CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 1080

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — December 14, 1977

TYPE OF LICENSE OR PERMIT — THIS LICENSE OR PERMIT EXPIRES

B & R Pump Service — 4337 Madison, Lincoln, NE 68504

LICENSEE OR PERMITTEE — ADDRESS

T9N, R6E, Section 4, Lot 1, Stockwell Addition

NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NON-TRANSFERABLE (Extend)

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT

HEALTH APPLICATION

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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

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._____

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

DATE: 6-13-77

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 6E ; Section 4 ;
Block ; Lot 1 ; Addition STOCK WELL ADDITION
Street Address SW 16 street

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

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

4. Description of proposed alteration, extension or repair: Extended drain field with 100' of 4" perforated sewer & drain pipe with gravel above and below.

5. Work to be done by: Owner ☐ ; or Contractor ☒ , B&R PUMP SERVICE
Contractor's Name

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	Greater than $500.00

B&R Pump Service - Rosemary Overman
Signature of Applicant (owner or lessee)

4337 Madison, Nebraska 68504
Address

(Do not write below this line)

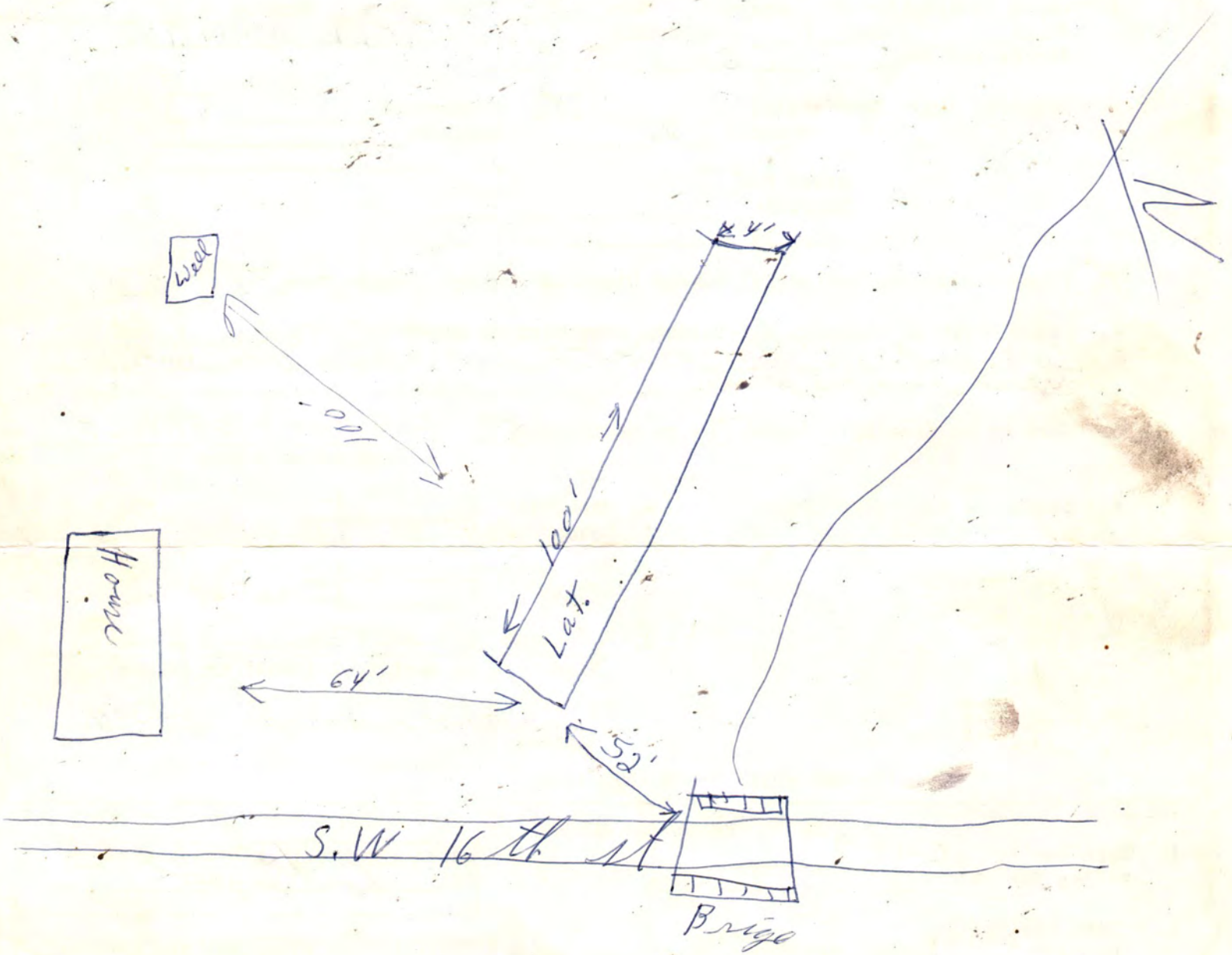
REVIEWING ACTION

1. Date Rec'd: 6-13-77
Filing Fee: $

2. Site Visits:
Date: 6-13-77 by: RM
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐
by: Ron Magnuson

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-13-77 by: Ron Magnuson


Well
100'
House
100'
Lat.
64'
52'
S.W 16th St
Bridge
N