File # 1754

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

AUGUST 27,1981 — THIS LICENSE OR PERMIT EXPIRES

Clyde Southwick — LICENSEE OR PERMITTEE

Box 483 Walton Ne — ADDRESS

T9N,R7E,Section 22, Clarendon Hills 1st addition — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: Non-Transferable Repair

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
018754	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT

HEALTH APPLICATION

56804 CH 30.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

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

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☒
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1754

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 2-19-81

The undersigned hereby applies for a permit to ALTER ☐, EXTEND ☒, or 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: Twp. 9N ; Range 7E ; Section 22 ;
Block 2 ; Lot 7 ; Addition CLARENDON HILLS FIRST ADDITION
Street Address 7200 Corson
Richard Rimmel

2. Property Use: Residential ☒; Commercial ☐
No. Bedrooms 3
Describe
Other Use ☐
Describe

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

4. Description of proposed alteration, extension or repair: Clean out & Repair Laterals & add 100 ft New Conc. Blast 12 Holes on 8 blocks

5. Work to be done by: Owner ☐ ; or Contractor ☒ , Big Clyde Sanitation Service
Contractor's Name

6. Estimated cost of project: Over $400

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	

Big Clyde Sanitation Service Clyde Southwick
Signature of Applicant (owner or lessee)

Box 403 Walton, Nebr.
Address

(Do not write below this line)

REVIEWING ACTION

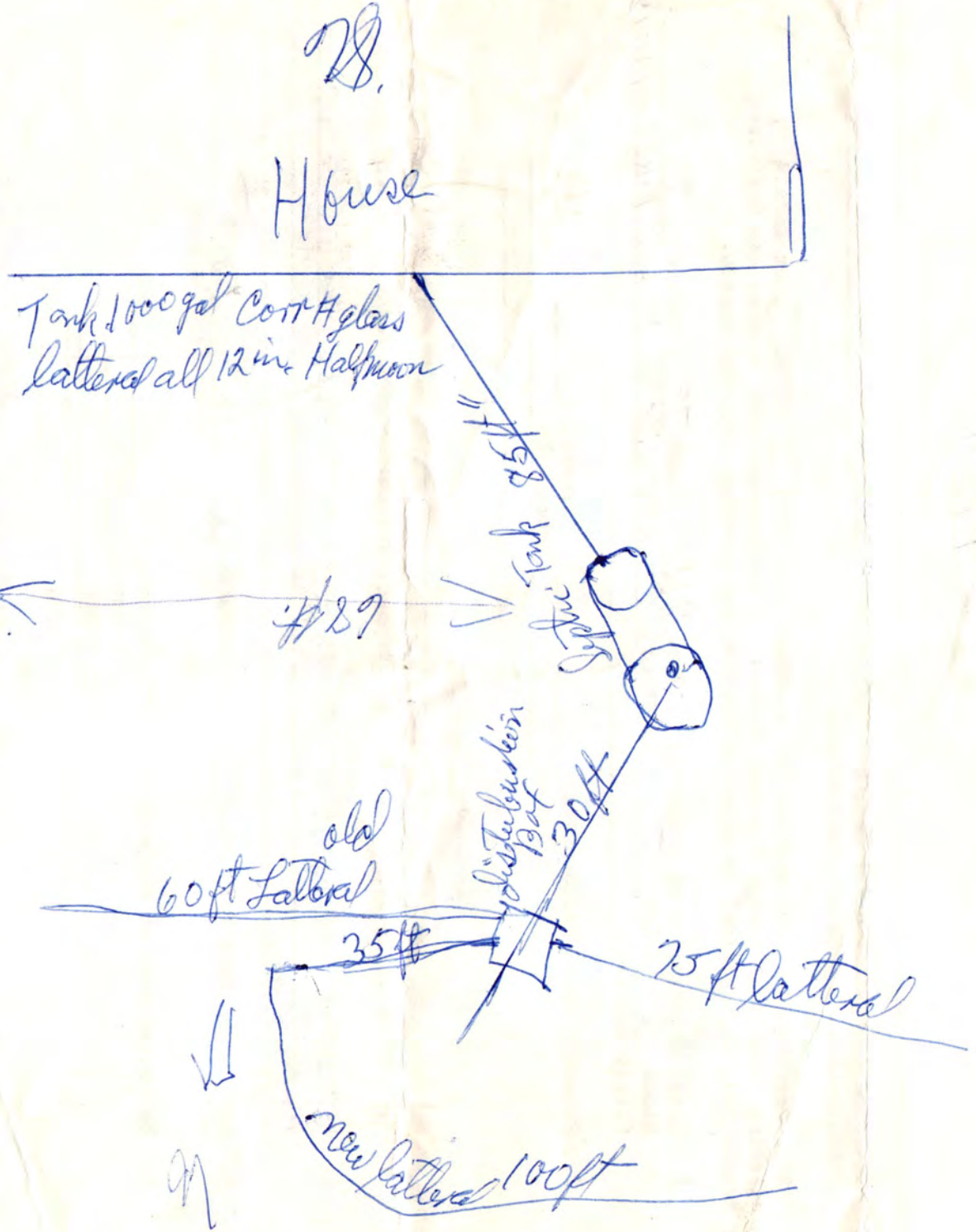
1. Date Rec'd:
Filing Fee: $ 30.00

2. Site Visits:
Date: 2/19/81 by: L.C.H. & R.M.
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 3/2/81 by: J. C. Hood

28.


House
Tank 1000 gal Conc Hglass
lateral all 12 in Halfmoon
Well
#29
Septic Tank 85 ft
Distribution box
30 ft
old
60 ft Lateral
35 ft
25 ft lateral
New lateral 100 ft