Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

006240

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Permit # 05380297101

Issued 03/03/05
Expires 09/03/05
Revenue Code 3157

Establishment:
PEG EGGER
T8N R6E SEC 32 QTR NW
3905 W SPRAGUE RD-HALLAM

FEES: $200.00

Permittee:
PEG EGGER
3905 W SPRAGUE RD
HALLAM NE 68368

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

A

Permit Number: 05380297101

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☐ Septic System ☒ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 3905 unit Sprague Rd (no rural route) City Hallam NE, Zip Ne 68368

Legal Description N 525 ft E 678.3 ft NW-NW 32-8-6
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name Peg Egger Signature _____

Address 3905 unit Sprague R City/State/Zip Hallam Ne 68368

☐ Check if owner designed system Home Phone _____ Work Phone 826-2161

C. Contractor

Name Mitch Martin Company Name AQUA plumbing

Address 1025 unit 10th St City/State/Zip Crete Ne 68333

☒ Check if contractor designed system Work Phone 826-2101

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

Designer Name _____ Firm AQUA Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub YES ~~NO~~

☐ Commercial Establishment/Other Facility Specify Future "Wine"

Design flow in gallons per day ~~600~~ 600 Type of Wastewater: ☒ Domestic ☐ Non-Domestic.

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 2832

1. **Health Department** Date rec'd 2/28/05 Date frwd 2/28/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 2-28-05 Date frwd 2-28-05 ACTION ☒ Approved ☐ Disapproved Signature Shawn Johnson
3. **City or County Engineer** Date rec'd 2/28/05 Date frwd 2/28/05 ACTION ☒ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By Dan Inman

Date 7/18/05

Business Office Use Only
Date Rec'd 3/3/05
Amt Paid $200.00
Rec'd By CW Cash/Check No. 7309

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector