Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit
SEWAGE SYSTEM REPAIR
SEWER REPAIR-EXTEND LATERAL

Permit # 02390072001

Issued 04/30/02
Expires 10/03/02
Revenue Code 3157

Establishment
TAMI GARMAN
T9N R6E SEC 10
1101 W PIONEERS BLVD

FEES: $100.00

Permittee
TAMI GARMAN
1101 W PIONEERS BLVD
LINCOLN NE 68523

TOTAL: $100.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002211

0739007 20

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☒ Municipal Code 24.38 ☐ County Resolution Number 2832

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☒ **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:**
   Township 9N Range 6E Section 10 1/4 Section _____
   Block _____ Lot _____ Addition _____
   Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address 1101 West Pioneers Blvd Lincoln, Ne 68522

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe _____

3. **Type of Present Individual Disposal System** ☒ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** extend Lateral system by adding 200' of Infiltrator lateral South of present Field

5. **Work to be done by:** ☐ owner ☒ contractor's name Southwick Sewer & Drain Bret Southwick

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Tami Garman Address 1101 W. Pioneers Blvd. Phone 420-0573
Applicant Signature (owner or lessee) _____

Please include the permit fee ($100) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 4/30/02 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date ____/____/____ By _____
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date ____/____/____ By _____

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 04/30/02 Amount 100.00 Check No. 4661 Initials JO

White - Division Copy Pink - Business Office Revised 9/00

Analysis by Southwick

CONCLUSIONS/OPINIONS

1. Overall condition of the system:
   - [X] Acceptable
   - [ ] Unacceptable

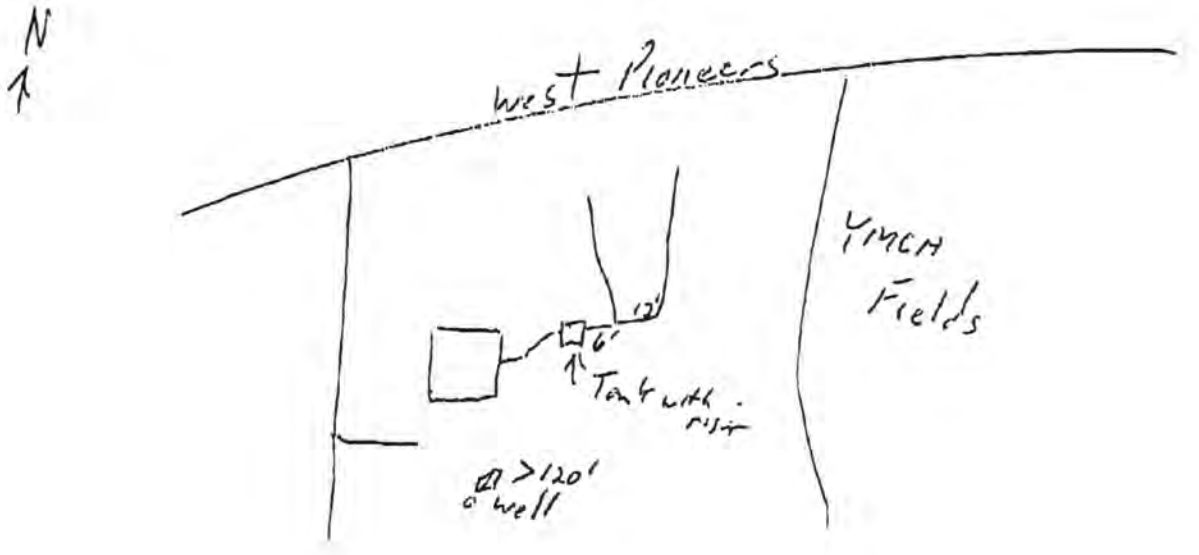
   Reasons why unacceptable:

2. Type and size of tank
   - [X] Concrete [ ] Steel
   - [ ] Other

   Capacity: 1,000 gallons

   Is it adequately sized for the house? [X] Yes. [ ] No.
3. Condition of the tank, lid and baffles/tees:
   - [X] Acceptable
   - [ ] Unacceptable

   Reasons why unacceptable:
4. Explain necessary repairs with estimated costs to correct:



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-780

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / LO

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

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

[X] Evaluation of the Individual Water System Date: 8-16-89

[X] Evaluation of the Sewage Disposal System [X] Enclosed is $75.00

Legal Description of Property: TWP. 9N ; RANGE 6E ; SECTION 10 ; BLOCK ____

LOT 20 ; ADDITION Yankee Hill ; Street Address 1101 W Pioneers Blvd, Lincoln, Neb

Directions to Property Pioneers Blvd west of new YMCA construction

Location of Well SOUTHWEST OF HOUSE 50ft. Tap Location: Inside [X] Outside [X]

Location of Sewage System EAST OF HOUSE 40ft. & SOUTH 200ft Year Installed 1962-1974

	NAME	ADDRESS	PHONE
Present Owner:	Bob & Jullie BULLER	4421 Ash Hollow Ct	423-5182
Tenant/Buyer:	Ed & Janet SALVATI	3900 S 20 St, Lincoln, Nb68502	423-6298
Return to:	HOME REAL ESTATE ATTN: GENE CURTIS	225 N Cotner Blvd Lincoln Nb 68505	467-4663

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

Signature of Applicant [signature] Address 3900 S 20 St. Lincoln, Nb68502

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HEALTH DEPARTMENT USE ONLY

Date Received AUGUST 17, 1989 Received $75.00 Check [X] Cash [ ]

PRELIMINARY STATUS--DATE 8/21/89

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	[X]	[ ]	Approved:	[ ]	Date 8/21/89	by J.C.H.
Bacteria	[X]	[ ]	Provisional:	[ ]	Date 8/25/89	by J.C.H.
Nitrate	[X]	[ ]	Disapproved:	[X]	Date ____	by ____

Comments: APPEARS TO BE OPEN END TO SEPTIC LATERAL. ANY OLD UNUSED WELL MUST BE PROPERLY ABANDONED BY CITY CODE. THERE IS ONE ON THIS PROPERTY. Original 8/25/89 Approval is PROVISIONAL DUE TO SYSTEM PREDATING REGULATIONS. See Attached Letter [ ]

FINAL STATUS

WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM:	
Approved: [X]	Approved: [ ]	Provisional Approval: [X]

APPROVED BY Donald C. Wood M.D. DATE AUGUST 28, 1989

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

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 $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 1101 W Pioneers Blvd

Parcel ID ____-____-____-____-____ (i.e. 99-99-999-999-999)

Twp 9N Range 6E Section 10 1/4 ___ 1/4 ___ Block ___ Lot 20 Addition YANKEE HILL

Directions to Property West of West by-pass 1/4 mile - entry has small pipe arches at end of culvert ☐ Located on curve - property marks to south side.

Location of Well South of house between two garages Tap Location: Inside ☐ Outside ☐

Location of Sewage System ___ Year Installed N/A

Site Hazards (dogs, etc.) None

	NAME	ADDRESS	PHONE
Present Owner:	Fanny Mae Repo		
Tenant/Buyer:			
Return to:	Betty Simms/Carl Brown	9141 A St Woods Bros Real Estate 440-0988	434-3800 434-3801 (Fax)

Signature of Applicant Carl D Brown Address 9141 A St Date 11/12/01

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 11/16/01 Amount 200.00 Check No. 603943 Initials LS MAIL

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

PRELIMINARY STATUS--By Doug Smith **DATE:** 11/20/01

WATER SYSTEM:	Approved	Disapproved
Construction	☑	☐
Bacteria	☑ 0 /ml	☐ ____ /ml
Nitrate	☑ 0.8 ppm	☐ ____ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☑
Disapproved	☐

Additional Site Visits

Date ____/____/____ by ____

Date ____/____/____ by ____

Date ____/____/____ by ____

Comments: Water sample results approved 1/17/02. As per conversation with Carl Brown - escrow has been established for Septic System repairs. Escrow with Woods Brothers - Brad Southwick to perform repairs. Approval based on these actions ☑ See Attached Letter

FINAL STATUS

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

Approved by Doug Smith Date 01/17/02

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: 9-00