LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 93380104001

Issued 08/10/93
Expires 02/10/94
Revenue Code 18754

Establishment
KEVIN GRAVES
T9N R6E SEC 19
YANKEE HILL LAKE EST BLK 2 LOT 11
7401 SW HUNTERS PLACE

FEES: $150.00

TOTAL $150.00

Permittee
KEVIN GRAVES
2400 W WASHINGTON ST
LINCOLN NE 68522

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 471-7800

A

FILING FEE: $_____

FILE NO._____

DATE: 8-4-93

The undersigned hereby requests SITE CLEARANCE and PERMIT 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 19 ;
Block 2 : Lot 11 : Addition YANKEE HILL LAKE ESTATES 1ST ADD.
Street Address 7401 SW HUNTERS PLACE

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
No. of Bedrooms 4 . Describe_____

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

4. Distance to public sewer: _____ft. WILL INSTALL WHATEVER SOIL PERCOLATION TEST INDICATES

Kevin D. Hoover
Signature of Applicant (Owner or Lessee)

2400 W. WASHINGTON LINC. 68522
Address
476-2028

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/4/93. Date Frwd. 8/4/93. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 8/5/93. Date Frwd. 8/5/93. ACTION: Approved ☒ Disapproved ☐ Signature: Gary Spin

3. City or County Engineer: Date Rec'd. 8-6-93. Date Frwd. 8-6-93. ACTION: Approved ☒ Disapproved ☐ Signature: Larry K. Worrell

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 6/13/94 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

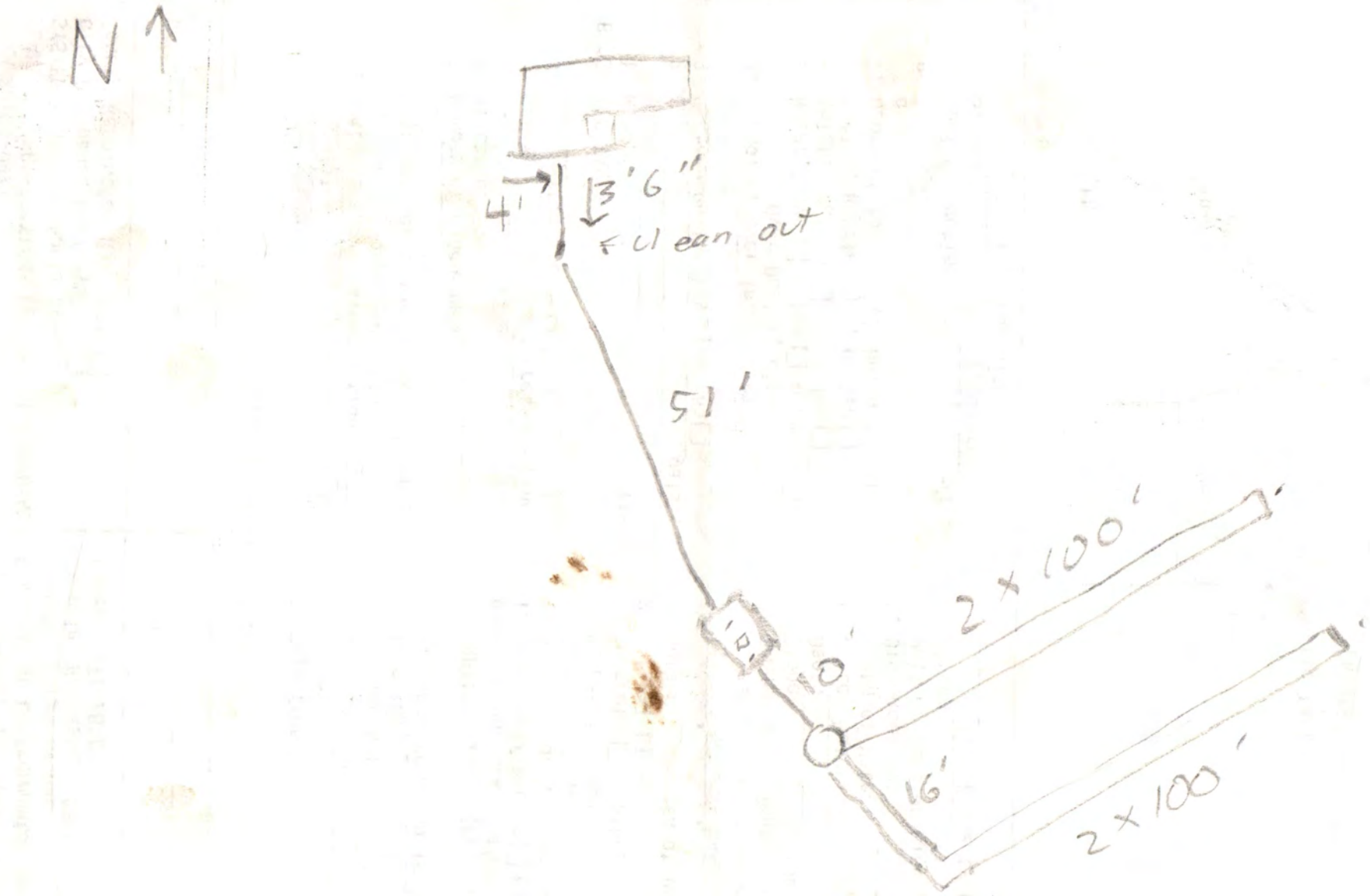
White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL *
Date: 6/13/94 By: Jerrold C. Hood

* PROVISIONAL APPROVAL
EXPERIMENTAL SYSTEM.

FORM 23-43

7401



GO FIRST WEEK IN MARCH, WATER NOT ON.

005

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 $150.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 7401 SW Hunters Place

Twp 9N Range 6E Section 19 1/4 ___ 1/4 ___ Block 2 Lot 11 Addition Yankee Hill Estates

Directions to Property TAKE WEST OPENTON ROAD West to Apx SW 46 And You'll see An entrance + Sign "Yankee Hill Estates" go south to T go Right and you can't miss it.

Location of Well OFF REAR DECK-You can see Tap Location: Inside ☐ Outside ☒

Location of Sewage System SW of Home Year Installed 3-Years old

	NAME	ADDRESS	PHONE
Present Owner:	Kevin D. Graves	- out of state -	
Tenant/Buyer:	Suzette + Matt Person	4332 Faulkner Crt. Lincoln, NE 68506	423-0509
Return to:	Pete Beau/Home Real Estate	3910 South St. Lincoln, NE 68506	436-3157

Signature of Applicant Pete Beau Address 3910 South St. Lincoln, NE 68506 Date 2/25/97

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 2/26/97
Initials JS
Amount $150.00 ✓
Check No. 1583 ✓

DATA ENTRY

Date ___/___/___
Case No. ___
Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 3/4/97

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ <0.1 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☒
Disapproved	☐

Additional Site Visits

Date___/___/___by___
Date___/___/___by___
Date___/___/___by___

Comments: SINCE THE SEWAGE SYSTEM IS OF AN EXPERIMENTAL VARIETY APPROVAL IS PROVISIONAL. NO EVIDENCE OF MALFUNCTION.

See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 3/7/97

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: 10-95