* Call Gwen Williams - Home Realty - 467-2917 when you go to inspect & she will meet you there.

111 PIAZZA TERRACE

MAY 29 1997

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 1445 West Burnham, Lincoln, NE

Twp 9 Range 6 Section 4 1/4 SE 1/4 SE Block ___ Lot 19 Addition Stockwell's Subdivision in SE¼ SE¼

Directions to Property Approximately ¾ mile west of water tower & Yankee Hill School. Yellow house on South side with barn across from stone County Bldg.

Location of Well East side of house (50 ft. down) Tap Location: Inside ☒ Outside ☒

Location of Sewage System West of house (double tank - laterals run toward road - has ½ moon laterals) Year Installed 70's (Not sure)

	NAME	ADDRESS	PHONE
Present Owner:	Campsheide Family Trust	P.O. Box 261 - Milford, NE 68405	402-761-3462
* Tenant/Buyer:			
Return to:	Deanna Portz	P.O. Box 261 Milford, NE 68405	761-3462

Signature of Applicant Deanna Portz Trustee Campsheide Family Trust Address P.O. Box 261 - Milford NE 68405 Date 05/28/97

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 5/30/97
Initials LS
Amount #150.00
Check No. 1105

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

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 6/2/97

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☒
Bacteria	☐ ____/ml	☐ ____/ml
Nitrate	☒ 4.5 ppm	☐ ____ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☐
Disapproved ☐

Additional Site Visits
Date 6/9/97 by J.C.H.
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: WELL HAS BROKEN CONDUIT PLATE AND HOLE IN SCREEN OF AIR VENT. SEPTIC SYSTEM APPEARS TOO CLOSE TO WELL. SEPTIC SYSTEM APPARENTLY PREDATES REGULATIONS + INSPECTIONS. NO EVIDENCE OF MALFUNCTION. 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.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 10-95