LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / LOA

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

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 7-24-91

☒ Evaluation of the Sewage Disposal System Lagoon ☒ Enclosed is $150.00

Legal Description of Property: TWP. 9N; RANGE 5E; SECTION 15; BLOCK ___

LOT ___; ADDITION _____; Street Address 6600 SW 91st, Denton, NE

Directions to Property ½ mi. No. of Denton NE, ~~the~~ East Side of Road - Blue Color (E) House

Location of Well 25ft behind House Tap Location: Inside ☐ Outside ☒

Location of Sewage System Lagoon E of House Year Installed 1985

	NAME	ADDRESS	PHONE
Present Owner:	Ruthann Foster	Same as above	
~~Tenant~~/Buyer:	Marvin D. Russell	941 O" St Suite 500 Lincoln, NE 68508	471-4832
Return to:	Century 21 Home & Farm Realty, 2200 So. 40th Suite 103 Lincoln 68506		

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Marvin D Russell Address 941 O" St Suite 500 Lincoln, NE 68508

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HEALTH DEPARTMENT USE ONLY

Date Received JULY 26, 1991 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 7/29/91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☐	Date 7/29/91	by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 7/30/91	by J.C.H.
Nitrate	☒	☐	Disapproved:	☒	Date 7/31/91	by J.C.H.

Comments: WATER NOT TURNED ON, HOSE BIB DISASSEMBLED. LAGOON NEEDS WEEDS CUT ESPECIALLY NEAR WATER LEVEL. NEED WARNING SIGNS. NEED AS BUILT DRAWING. See Attached Letter ☐
7/30/91 Water turned on. J.C.H. 7/31/91 Lawn gel all ok. J.C.H

FINAL STATUS

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

APPROVED BY Jerrold E. Hood R.S. DATE AUGUST 2, 1991

Approval or disapproval is based on written 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 operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

CALL RESULTS 471-8029

BIOLOGICAL EXAMINATION OF DRINKING WATER

SAMPLE TO BE COLLECTED AND MAILED ON:

MO. ____ (2-3) WK. ____ (4) DAY ____ (5) SAMP/DAY ____ (6-7)

ACCOUNT NO. ____ (16-22) ADD TESTS 2 (23) 1. FL 2. N 3. BOTH 4. TPC

DATE COLL 7/30/91 (9-16) 11:00A.M. BY J.C. Wood (17-28)
MO./DAY/YR./HOUR

ADDRESS OR LOCATION SEC. 15, T9N, R5E (29-41)

NAME AND ADDRESS OF OWNER
RUTHANN FOSLER
LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA
68502

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FOR LABORATORY USE ONLY

SPECIAL REQUEST: ____ (42)
0. NONE 1. CHECK 2. REPLACEMENT

SAMPLE CONDITION: ____ (43)
1. GOOD 2. DAMAGED 3. INSUFFICIENT 4. OLD 5. RETURNED UNUSED

LABORATORY NO. 16665 (44-47)

DATE EXAMINED ____ (48-53)

COLIFORM 0 (54-56) /100 mL.

FLUORIDE ____ (57-60) mg/LITER

NITRATE ____ (61-64) mg/LITER

TPC ____ (65-68) /100 mL.

LAB. PROCEDURE MF (69-75)

ANALIZED BY CC (76-79)

IN

OUT

WATER CHEMISTRY

STATE LAB NO. 15 4/97

COMPLETE INFORMATION BELOW

REPORTED

DATE COLLECTED 7 (MO) 30 (DAY) 91 (YEAR) 11:00 A.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOP

SAMPLE LOCATION RUTHANN FOSLER

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NW SECT 15 TWNSHP 9 N RANGE 5 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

RECEIVED

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

CALL 471-8029 RESULTS

FOR LABORATORY USE ONLY

TEST METHOD: USEPA METHOD 353.2

NITRATE ANALYSIS FOR DRINKING WATER

NITRATE — N less than 0.1 mg/l

NOT TESTED BECAUSE OF:
☐ DAMAGE
☐ INSUFFICIENT AMOUNT
☐ IMPROPER CONTAINER

TEST(S) BY ET

FOR ACCOUNTING USE ONLY

LWN 88