LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE SYSTEM REPAIR

No. 94390041201

Issued 08/29/94
Expires 03/01/95
Revenue Code 18754

Establishment
WAYNE ARBUCK
T8N R7E SEC 22
17205 S 82 STREET

FEES: $50.00

TOTAL $50.00

Permittee
WAYNE ARBUCK
17205 S 82 ST
LINCOLN NE 68506

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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: 471-7800)

FILE NO. _____

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

DATE: 8-26-94

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 7E; Section 22;
Block _____; Lot _____; Addition SE ¼
Street Address 17205 So. 82nd

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

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

4. Description of proposed alteration, extension or repair: ~~Lagoon~~ Lagoon

5. Work to be done by: Owner ☐ ; or Contractor ☒, Sinclair Service, Lagoon Const.
Contractor's Name

6. Estimated cost of project:

a. Materials	$	Over $400
b. Labor	$	
c. Other	$	
TOTAL	$	

Wayne Arbuck
Signature of Applicant (owner or lessee)

17205 So. 82nd
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: 8-26-94
Filing Fee: $ 50.00

2. Site Visits: 11:00
Date: 8-26-94 by: P.D.
Date: 8-26-94 1:00 by: P.D.
Date: _____ by: _____

3. Date: Approved ☑; Disapproved ☐
by: Paul Drotzmann

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ by: _____