LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2618-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JULY 8, 1988 — THIS PERMIT EXPIRES

CHARLES S. WILLNERD — ISSUED TO

ROUTE #1, BOX 112 MARTELL, NE 68404 — ADDRESS

T8N; R7E; Sec 2; 12600 So. 82 Street — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
MF	1-8-88	

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 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: $ 60.00

FILE NO. 2618-C

DATE: January 8, 1988

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. 8N ; Range 7E ; Section 2 ;
   Block _____ : Lot 16 I.T. : Addition _____
   Street Address 12600 So 82nd

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

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

4. Distance to public sewer: Unkn ft.

Charles L Wellnitz
Signature of Applicant (Owner or Lessee)

Rt 1, Box 112 Martell, Ne 68404
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 1/8/88 . Date Frwd. 1/8/88 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 1/4/88 . Date Frwd. 1/6/88 . ACTION: Approved ☐ Disapproved ☐ Signature: Not Zoned

3. City or County Engineer: Date Rec'd. 1/8/88 . Date Frwd. 1/8/88 . ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 3/4/88 by: J. C. Hood Just started.
Date: 3/7/88 by: J. C. H.
Date: 6-17-88 by: [signature]

INSTALLATION FINAL WRITTEN APPROVAL
Date: June-17-88 By: Ron Mayhew

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

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. 2618-C

PROPERTY WHERE SOIL TESTED:

Location: Township 8N ; Range 7E ; Section & ¼ Section NW¼SW¼.
Property Dimensions: 193 ft. x 1179 ft. Area: 5.20 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: _____ to _____. Weather: Precip. _____ Temp. _____.

Lagoon will be sealed with Bentonite (CSW)

OWNER: Charles J Willard
Address: Rt 1, Box 112 Martell 68404

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

_____
Signature of Person Conducting Test

Address _____ Phone _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

Approved Percolation Rate (a)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

_____
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

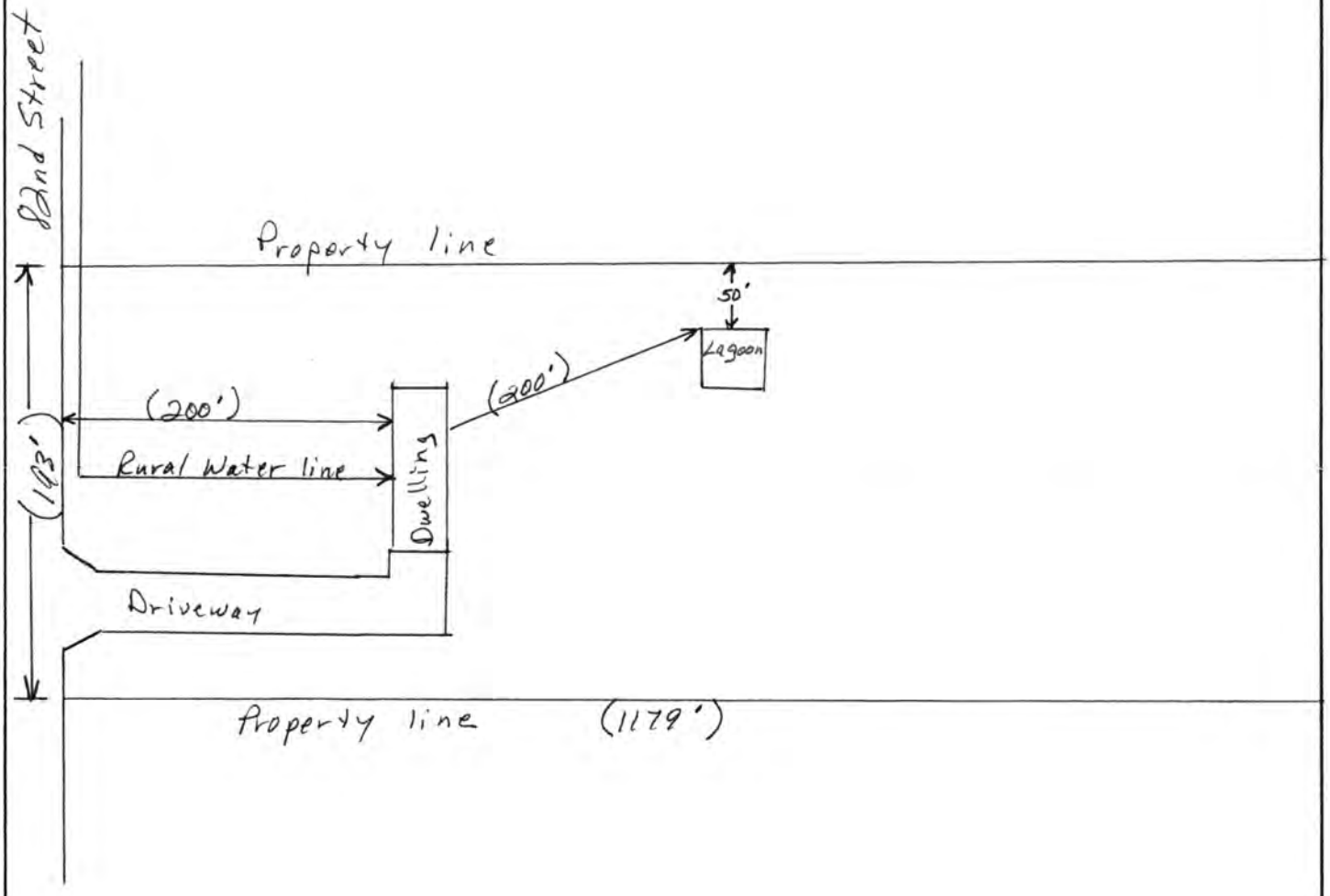
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 2618-C

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

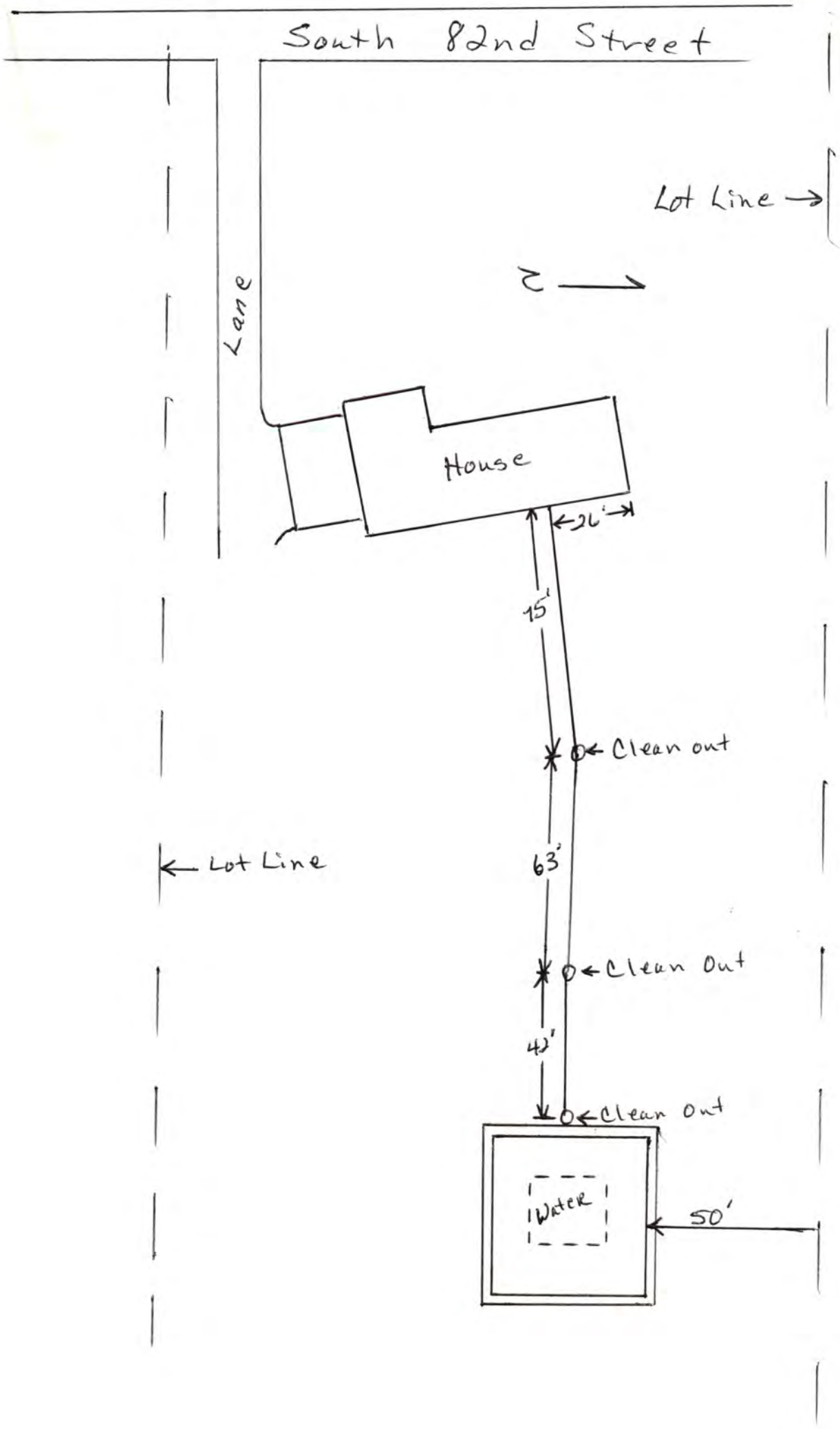
Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank _____ gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed _____ sq.ft.

_____
Signature of Reviewing Official


South 82nd Street
Lot Line
Lane
House
26'
15'
Clean out
Lot Line
63'
Clean Out
42'
Clean Out
Water
50'

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 $150.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 12600 So 82nd Roca, Ne

Twp 8N Range 7E Section 2 1/4 ___ 1/4 ___ Block ___ Lot 16 Addition ___

Directions to Property From 70th + Saltillo Rd – East on Saltillo to 82nd – South On 82nd 3/4 mile (Last hse, east side of 82nd)

Location of Well NA Tap Location: Inside ☐ Outside ☐

Location of Sewage System East of hse in Pasture Year Installed 1989

	NAME	ADDRESS	PHONE
Present Owner:	Charles Willnerd	12600 So 82nd Roca, Ne 68430	402-423-6161
Tenant/Buyer:	NA		
Return to:	Karen Harm First Federal Lincoln	135 No. Cotner Blvd Lincoln, Ne 68505	473-6111

Signature of Applicant Charles Willnerd Address 12600 So 82nd Roca, Ne 68430 Date 2/24/96

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 2/29/96
Initials J.C.H.
Amount $150.00
Check No. 3324

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

PRELIMINARY STATUS--By Gerald C. Hood **DATE:** 3/4/96

RURAL WATER

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☐
Disapproved	☒

Additional Site Visits
Date 3/6/96 by J.C.H.
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: NEED WARNING SIGNS ON FENCE. NEED LOCK ON GATE. WIDE SPACES BETWEEN PANELS IN GATE.

See Attached Letter ☐

FINAL STATUS RURAL WATER

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

Approved by Gerald C. Hood R.E.H.S. Date 3/6/96

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: 10-95

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 12600 South 82nd ST

Parcel ID 15-02-300-009-000 (i.e. 99-99-999-999-999)

Twp 8N Range 7E Section 2 1/4 ___ 1/4 ___ Block ___ Lot 16 Addition SW 2-8-7

Directions to Property 3/4 mi south of Saltillo Rd on 82nd St.

Location of Well RURAL WATER Tap Location: Inside ☒ Outside ☐

Location of Sewage System EAST of HOUSE Year Installed 1988

Site Hazards (dogs, etc.) NONE

	NAME	ADDRESS	PHONE
Present Owner:	CHARLES S. WILLNERD	12600 S. 82nd Roca NE 68430	402/423/2661
Tenant/Buyer:	SHERRILL ECHTERNKAMP		402/762-3866
Return to:	SHERRILL ECHTERNKAMP	104 NORTHRIDGE DR CLAY CENTER, NE 68933	402/762-3866 (Fax)

Signature of Applicant Sherrill Echternkamp Address 104 NORTHRIDGE DR CLAY CENTER, NE 68933 Date 9/16/05

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 9/20/05 Amount $200.00 Check No. 3185 Initials JJ

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

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 9/20/05

RURAL WATER

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments:

See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT

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

Approved by Jerrold C. Hood, R.E.H.S. Date 9/20/05

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

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2618-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JULY 8, 1988 — THIS PERMIT EXPIRES

CHARLES S. WILLNERD — ISSUED TO

ROUTE #1, BOX 112 MARTELL, NE 68404 — ADDRESS

T8N; R7E; Sec 2; 12600 So. 82 Street — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
MF	1-8-88	

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 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: $ 60.00

FILE NO. 2618-C

DATE: January 8, 1988

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. 8N ; Range 7E ; Section 2 ;
   Block _____ : Lot 16 I.T. : Addition _____
   Street Address 12600 So 82nd

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

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

4. Distance to public sewer: Unkn ft.

Charles L Wellnitz
Signature of Applicant (Owner or Lessee)

Rt 1, Box 112 Martell, Ne 68404
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 1/8/88 . Date Frwd. 1/8/88 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 1/4/88 . Date Frwd. 1/6/88 . ACTION: Approved ☐ Disapproved ☐ Signature: Not Zoned

3. City or County Engineer: Date Rec'd. 1/8/88 . Date Frwd. 1/8/88 . ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 3/4/88 by: J. C. Hood Just started.
Date: 3/7/88 by: J. C. H.
Date: 6-17-88 by: [signature]

INSTALLATION FINAL WRITTEN APPROVAL
Date: June-17-88 By: Ron Mayhew

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

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. 2618-C

PROPERTY WHERE SOIL TESTED:

Location: Township 8N ; Range 7E ; Section & ¼ Section NW¼SW¼.
Property Dimensions: 193 ft. x 1179 ft. Area: 5.20 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: _____ to _____. Weather: Precip. _____ Temp. _____.

Lagoon will be sealed with Bentonite (CSW)

OWNER: Charles J Willard
Address: Rt 1, Box 112 Martell 68404

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

_____
Signature of Person Conducting Test

Address _____ Phone _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

Approved Percolation Rate (a)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

_____
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

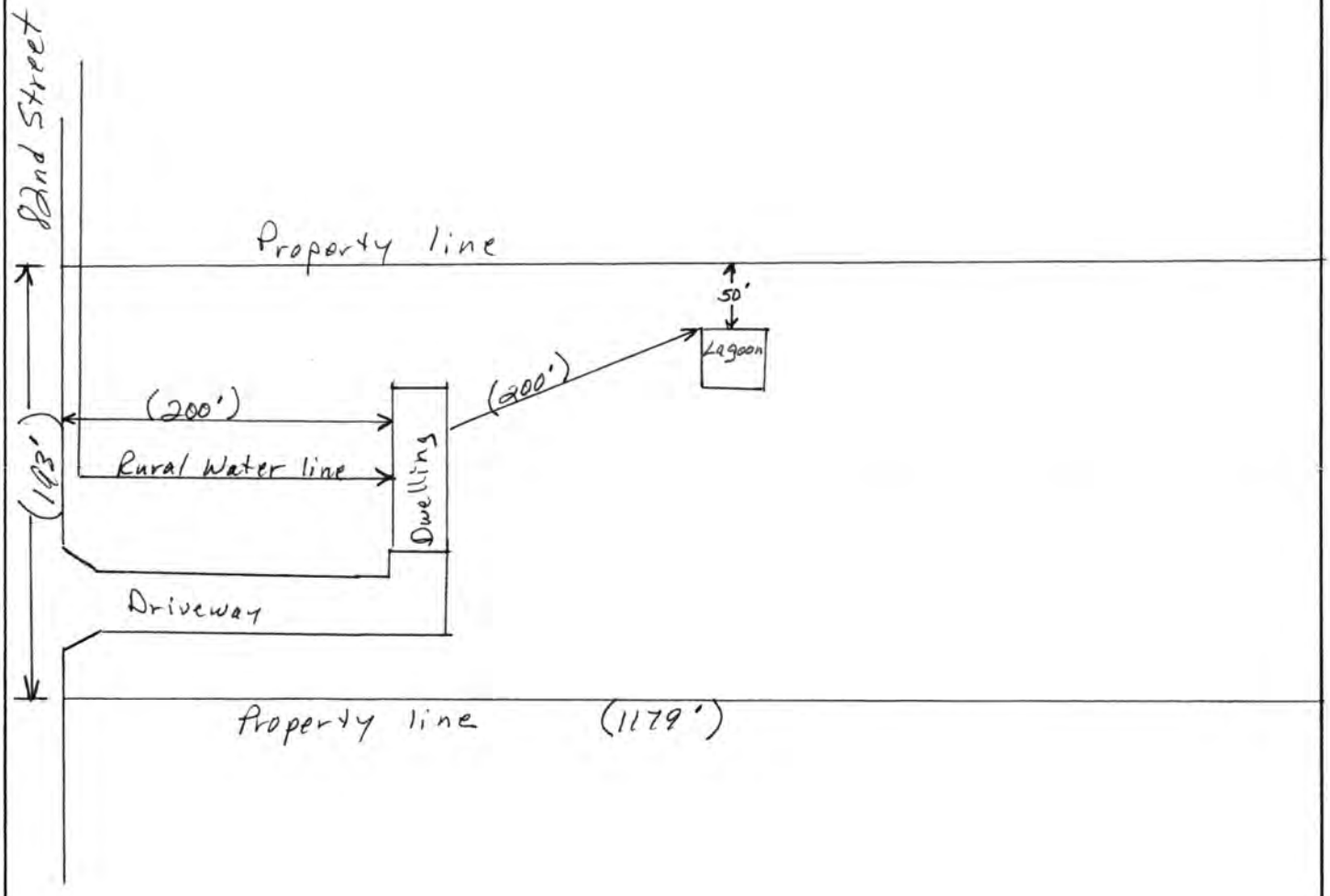
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 2618-C

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

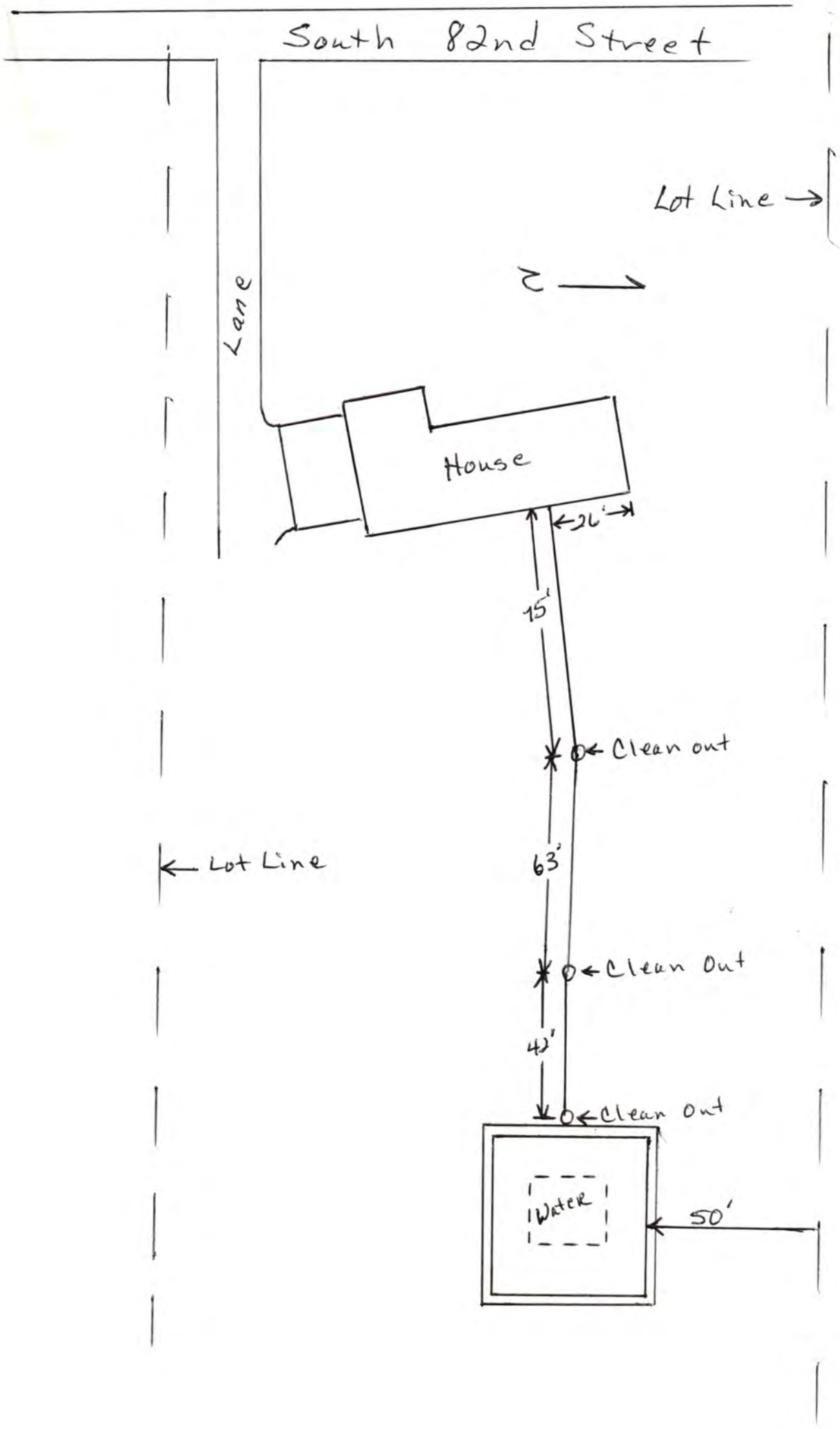
Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank _____ gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed _____ sq.ft.

_____
Signature of Reviewing Official


South 82nd Street
Lot Line
Lane
House
26'
15'
Clean out
Lot Line
63'
Clean Out
42'
Clean Out
Water
50'

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 $150.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 12600 So 82nd Roca, Ne

Twp 8N Range 7E Section 2 1/4 ___ 1/4 ___ Block ___ Lot 16 Addition ___

Directions to Property From 70th + Saltillo Rd – East on Saltillo to 82nd – South On 82nd 3/4 mile (Last hse, east side of 82nd)

Location of Well NA Tap Location: Inside ☐ Outside ☐

Location of Sewage System East of hse in Pasture Year Installed 1989

	NAME	ADDRESS	PHONE
Present Owner:	Charles Willnerd	12600 So 82nd Roca, Ne 68430	402-423-6161
Tenant/Buyer:	NA		
Return to:	Karen Harm First Federal Lincoln	135 No. Cotner Blvd Lincoln, Ne 68505	473-6111

Signature of Applicant Charles Willnerd Address 12600 So 82nd Roca, Ne 68430 Date 2/24/96

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 2/29/96
Initials J.C.H.
Amount $150.00
Check No. 3324

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

PRELIMINARY STATUS--By Gerald C. Hood **DATE:** 3/4/96

RURAL WATER

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☐
Disapproved	☒

Additional Site Visits
Date 3/6/96 by J.C.H.
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: NEED WARNING SIGNS ON FENCE. NEED LOCK ON GATE. WIDE SPACES BETWEEN PANELS IN GATE.

See Attached Letter ☐

FINAL STATUS RURAL WATER

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

Approved by Gerald C. Hood R.E.H.S. Date 3/6/96

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: 10-95

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 12600 South 82nd ST

Parcel ID 15-02-300-009-000 (i.e. 99-99-999-999-999)

Twp 8N Range 7E Section 2 1/4 ___ 1/4 ___ Block ___ Lot 16 Addition SW 2-8-7

Directions to Property 3/4 mi south of Saltillo Rd on 82nd St.

Location of Well RURAL WATER Tap Location: Inside ☒ Outside ☐

Location of Sewage System EAST of HOUSE Year Installed 1988

Site Hazards (dogs, etc.) NONE

	NAME	ADDRESS	PHONE
Present Owner:	CHARLES S. WILLNERD	12600 S. 82nd Roca NE 68430	402/423/2661
Tenant/Buyer:	SHERRILL ECHTERNKAMP		402/762-3866
Return to:	SHERRILL ECHTERNKAMP	104 NORTHRIDGE DR CLAY CENTER, NE 68933	402/762-3866 (Fax)

Signature of Applicant Sherrill Echternkamp Address 104 NORTHRIDGE DR CLAY CENTER, NE 68933 Date 9/16/05

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 9/20/05 Amount $200.00 Check No. 3185 Initials JJ

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

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 9/20/05

RURAL WATER

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments:

See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT

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

Approved by Jerrold C. Hood, R.E.H.S. Date 9/20/05

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