FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 433-C

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

DATE: April 29, 74

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

9.1ac see attached

1. Legal description of property: Twp. 9N ; Range 5E ; Section 3
Block _____; Lot _____; Addition _____
Street Address Rt #6 Lincoln

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

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

4. Distance to public sewer: _____ ft.

James H Schroeder
Signature of Applicant (Owner or Lessee)

Lincoln, Rt 6 68502
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 4/29/74. Date Frwd. 4/29/74. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: _____

3. City or County Engineer: Date Rec'd. 4-29-74. Date Frwd. 4-29-74. ACTION: Approved ☒ Disapproved ☐ Signature: Henry Krafft

REMARKS OR REASONS FOR DISAPPROVAL _____

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

Received Brasch 4-29-74

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT 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: 475-6221)

FILE NO. 433-C

DATE: April 29, 74

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9 N.; Range 5 E; Section 3 ; Block ; Lot ; Addition .
Street Address Rt 6 Lincoln.

2. Property Use: Residential ☐; Commercial ☐
No. of Bedrooms ___ Describe: ___
Other Use ___
Describe: ___

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

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

James H Schroeder
Signature of Applicant (owner or lessee)

Lincoln Nebr. Rt 6 68502
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; ___
Filing Fee: $ 30.00

2. Site Visits:
Date: 6-11-74 by: jwr
Date: ___ by: ___
Date: ___ by: ___

3. Date: Approved ☒; Disapproved ☐ 4/29/74
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-11-74 by: James Neverka

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Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: Lincoln-Lancaster County Health Department or LLCHD

☒ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

☐ Evaluation of the Individual Water System ☐ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 3305 ~~3401~~ S.W. 84th Street 3209

Twp 9N Range 5E Section ~~3~~ 1/4 NE 1/4 Block ____ Lot 9 Addition Irregular Tract

Directions to Property W Van Dorn to SW 84th, then ~~south~~ on SW 84 property on West side SOUTH

Location of Well East side of large building Tap Location: Inside ☒ Outside ☐

Location of Sewage System SW of large building Year Installed 77

	NAME	ADDRESS	PHONE
Present Owner:	Dennis & Donna Borgman	11321 W. Van Dorn, Denton 68339	475-2098
Tenant/Buyer:	Merv & Loretta Goodrick	1221 S.W. 24th, Lincoln 68521	475-7541
Return to:	Capitol Title Attn: Marilyn Wimer	P. O. Box 6577 68506-6577	434-3713

Signature of Applicant Merv Goodrick Address 1221 SW 24 Date 11/5/96

HEALTH DEPARTMENT USE ONLY

Date Received 11/08/96 Received $150.00 Check ☑ #819 Cash ☐

PRELIMINARY STATUS--By Gerald C. Wood **DATE:** 11/13/96

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☐	☒	Approved ☐	Date 11/25/96 by J.C.H.
Bacteria	☒ 0 /ml	☐ ____ /ml	Provisional ☐	Date ___/___/___ by ____
Nitrate	☒ <0.1 ppm	☐ ____ ppm	Disapproved ☒	Date ___/___/___ by ____

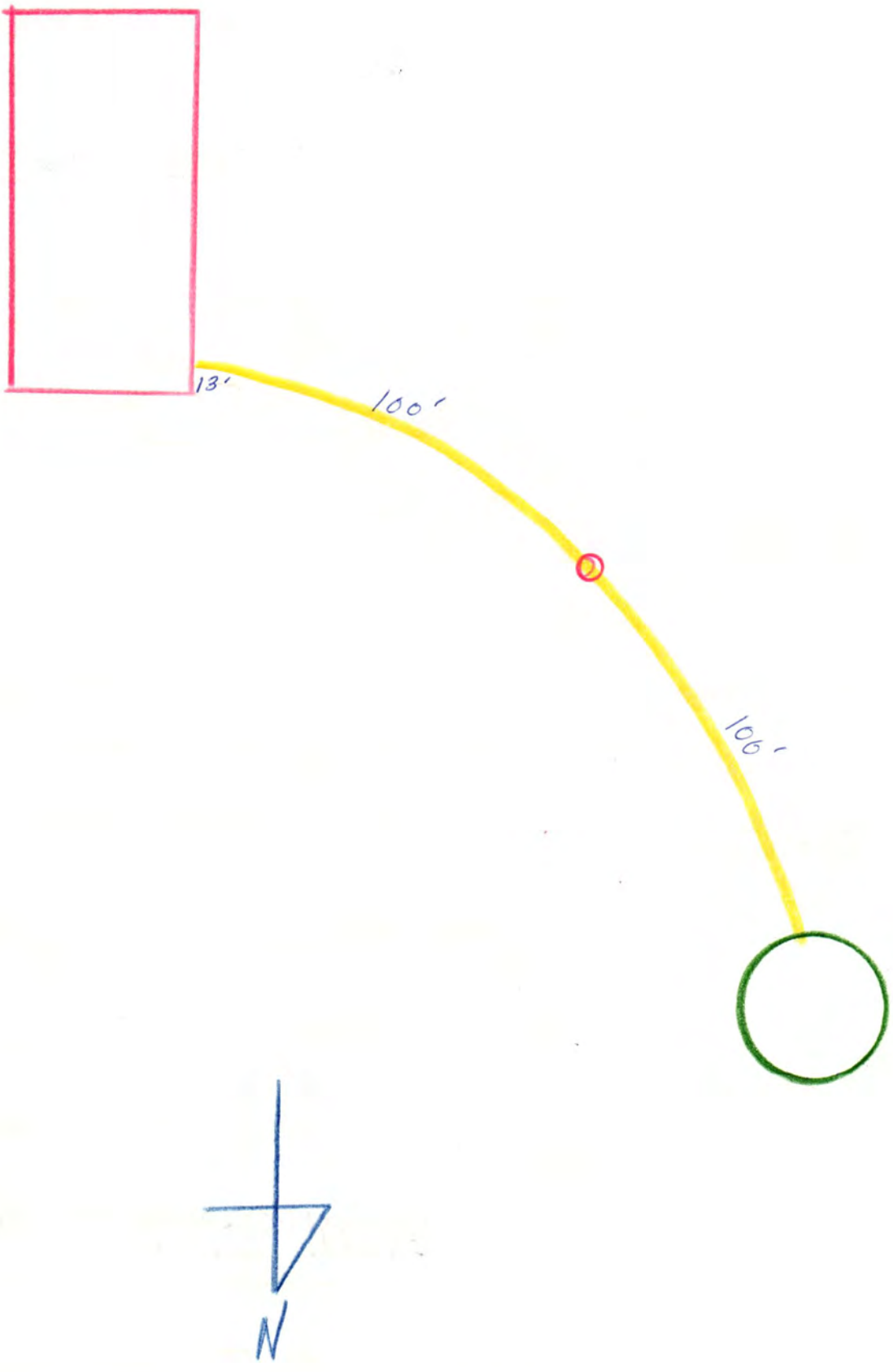
Comments: WELL HAS HOLE IN SCREEN ON AIR VENT. NEED MISSING BOLT REPLACED IN WELL CAP. NO PLACE FOUND TO TAKE WATER SAMPLE FROM. FENCE AROUND LAGOON NEEDS TO BE REPLACED. IS IN POOR REPAIR. MIXTURE OF FENCE TYPES. SOME PLACES SHORTER THAN 4 FEET. 11/25/96 all corrected. J.C.H. See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☒ **SEWAGE DISPOSAL SYSTEM** Approved: ☒ Provisional Approval: ☐

Approved by Gerald C. Wood R.E.H.S. Date 12/2/96

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.


13'
100'
106'
N