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. 93380105201

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

Establishment
DENNIS FREY
T9N R7E SEC 13
HIDDEN VALLEY ACRES BLK 2 LOT 9

FEES: $150.00

TOTAL $150.00

Permittee
DENNIS FREY
RR0001
BOX 0088A
HICKMAN NE 68372

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:_____

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 2 : Lot 9 : Addition Hidden Valley acres
   Street Address_____

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe_____

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

4. Distance to public sewer: _____ft.

Dennis Troy Ros.
Signature of Applicant (Owner or Lessee)

RT 1 Box 88A Nickman NE 68332
Address

(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. Hood

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. 8-25-93. ACTION: Approved ☐ Disapproved ☐ Signature:

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 11-22-93 by: P.D need fence,
Date: 11-23-93 by: P.D. ~~fencing~~
Date: 4-7-94 by: P.D Large gap at bottom of fence Corrected P.D.

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 4-8-94 By: Paul Wiltsmann

FORM 23-43

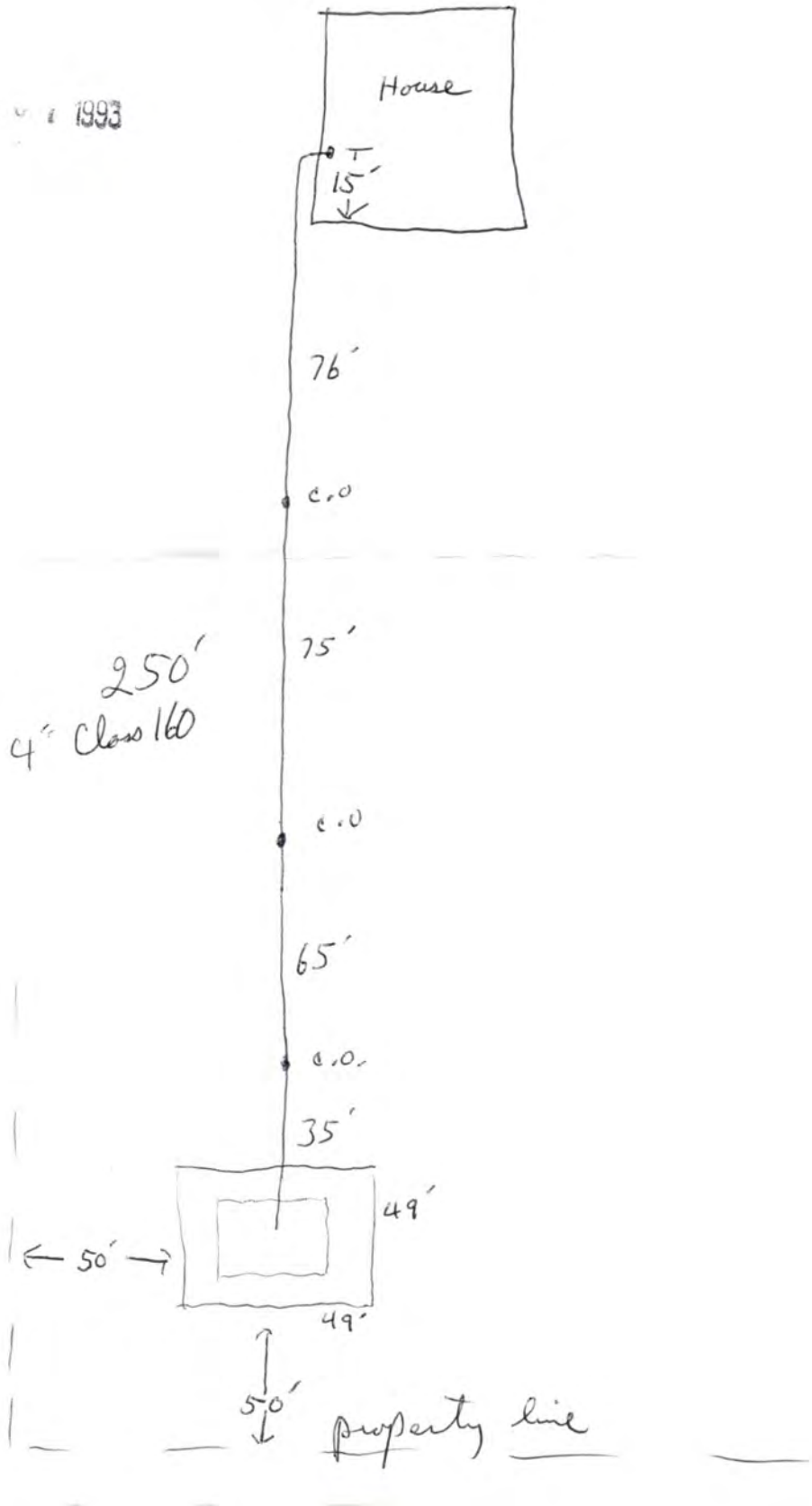
Larry Schwarck

11-24-93

Aspen Canyon Rd. Lot 9 Blk 2
Hidden Valley acres
Frey D+F Const

N

RECEIVED DEC 1993



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 $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 6401 ASPEN CANYON RD, LINCOLN, NE 68516

Parcel ID 16-13-407-009-000 (i.e. 99-99-999-999-999)

Twp 9N Range 7E Section 13 1/4 ___ 1/4 ___ Block 2 Lot 9 Addition HIDDEN VALLEY ACRES FIRST ADD

Directions to Property WEST OFF 112TH BETWEEN PINE LAKE RD & OLD CHENEY RD

Location of Well RURAL WATER Tap Location: Inside ☐ Outside ☐

Location of Sewage System LAGOON VISIBLE Year Installed 1994

Site Hazards (dogs, etc.) ___

	NAME	ADDRESS	PHONE
Present Owner:	MICHAEL & NANCY HUCKABEE	6401 ASPEN CANYON RD LINCOLN NE 68526	483-5601
Tenant/Buyer:	MICHAEL & MARY JO HAVENCAMP	4821 SO. 72 LINCOLN, NE 68516	499-5512
Return to:	ROGER HARRE	225 NO. COTNER LINCOLN, NE 68505	430-6670 323-7080 (Fax)

Signature of Applicant R A. Harre Address 225 NO. COTNER LINCOLN, NE 68505 Date 5/16/05

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 5/17/05 Amount $200.00 Check No. 7219 Initials CW

DATA ENTRY Date ___/___/___ Case No. ___ Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood RURAL WATER DISTRICT **DATE:** 5/17/05

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☐
Disapproved	☒

Additional Site Visits

Date 6/23/05 by LCH

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: WATER LINE MUST BE LOCATED 25 FEET FROM SEWAGE LINE. VEGETATION AROUND LAGOON MUST BE CUT, LITTLE TREES AND BUSHES REMOVED. CATAILS KILLED OUT. NEED WARNING SIGNS ON FENCE. FENCE SHOULD BE MOVED SO IT STANDS UP AT FOUR FOOT TALL. See Attached Letter ☐ LAGOON IS VERY FULL BUT DOESN'T APPEAR TO HAVE OVERFLOWED. OLD TIRES MUST BE REMOVED AS THEY PRESENT MOSQUITO BREEDING POTENTIAL

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 6/23/05

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: 9-00

9705190032

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

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2232

Legal Description of Property: Street Address 6401 Aspen Canyon Road

Twp 9N Range 7E Section 13 1/4 ___ 1/4 ___ Block 2 Lot 9 Addition Hidden Valley Acres 1st Add.

Directions to Property East on Pine Lake Road to Hidden Valley Estates

Location of Well No well - On Rural Water Tap Location: Inside ☐ Outside ☐

Location of Sewage System Lagoon South of House Year Installed 1994

	NAME	ADDRESS	PHONE
Present Owner:	Doug - Mary Ebert	6401 Aspen Canyon Rd	483-0144
Tenant/Buyer:	Mike - Nancy Hubbard		
Return to:	Home Resale Estate attn: Paul Kardell	2855 So 70th St 68506	483-2951

Signature of Applicant Paul D Kardell Address ___ Date ___/___/___

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 05/12/97
Initials JS
Amount $150.00
Check No. 12528

DATA ENTRY

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

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 5/13/97

RURAL WATER DISTRICT

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: LAGOON IS QUITE FULL BUT NOT OVERFLOWING.

See Attached Letter ☐

FINAL STATUS

RURAL WATER

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

Approved by Jerrold C. Hood, R.E.H.S. Date 5/13/97

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.

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Revised/Reprint: 10-95