LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2415-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

APRIL 22, 1987 — THIS PERMIT EXPIRES

DR. S. DAVID KAPLAN — ISSUED TO

HOLLENBERG, KS 66946 — ADDRESS

T8N; R7E; Sec 35; 8901 Hickman 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: [illegible] DATE: 10/22/86 AMOUNT:

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER
2832

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

20109-0977

REC'D OCT 22 1986

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. 2415-C

DATE: Oct 20-1986

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: NW of NE

1. Legal description of property: Twp. 8N ; Range 7E ; Section 35 ;
   Block _____ : Lot _____ : Addition _____
   Street Address 8901 Hickman Road

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

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

4. Distance to public sewer: 2 miles ft.

Bevery S. Kaplan
Hollenberg, KS 66946

Signature of Applicant (Owner or Lessee)

Hollenberg, Ks 66946
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/22/86. Date Frwd. 10/22/86. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nord

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

3. City or County Engineer: Date Rec'd. 10/22/86. Date Frwd. 10/22/86. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

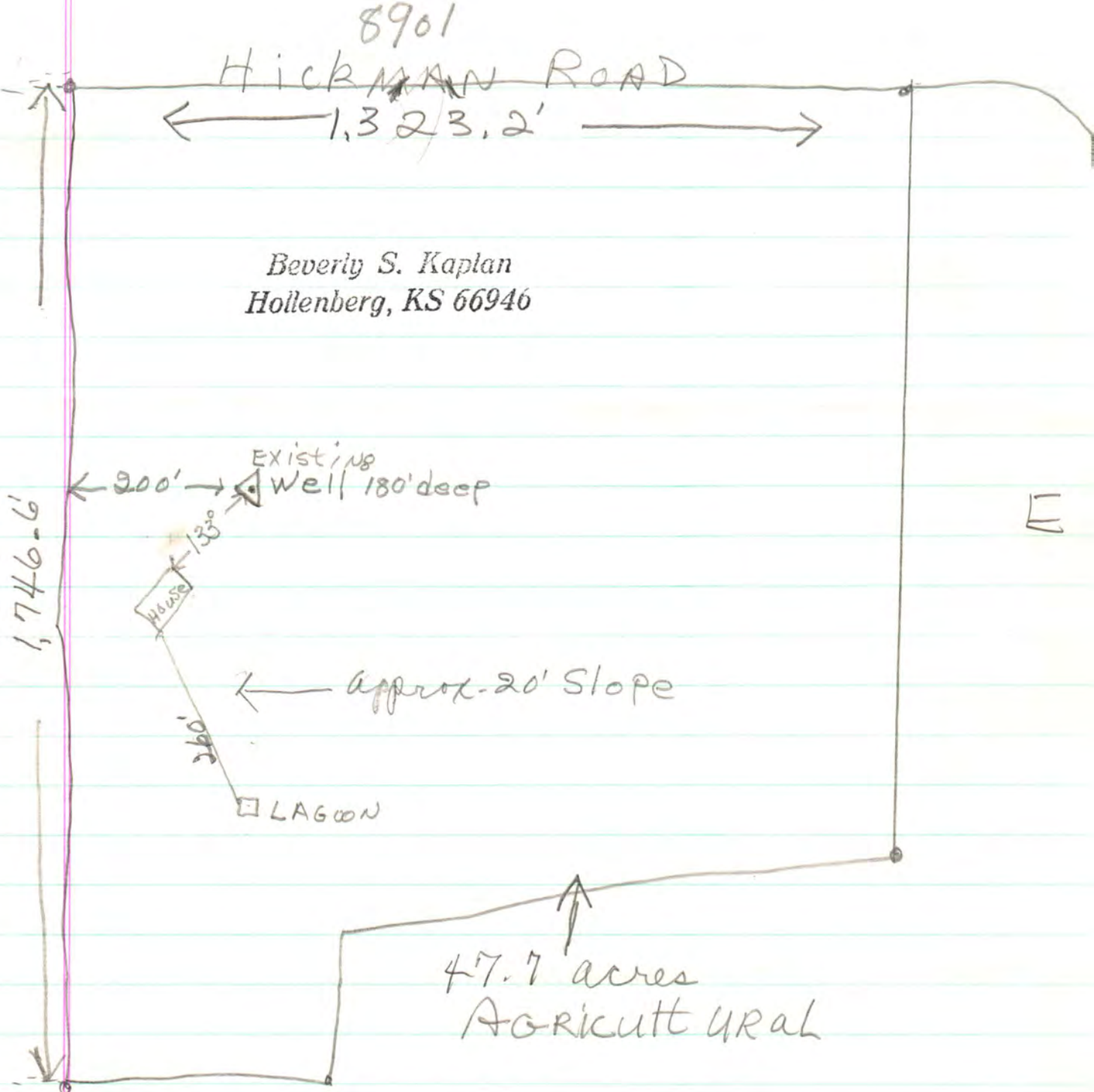
Site Visits:
Date: 3/9/87 by: L.C.H. sewer line only need face tile
Date: 5-22-87 by: [signature]
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

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

N

2415-C



W

E

NW¼ NE¼ & Part Lot 2 (1.1)
NE¼ Sec. 35 T8N, R7E of 6th PM