FILE NO. 1864

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

October 13, 1982
THIS LICENSE OR PERMIT EXPIRES

CLYDE SOUTHWICK - BIG CLYDE SANITATION BOX 483 WALTON, NE 68461
LICENSEE OR PERMITTEE — ADDRESS

T9N, R6E, SECTION 16SE¼, BLOCK 1, LOT 8, ADDTION:GATEWAY WESTERN ESTATES
NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NONTRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
018754	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
60303	10-13-82	30.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

HEALTH APPLICATION

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. 1964

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

DATE: 11-24-81

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 10E ; Section 16 SE¼ ;
Block 1 ; Lot 8 ; Addition GATEWAY WESTERN ESTATES
Street Address SW 12 and Denton Rd. RFD #1 Marlin E Rauscher

2. Property Use: Residential ☒; No. Bedrooms 3
Commercial ☐ Describe
Other Use ☐ Describe

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

4. Description of proposed alteration, extension or repair: abond old lateral
Reset Distribution Box and Run 250 ft new lateral
in 3 lines. Over 60 Tons Rock Gravel 4 in Perforated Pipe

5. Work to be done by: Owner ☐ ; or Contractor ☒ , Big Clyde Sanitation Service
Contractor's Name

6. Estimated cost of project:
a. Materials $
b. Labor $ Over 400.00
c. Other $
TOTAL $

Clyde P Southwick Big Clyde Sanitation
Signature of Applicant (owner or lessee)

Box 483 Walton, Nebr.
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd:
Filing Fee: $ 30.00

2. Site Visits:
Date: 11-24-81 by: JMM
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: by:

repair system 35' short of lateral needed to comply with orginal percolation test.

