5', thence North on a line parallel to the East line of said Section, 335', thence Southeasterly on a line that makes an angle of 86° 27' with the East line of said Section, a distance of 776.89', to the Point of Beginning, the said tract contains 5.43 Acres more or less subject to 0.21 Acres more or less of County Road Right of Way.

I, being a registered land surveyor in the State of Nebraska, hereby certify that I have carefully surveyed the said tract and the plat of same is true and correct to the best of my knowledge.

Signed this 29th **day of** January **19** 74

Name: Robert B Bates

Surveyor's license No. L.S. 252

Land Surveyor's Seal

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. _____

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

DATE: 11-29-76

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. 8 ; Range 5 ; Section 2 ;
Block _____; Lot 4 ; Addition _____
Street Address _____

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

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

4. Description of proposed alteration, extension or repair: 30' run 100 x 3 lateral

5. Work to be done by: Owner ☐ ; or Contractor ☐ , Smith & Son
Contractor's Name

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$ 539	94

Kenney Ehrlich
Signature of Applicant (owner or lessee)

RT 1 Denton
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: No charge due to
Filing Fee: $ under eaved system in first place.

2. Site Visits:
Date: 11-29-76 by: rm
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☐; Disapproved ☐
by: _____

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-29-76 by: Ron Moyer

also see File # 437C & 976C

Slope 3-1
11' Dia @ bottom
45' Dia. across top

4-23-82 - fenced, gate, & locks needs signs - owner said they would put them up. suggested they plant grass to prevent erosion.