LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2842-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — 6 MONTHS
TYPE OF PERMIT — THIS PERMIT EXPIRES

MIKE W. HANSEN 1635 ARAPAHOE, LINCOLN, NE 68502
ISSUED TO — ADDRESS

7 N; R7E; Sec. 4 NW¼; Lot 1 I.T.; 5800 Saltillo Rd.
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 5-18-89 — AMOUNT 60.00

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

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

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. 2842-C

DATE: 5-17-89

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. 8 North; Range 7 East; Section NW¼(4)
   Block _____: Lot 12 I.T.: Addition _____
   Street Address 5851 Saltillo Rd.

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

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

4. Distance to public sewer: 3 mi ? ft.

Mike Harman
Signature of Applicant (Owner or Lessee)

1635 Arapahoe, Lincoln, NE. 68502
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/18/89. Date Frwd. 5/18/89. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nord

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: J. Wilson for Paul Boeman

3. City or County Engineer: Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Jim Blouzek

REMARKS OR REASONS FOR DISAPPROVAL LAGOON TO BE SEALED

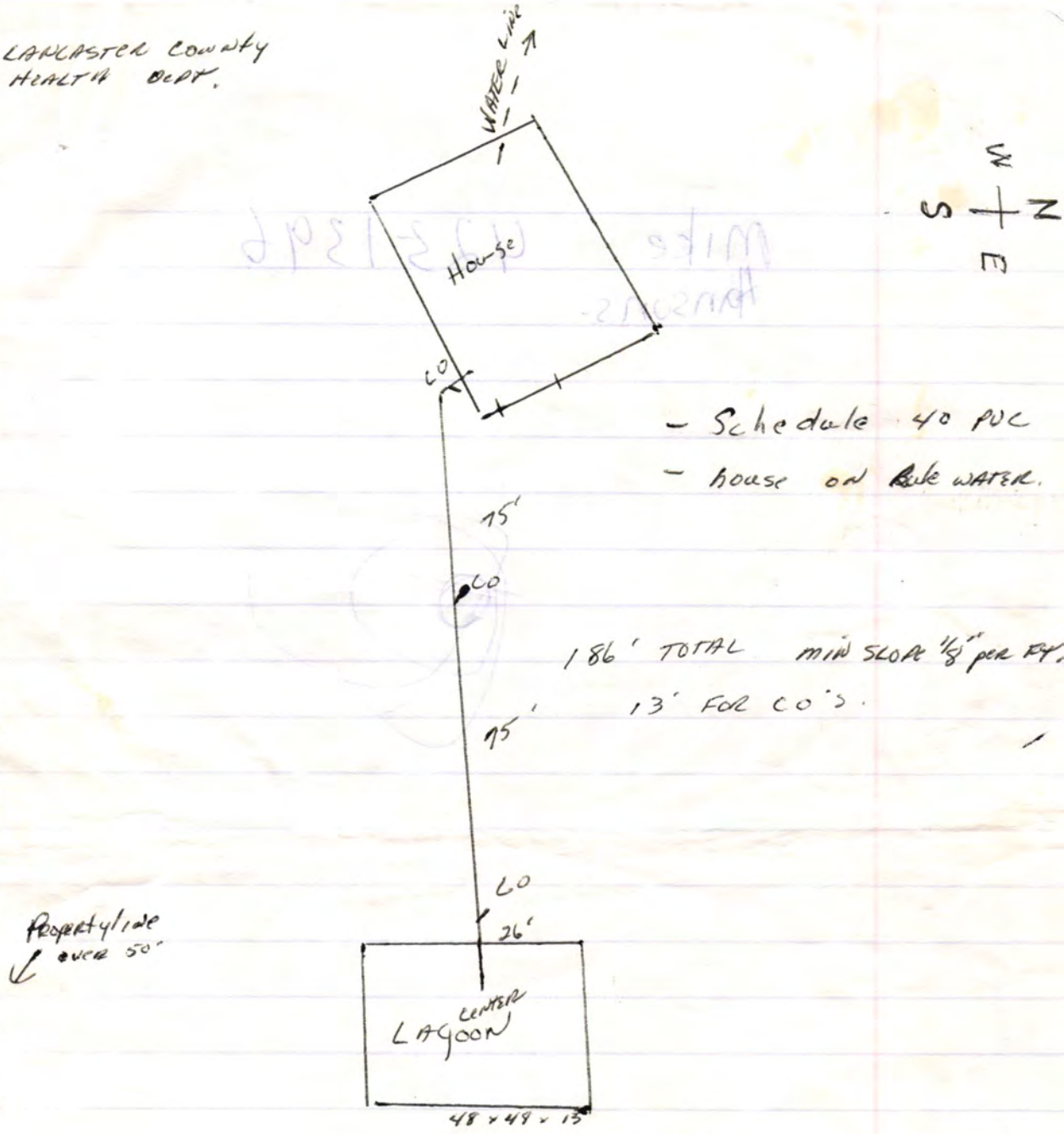
Site Visits:
Date: 1-10-90 by: rm (need to rebuild berms, need fence, need draining)
Date: 2-20-90 by: rm
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2-20-90 By: Ron Hayward

FORM 23-43

LANCASTER COUNTY
HEALTH DEPT.



- Schedule 40 PVC
- house on Rule WATER.

186' TOTAL min SLOPE 1/8" per FT.
13' FOR CO's.

- min. 4' high FENCE MAX 8' Between posts with corner bracing
- concrete block FASTENED ON min 24"x 24" CONCRETE PAD.
- STEEL POST DEPTH MARKER
- WARNING SIGN ON each SIDE

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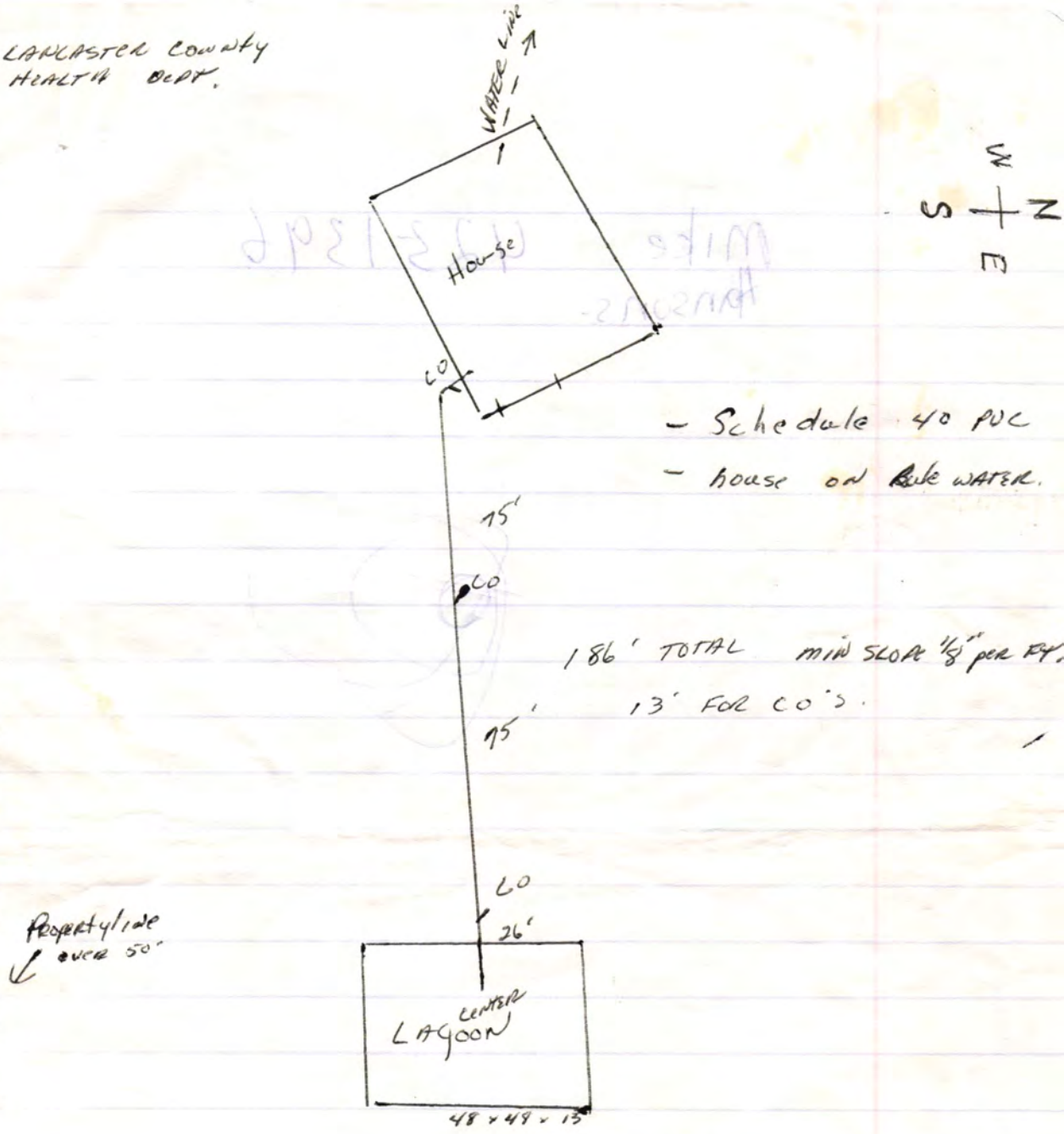
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