LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

2200 St Marys Avenue Phone (402) 471-7800

REAL ESTATE TRANSFER / LOAN

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

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

☒ Evaluation of the Individual Water System Date: 7-6-90

☒ Evaluation of the Sewage Disposal System ☐ Enclosed is $150.00

Legal Description of Property: TWP. 9N; RANGE 6E; SECTION 18; BLOCK ____

LOT ____; ADDITION _____; Street Address _____

Directions to Property 5801 SW 56th

Location of Well in front circle Tap Location: Inside ☐ Outside ☐

Location of Sewage System Lagoon NE of house Year Installed ____

	NAME	ADDRESS	PHONE
Present Owner:	Jerrald L. / Sally S. Critel	RR1 Box 52A	797-3775
Tenant/Buyer:	Refinancing		
Return to:			

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

Signature of Applicant Sally S. Critel Address RR1 Box 52A 5801 S.W. 56 St Denton, NE 68339

==========

HEALTH DEPARTMENT USE ONLY

Date Received 7-6-90 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 7-6-90

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☒	Date 7-6-90	by MM
Bacteria	☐	☐	Provisional:	☐	Date 7-9-90	by MM
Nitrate	☐	☐	Disapproved:	☒	Date _____	by ____

Corrected

Comments: Trees on east dike need to be removed. Tall vegetation at water's edge & interior dike need to be removed & mowed. Correction completed See Attached Letter ☐

FINAL STATUS

	WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM:	
	Approved: ☒	Approved: ☒	Provisional Approval: ☐

APPROVED BY Ron Magnuson DATE July-10-90

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

FILE NO. 1063-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF PERMIT

November 25, 1977
THIS PERMIT EXPIRES

Mrs. Bob Gilliam, RFD, Pleasant Dale, NE 68423
ISSUED TO — ADDRESS

T9N, R6E, Sectinn 18, Lot 4 I.T., Irregular Tract
LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

FORM HD-40(73) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1063-C

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

DATE: May 25, 1977

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9N ; Range 6E ; Section 18
   Block ____; Lot 4 IT ; Addition ____
   Street Address Lot 4 Irreg. Tract

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

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

4. Distance to public sewer: ____ ft.

Mrs. Bob Gilliam
Signature of Applicant (Owner or Lessee)

RFD Pleasant Dale, Nebr.
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/25/77 . Date Frwd. 5/25/77 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd. ____ . Date Frwd. ____ . ACTION: Approved ☐ Disapproved ☐ Signature: ____
3. City or County Engineer : Date Rec'd. 5/25/77 . Date Frwd. 5/25/77 . ACTION: Approved ☒ Disapproved ☐ Signature: Henry Graff
   Read 5/25/77 TMC

REMARKS OR REASONS FOR DISAPPROVAL ____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1063-C

DATE: May 25, 1977

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 9 N ; Range 6 E ; Section 18 ; Block ; Lot 4 I I ; Addition .
Street Address .

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

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

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Mrs. Bob Gilliam
Signature of Applicant (owner or lessee)

RFD Pleasant Dale, Nebr.
Address

(Do not write below double line)

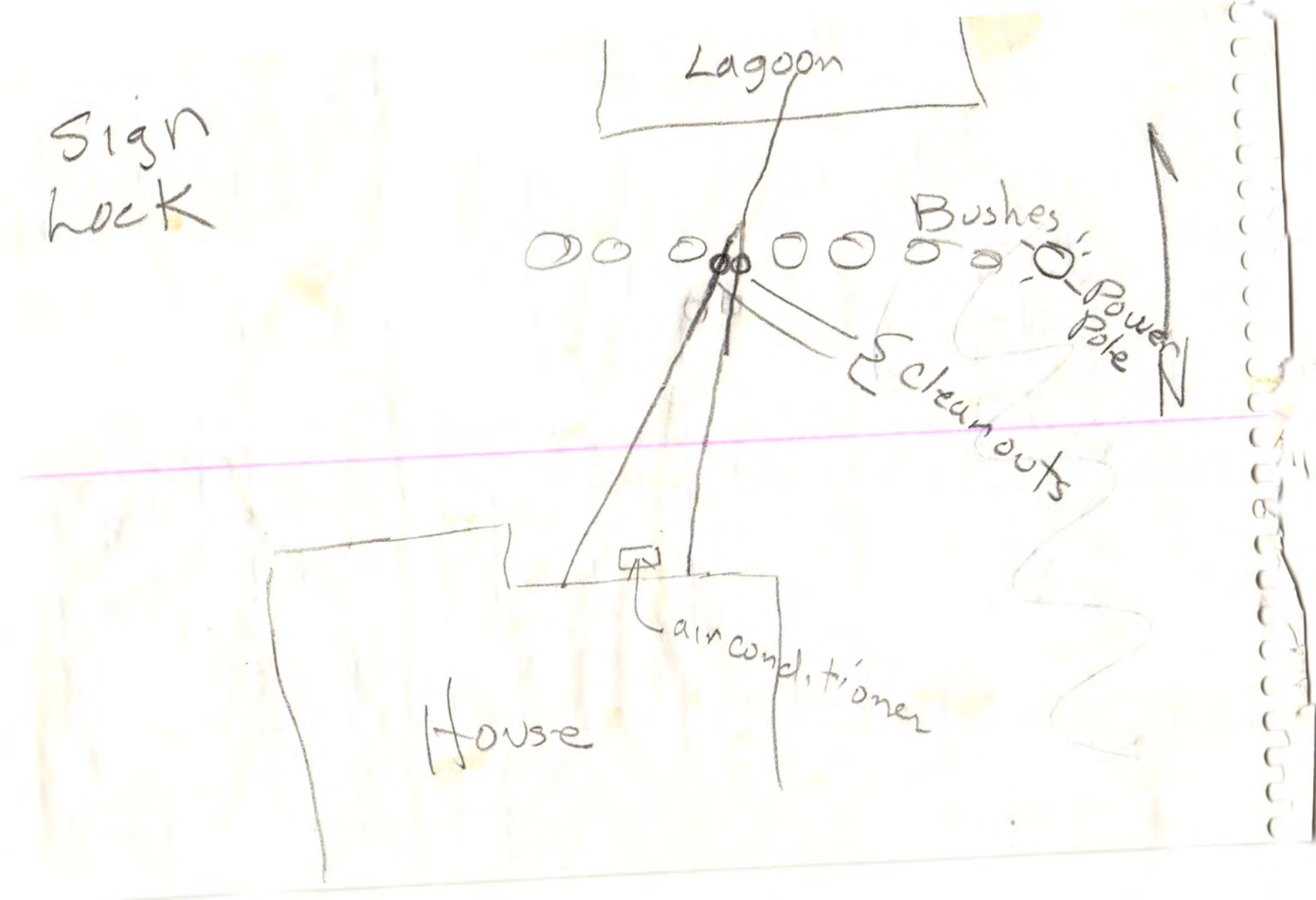
REVIEWING ACTION

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

2. Site Visits:
Date: 9-29-77 by: sm
Date: by:
Date: by:

3. Date: 5/25/77 Approved ☒ ; Disapproved ☐
by: Gerald C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-29-77 by: Ronald Magnuson


Sign
Lock
Lagoon
Bushes
Power Pole
Cleanouts
Air conditioner
House