Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

007898

(402) 441-8000

Permit: SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

Permit # 05390082901

Issued 06/20/05
Expires 06/20/06
Revenue Code 3157

Establishment:
ALLEN BERG
T9N R7E SEC 20
COUNTRY ACRES BLK 2 LOT 7
5100 TROTTER CIR

FEES: $100.00

Permittee:
ALLEN BERG
5100 TROTTER CIR
LINCOLN NE 68516

TOTAL: $100.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

#053900829

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☒ Municipal Code 24.38 ☐ County Resolution Number 2832

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☐ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 9N Range 7E Section 20 1/4 Section
   Block 2 Lot 7 Addition COUNTRY ACRES
   Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address 5100 TROTTER Cr.

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms _____ Describe _____

3. **Type of Present Individual Disposal System** ☒ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** Add 100 FT INFILTRATORS.

5. **Work to be done by:** ☐ owner ☒ contractor's name EGGNER CONST

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Allen Berg Address 5100 TROTTER Phone 420-1763
Applicant Signature (owner or lessee) _____

Please include the permit fee ($100) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

---

HEALTH DEPARTMENT USE ONLY

Date received 6/20/05 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date 7/6/05 By [signature]
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 7/7/05 By Jerrold Hood

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 6/20/05 Amount 100.00 Check No. 4554 Initials [initials]

White - Division Copy Pink - Business Office Revised 9/00