LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

P E R M I T

Permit
SEWAGE INSTALLATION

No. 93380105301

Issued 08/23/93
Expires 02/23/94
Revenue Code 18754

Establishment
TERRY YOUNG
T9N R7E SEC 13
HIDDEN VALLEY ACRES BLK 3 LOT 1

FEES: $150.00

TOTAL $150.00

Permittee
TERRY YOUNG
204 N 75 ST
LINCOLN NE 68505

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: 8/20/93

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 7E ; Section 13 ;
   Block 3 : Lot 1 : Addition Hidden Valley Acres
   Street Address_____

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. EXPERIMENTAL SYSTEM

Lloyd L. Young
Signature of Applicant (Owner or Lessee)

204 N. 75th Ct. Lincoln NE 68505
Address

488-8485
489-8700 ext 521

(Do not write below this double line)

1. Health Department:	Date Rec'd. 8/23/93. Date Frwd. 8/23/93.	ACTION: Approved ☒ Disapproved ☐ Signature:	Jerrold C. Wood
2. Supt. Bldg. Insp.: or Village Clerk	Date Rec'd. 8/23/93. Date Frwd. 8/23/93.	ACTION: Approved ☒ Disapproved ☐ Signature:	
3. City or County Engineer :	Date Rec'd. 8-23-93. Date Frwd. 8-23-93.	ACTION: Approved ☒ Disapproved ☐ Signature:	

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 11/10/93 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 3/11/94 By: Jerrold C. Wood *
APPROVAL

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

* PROVISIONAL SYSTEM
EXPERIMENTAL

FORM 23-43

10,510 Wind River Trail

