LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-780(

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / LO

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: Sept 2, 1989

☐ Evaluation of the Sewage Disposal System ☒ Enclosed is $75.00

Legal Description of Property: TWP. 8N; RANGE 6E; SECTION 16; BLOCK ____

LOT 44; ADDITION Hobbs 6; Street Address _____

Directions to Property South on Hwy 77 turn West on Hwy 33 turn North on SW 29th 1st drive way on right (log house)

Location of Well SW corner of house Tap Location: Inside ☐ Outside ☒

Location of Sewage System NE of house Year Installed 1980

	NAME	ADDRESS	PHONE
Present Owner:	Jim & Diane Johnson	15850 SW 29	794-8265
Tenant/Buyer:	Chris & Jan Neal	3728 'M' St	435-5000
Return to:	First Commerce (Sharon McDonald)	40th & South	

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

Signature of Applicant _____ Address 3728 M St.

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HEALTH DEPARTMENT USE ONLY

Date Received SEPTEMBER 5, 1989 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 9/6/89 9/10/89 by J.C.H

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☒	Date 9/6/89 by J.C.H
Bacteria	☒	☐	Provisional:	☐	Date 9/12/89 by J.C.H
Nitrate	☒	☐	Disapproved:	☐	Date 9/13/89 by J.C.H

9/14/89 M.P.H

Comments: IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Harold E. Hood R.S. DATE SEPTEMBER 14, 1989

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

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☒ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 15850 S.W. 29TH St, Malcolm, Ne.

Parcel ID 10 - ___ - 97 - 1260 - ___ (i.e. 99-99-999-999-999)

Twp 8N Range 6E Section 16 1/4 ___ 1/4 ___ Block ___ Lot 44 Addition SW 16-8-6 LCN

Directions to Property HWY 77 S. TO HWY 33 (CRETE CORNER), W. 3 mi. TO S.W 29TH, N. 2-MILES ON W. SIDE OF S.W. 29TH ST.

Location of Well S. SIDE OF HOUSE Tap Location: Inside ☐ Outside ☑

Location of Sewage System N.E. OF GARAGE Year Installed 1979

Site Hazards (dogs, etc.) NO - VACANT

	NAME	ADDRESS	PHONE
Present Owner:	CHRIS NEAL	1224 MULDER DR. LINC. NE. 68510	402/730-4321
Tenant/Buyer:			
Return to:	ROB HINRICHS - HOME FARM ESTATE	4501 S. 96TH ST. LINC. NE. 68526	402/432-1861 436-3199 (Fax)

Signature of Applicant Kim Hoff Address P.O.B. 22681 LINCOLN, NE. 68542 Date 11 / 1 / 04

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 11 / 3 / 04 Amount $200.00 Check No. 6255 Initials CW

DATA ENTRY Date ___/___/___ Case No. ___ Initials ___

PRELIMINARY STATUS--By Doug Smith **DATE:** 11/4/04

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**		**Additional Site Visits**
Construction	☒ 11/8/04	☐	Approved	☐	Date___/___/___by___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional	☒	Date___/___/___by___
Nitrate	☒ 0 ppm	☐ ___ ppm	Disapproved	☐	Date___/___/___by___

Comments: Corrections have been made on well deficiencies outlined in 11/4/04 letter.

See Attached Letter ☒

FINAL STATUS

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

Approved by Doug Smith Date 11/9/04

Approval or disapproval is based on State and local 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 operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00