LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 91380068801

Issued 04/09/91
Expires 10/09/91

ESTABLISHMENT

WESLEY HAECKER
T8N R8E SEC 31
LOT 9
11200 STAGECOACH RD

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

WESLEY HAECKER
2911 S 58 ST
LINCOLN NE 68506

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
4/15/91	PAID

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

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: $ 150.00

FILE NO. _____

DATE: 4-9-91

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 8E ; Section 31 ;
   Block _____ : Lot 9 I.T. : Addition _____
   Street Address 11200 Stage Coach Rd. Hickman, NE. 68372

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: _____ ft.

Wesley D. Haecker
Signature of Applicant (Owner or Lessee)

2911 So. 58th St. Lincoln NE. 68506
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/9/91 . Date Frwd. 4/9/91 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 4-9-91 . Date Frwd. 4-10-91 . ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bowen

3. City or County Engineer : Date Rec'd. 4/9/91 . Date Frwd. 4/9/91 . ACTION: Approved ☐ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____
Lot Lies Entirely in Flood Plain Zone "A" PB.

Site Visits:
Date: 7-23-91 by: PAUL DRETZMANN
Date: 10/8/91 by: J.C. HOOD
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/8/91 By: Jerrold Hood

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

FORM 23-43

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

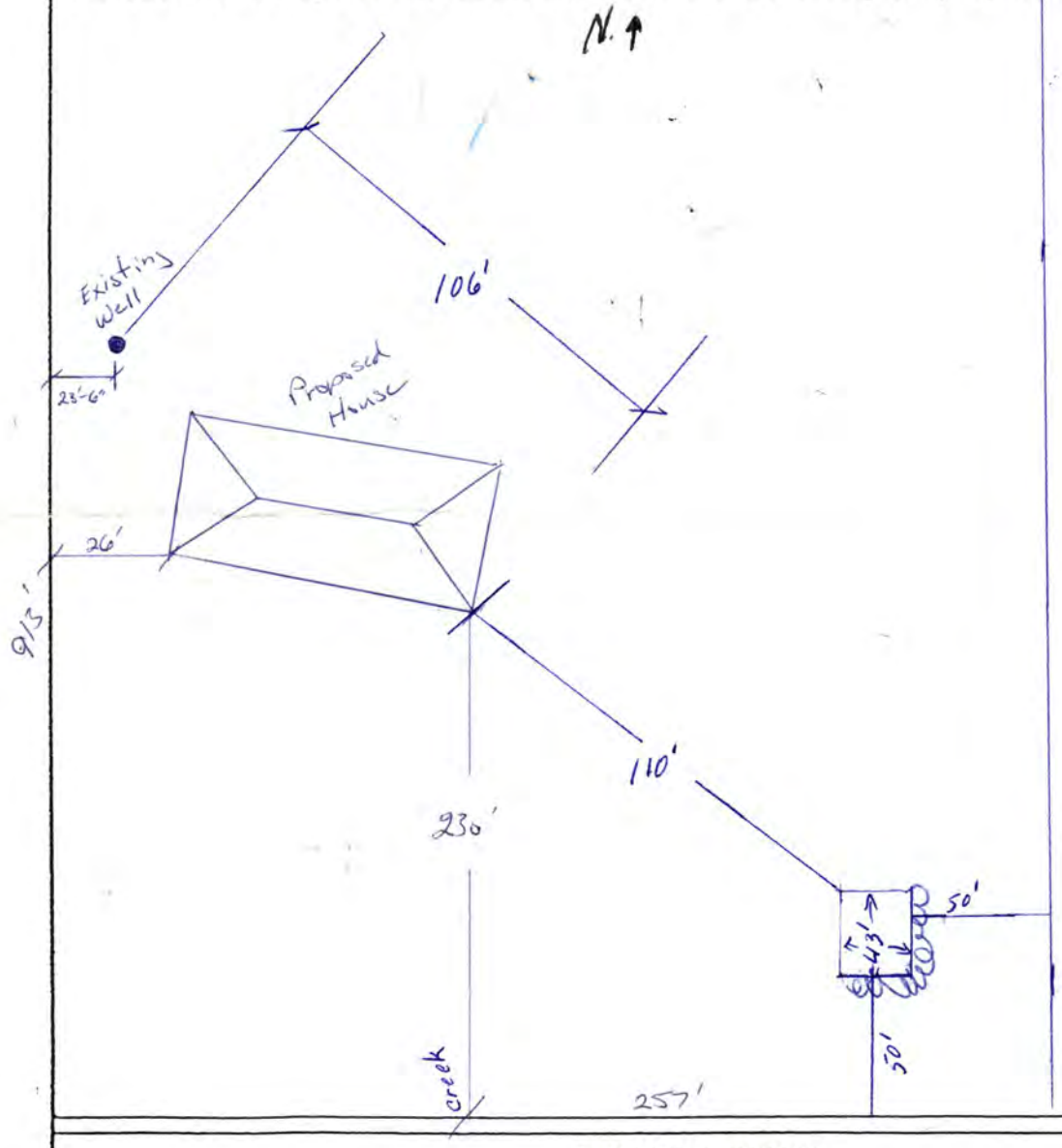
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

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

FILE NO. _____

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



REVIEWING ACTION

Remarks: _____

_____

Date: _____

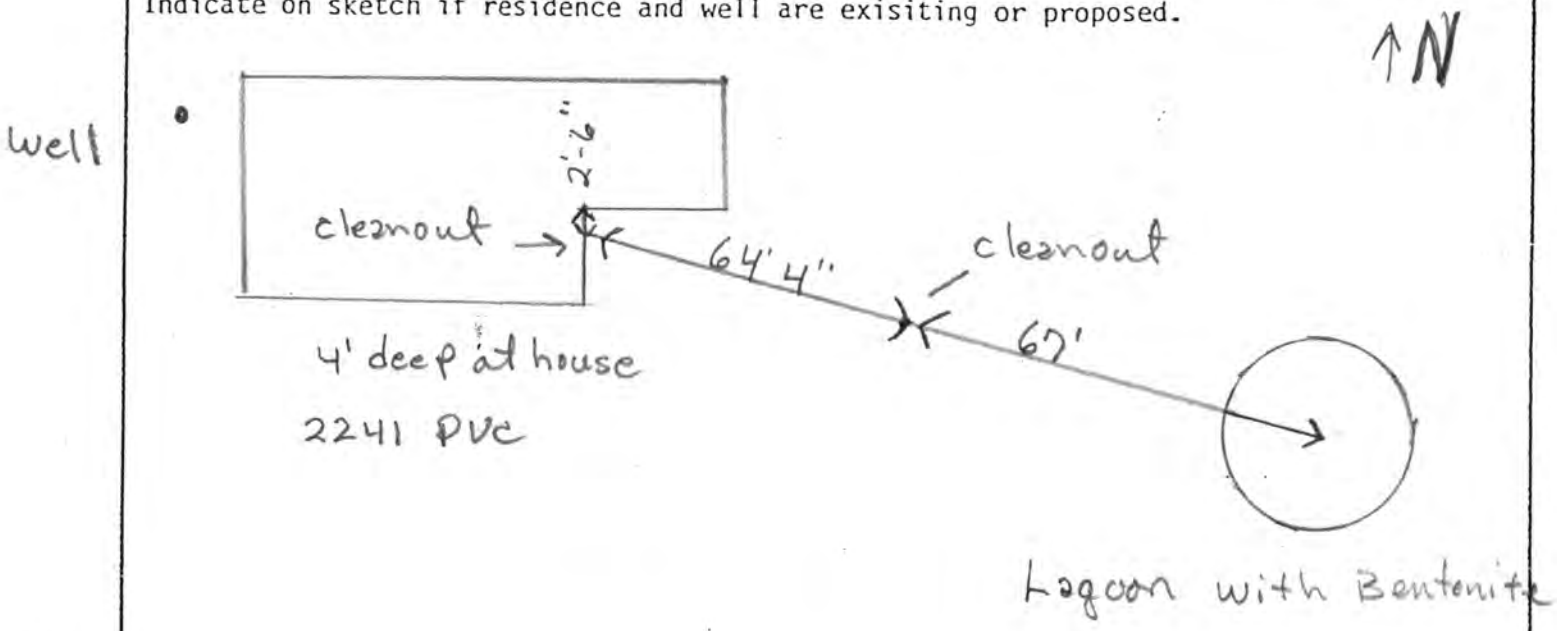
Minimum Design Requirement
1. Capacity of Septic Tank _____ gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed _____ sq.ft.

_____ _____
Signature of Reviewing Official

Wes Haecker

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. _____

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REVIEWING ACTION

Remarks: _____

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