LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1033-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — October 19, 1977
TYPE OF PERMIT — THIS PERMIT EXPIRES

Craig R. Larmon — Route 1, Denton, NE 68339
ISSUED TO — ADDRESS

T9N, R5E, Section 8, Lot 28 I.T.
LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE (Alter)

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 15.00	$	$	$ 15.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

Health
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

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. 1033-C

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

DATE: 4/18/77

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. 9N ; Range 5E ; Section 8 ;
Block ____ ; Lot 28 I.T. ; Addition ____
Street Address ____

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

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

4. Description of proposed alteration, extension or repair: Install septic system to replace existing lagoon system

5. Work to be done by: Owner ☐ ; or Contractor ☒ , Nick Roos
Contractor's Name
Milford Nebr.

6. Estimated cost of project:

a. Materials }	$ 960
b. Labor }	$
c. Other	$
TOTAL	$ 960

Craig R. Lawson
Signature of Applicant (owner or lessee)

Rt 1, Denton Nebraska 68339
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: 4/19/77
Filing Fee: $ 15.00

2. Site Visits:
Date: ____ by: ____
Date: ____ by: ____
Date: ____ by: ____

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

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

Lincoln-Lancaster County Health Department

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

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment 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.

Legal Description of Property: Street Address 11501 W. Pioneers Blvd. Denton Ne. 68339
Twp 9N Range 5E Section 8 1/4 NE 1/4 Block ___ Lot 28 Addition ___
Directions to Property 7 miles West of Lincoln

Location of Well East of House Tap Location: Inside ☐ Outside ☒
Location of Sewage System S.W. of Corner of house Year Installed 1973

	NAME	ADDRESS	PHONE
Present Owner:	Julie Halloran	11501 W. Pioneers Blvd. Denton Ne 68339	402-795-2231
Tenant/Buyer:	Joyce Palmer	1401 SW 24th St Lincoln Ne 68522	402-438-2779 795-2328
Return to:	Joyce Palmer	1401 SW 24th St Lincoln Ne 68522	402-438-2779

Signature of Applicant Joyce Palmer Address 1401 SW 24th Lincoln Ne 68522 Date 10/16/98

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 10/19/98
Initials JS
Amount $150.00
Check No. 1498

DATA ENTRY
Date ___/___/___
Case No. ___
Initials ___

12/14/98 by J.C.H.
12/9/98 by J.C.H.
11/23/98 by J.C.H.

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 10/19/98

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☐ 0 /ml	☐ ___ /ml
Nitrate	☒ 9.2 ppm	☐ ___ ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☒
Disapproved ☐

Additional Site Visits
Date 11/9/98 by J.C.H.
Date 11/10/98 by J.C.H.
Date 11/17/98 by J.C.H.

Comments: SEPTIC SYSTEM PREDATES REGULATION AND INSPECTION HENCE APPROVAL IS PROVISIONAL. SEPTIC TANK SHOULD BE CHECKED TO SEE IF IT IS IN NEED OF PUMPING. See Attached Letter ☐

FINAL STATUS

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

Approved by ___ Date ___/___/___

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.

P5612-4

White - Applicant after approval Yellow - Environmental Health

Revised/Reprint: 10-95

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P5612-5

P5252-9

11/17/98 P-5149-10 11/10/98 F 10/9/98