LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health

220 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE SYSTEM REPAIR

No. 90390015301

Issued 06/19/90
Expires 12/19/90

ESTABLISHMENT

TED BLUME
T9N R6E SEC 4
STOCKWELL BLK 14 LOT 20
1221 W BURNHAM

FEES: Permit 018751 $50.00

Total $50.00

Issued By COUNTY HEALTH

PERMITTEE

TED BLUME
2401 S 35 STREET
LINCOLN NE 68506

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
PAID	

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

RECEIVED JUN 2 5 1990

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [X]
County Resolution No. 2832 [ ]

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

OLD HOUSE

FILE NO._____

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

DATE: 6-14-90

The undersigned hereby applies for a permit to ALTER [ ], EXTEND [ ], or REPAIR [X] 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 6E ; Section SEC 4 ;
Block 14 ; Lot 20 ; Addition Stockwell, LLCN
Street Address 1221 W. Burnham, Lincoln 68522

2. Property Use: Residential [X]; No. Bedrooms 2
Commercial [ ] Describe _____
Other Use [ ] Describe _____

3. Type of existing Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Description of proposed alteration, extension or repair: Replace septic tank (1000 gal)

5. Work to be done by: Owner [ ] ; or Contractor [X], General Excavating
Contractor's Name

6. Estimated cost of project:

a. Materials	$	>400
b. Labor	$	
c. Other	$	
TOTAL	$	

Signature of Applicant (owner or lessee)

2401 So. 35th, Lincoln, NE 68506
Address

(Do not write below this line)

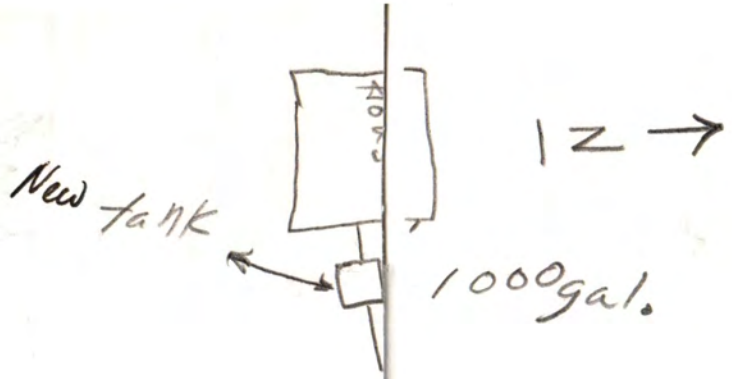
REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 50.00

2. Site Visits:
Date: 6-14-90 by: mm * tank outlet 45 ft of House
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ]
by: Jerrold C. Hood PROVISIONAL *

4. INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 7-2-90 by: Ron Maynard


New tank
1000 gal.