LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2141-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

APRIL 17, 1985 — THIS PERMIT EXPIRES

DENNIS EGGER — ISSUED TO

HICKMAN, NE 68372 — ADDRESS

T8N; R7E; Sec 24, W½, SE¼ — LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE ALTER, EXTEND OR REPAIR

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
M	10/7/84	30.00

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 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: 475-6221)

FILE NO. 2141-C

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

DATE: _____

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. ~~9~~ 8N ; Range ~~25~~ 7E ; Section ~~8~~ ~~7E~~ W½SE¼ 24 ;
Block ~~20~~ ; Lot _____ ; Addition _____
Street Address _____

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

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

4. Description of proposed alteration, extension or repair: would like to just use lagoon instead of septic tank because of prohibitive cost of adding laterals

5. Work to be done by: Owner ☐ ; or Contractor ☑ , Allen Moser Calven Rhoads
Contractor's Name

6. Estimated cost of project:

a. Materials	$ 655	00
b. Labor	$ 200	00
c. Other	$ 200	00
TOTAL	$ 1055	00

Dennis Eggers
Signature of Applicant (owner or lessee)

Hickman, Ne. 68372
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 30.00

2. Site Visits:
Date: 11-6-84 by: _____ (shrub cut down east side)
Date: 12-18-84 by: _____ * cor drainage need level line & sewer line
Date: 9/22/97 by: L.E.H. * building E dike

3. Date: Approved ☒ ; Disapproved ☐
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/22/97 by: Jerrold Hood