CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 1307

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

November 3, 1978
THIS LICENSE OR PERMIT EXPIRES

Douglas Tabor 4700 Maddarin Circle, Lincoln, NE 68516
LICENSEE OR PERMITTEE ADDRESS

T9N R7E Section 10, Block 2, Lot 6, Addition Mar-Ma-Dale Heights
NAME OF ESTABLISHMENT, IF ANY ADDRESS

REMARKS: NON-TRANSFERABLE

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
110.15	110.16	148.14	6-2

624-1535

SERIAL NO.	DATE	AMOUNT

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

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

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: 474-1541

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FILING FEE: $ 30.00

FILE NO. 1307

DATE: _____

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. 9 North; Range 7 East 6th PM; Section 10;
   Block 2: Lot 6: Addition MAR-MA-RA-LO HEIGHTS
   Street Address 4601 Pagoda Lane

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

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

4. Distance to public sewer: 1500 ft. MODIFIED Gopher Mound

Douglas H Tobo
Signature of Applicant (Owner or Lessee)

4700 MANDARIN CIRCLE
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/3/78. Date Frwd. 5/3/78. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Ernest A Lemmon

3. City ~~or County~~ Engineer: Date Rec'd. 5-3-78. Date Frwd. 5-3-78. ACTION: Approved ☒ Disapproved ☐ Signature: Al Imig

REMARKS OR REASONS FOR DISAPPROVAL ~~Also~~ E Experimental system only Conditional approval until sewer (community) is installed

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

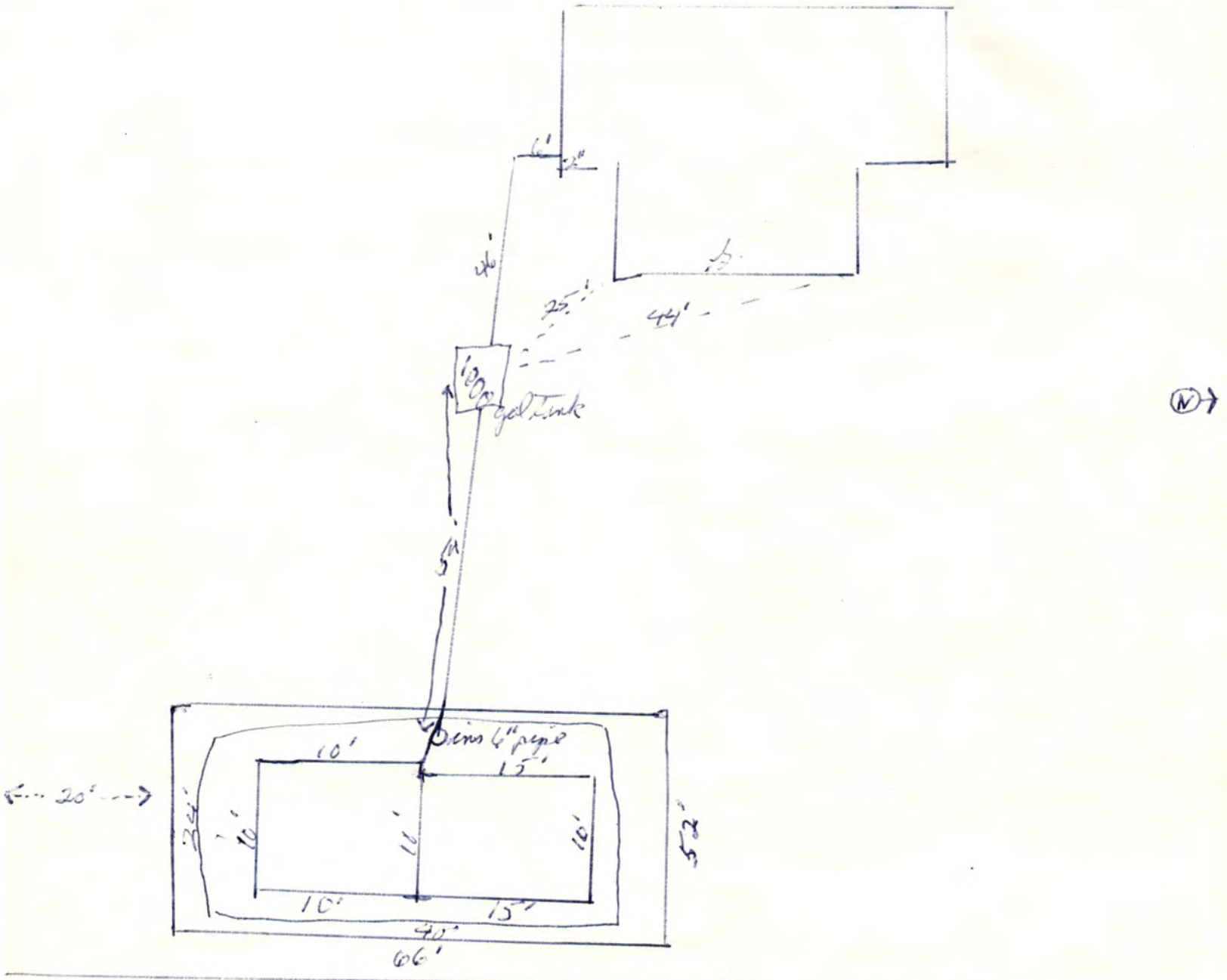
CONDITIONAL, SEE ABOVE

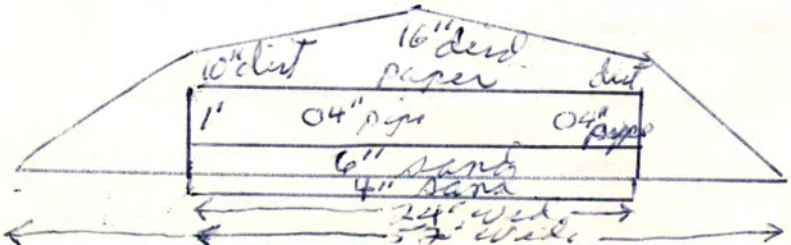
INSTALLATION FINAL WRITTEN APPROVAL
Date: 11/6/80 By: Jerrold E. Hood

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

AS BUILT DRAWING OF SYSTEM

DATE 10-3-78 INSTALLER Smith Sun Co.





LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

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: 7-3-89

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $75.00

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 10; BLOCK 2

LOT 6; ADDITION Northwinds Heights; Street Address 4601 Pagoda Lane Lincoln 68516

Directions to Property 1 blk west of 84th & Pioneer then south

Location of Well ~~South~~ East of home Tap Location: Inside ☐ Outside ☒ West Garden Area

Location of Sewage System So. West of home Year Installed 1978 or 79

	NAME	ADDRESS	PHONE
Present Owner:	Catherine & Andrew L. Sullivan	4601 Pagoda Lane	488-2437
Tenant/Buyer:	Alek Swiatek	415 Eastridge Dr.	488-2872
Return to:	Jan Gaber	Woods Bros Realty 1100 So70	483-4741

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

Signature of Applicant Catherine D. Sullivan Address 4601 Pagoda Lane

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HEALTH DEPARTMENT USE ONLY

Date Received JULY 3, 1989 Received $75.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE JULY 5, 1989

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date 7/5/89 by LCH
Bacteria	☒	☐	Provisional:	☒	Date _____ by ____
Nitrate	☒	☐	Disapproved:	☐	Date _____ by ____

Comments: SEWAGE SYSTEM IS OF THE TYPE CONSIDERED EXPERIMENTAL HENCE APPROVAL IS PROVISIONAL. NO EVIDENCE OF MALFUNCTION. SYSTEM IS A LITTLE BETTER THAN 9 YEARS OLD. IF TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Gerald E. Hoos, R.S. DATE JULY 10, 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

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LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

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: 1-6-92

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

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 10; BLOCK 2

LOT 6; ADDITION MAR-MA-RA-LO HEIGHTS; Street Address 4601 PAWNEE LANE

Directions to Property SOUTH OF 84TH & PIONEERS STREET AT INTERSECTION OF PAWNEE LANE & MARILYN CIR.

Location of Well SEE ATTACHMENT Tap Location: Inside ☐ Outside ☒

Location of Sewage System SEE ATTACHMENT Year Installed 1980

	NAME	ADDRESS	PHONE
Present Owner:	ALEXANDER SWIATEK	4601 PAWNEE LANE	466-7872
Tenant/Buyer:			
Return to:	ALEXANDER SWIATEK	4601 PAWNEE LANE LINCOLN NE 68516	466-7872

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

Signature of Applicant Alexander Swiatek Address 4601 PAWNEE LANE

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HEALTH DEPARTMENT USE ONLY

Date Received JANUARY 7, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE JANUARY 9, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM: NOT REQUESTED	SITE VISIT:
Construction	☒	☐	Approved: ☐	Date 1/9/92 by L.C.H.
Bacteria	☒	☐	Provisional: ☐	Date _____ by ____
Nitrate 0.5ppm	☒	☐	Disapproved: ☐	Date _____ by ____

Comments: _____

_____

_____ See Attached Letter ☐

FINAL STATUS

WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM: NOT REQUESTED
Approved: ☐	Approved: ☐ Provisional Approval: ☐

APPROVED BY Gerald C. Hood R.E.H.S. DATE JANUARY 13, 1992

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

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Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

This form must be completed and returned 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.

☐ Evaluation of the Individual Water System ☐ Evaluation of the Sewage Disposal System

NE, SELTH IC T W [illegible] N, RANGE 7 E, THE [illegible] LOT 6

Legal Description of Property: Street Address 4601 PAGODA

Twp 9N Range 7E Section 10 1/4 ___ 1/4 ___ Block 9 Lot 6 Addition MAR-NA-BA-I

Directions to Property PAGODA IS ONE BLOCK WEST OF 84TH ST AT PIONEER BLVD

4601 IS AT END OF PAGODA LANE AT MANDRIN CIRCLE

Location of Well NORTH OF HOUSE Tap Location: Inside ☐ Outside ☒

Location of Sewage System SOUTH OF PAVED PAD Year Installed 1982

	NAME	ADDRESS	PHONE
Present Owner:	ALEX SWIATEK	4601 PAGODA LANE LINCOLN NE 68516	466-7872 (H) 475-3671 (W)
Tenant/Buyer:			
Return to:			

Signature of Applicant [signature] Address 4601 PAGODA LANE Date 9/9/93

LINCOLN NE 68516

HEALTH DEPARTMENT USE ONLY

Date Received 9/13/93 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 9/13/93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☐	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☒	Date ___/___/___ by ___
Nitrate	☒ 0.7 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: SEWAGE SYSTEM IS AN EXPERIMENTAL MOUND SYSTEM HENCE 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 9/16/93

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.

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