1730

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM — TYPE OF LICENSE OR PERMIT

MAY 17, 1981 — THIS LICENSE OR PERMIT EXPIRES

Eugene Habrock — LICENSEE OR PERMITTEE

1721 Prospect St. — ADDRESS

T9N, R7E, Section 28 Lot W½ 22 — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 60.00	$	$	$	$ 60.00

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

SERIAL NO.	DATE	AMOUNT
560584	17	60.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

HEALTH APPLICATION

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

A

FILING FEE: $ 60.00

FILE NO. 1730

DATE: 11-17-80

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 28 ;
   Block _____ : Lot W/2 22 I.T. Addition _____
   Street Address 5740 Rokeby Rd
2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 1 . Describe _____
3. Type of Individual Sewage Disposal System: Septic Tank ☐ ; Other ☒ Lagoon
4. Distance to public sewer: — ft.

Eugene L Gabriel
Signature of Applicant (Owner or Lessee)

1721 Prospect
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 11/17/80. Date Frwd. 11/17/80. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. 11/17/80. ACTION: Approved ☒ Disapproved ☐ Signature: Paul A. Shewood
3. City ~~or County~~ Engineer: Date Rec'd. 11-17-80. Date Frwd. 11-17-80. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 12-19-80 by: sm *
Date: 9-23-81 by: sm
Date: _____ by: _____

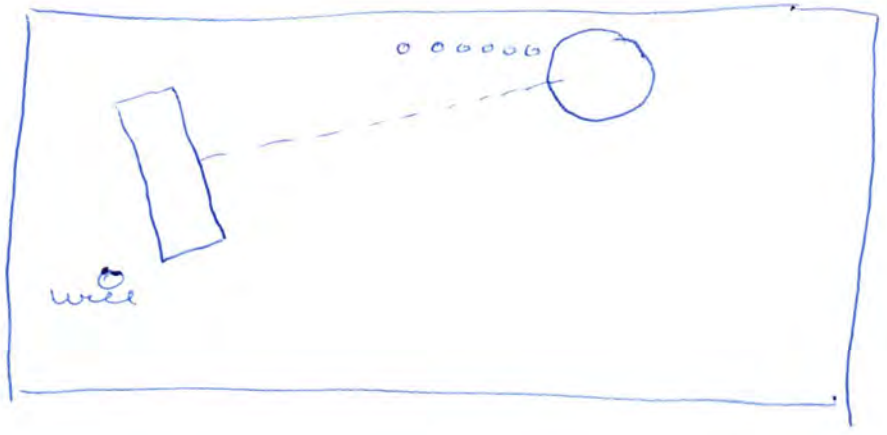
PROVISIONAL *
INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 9-23-81 By: Ron Mayhew

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

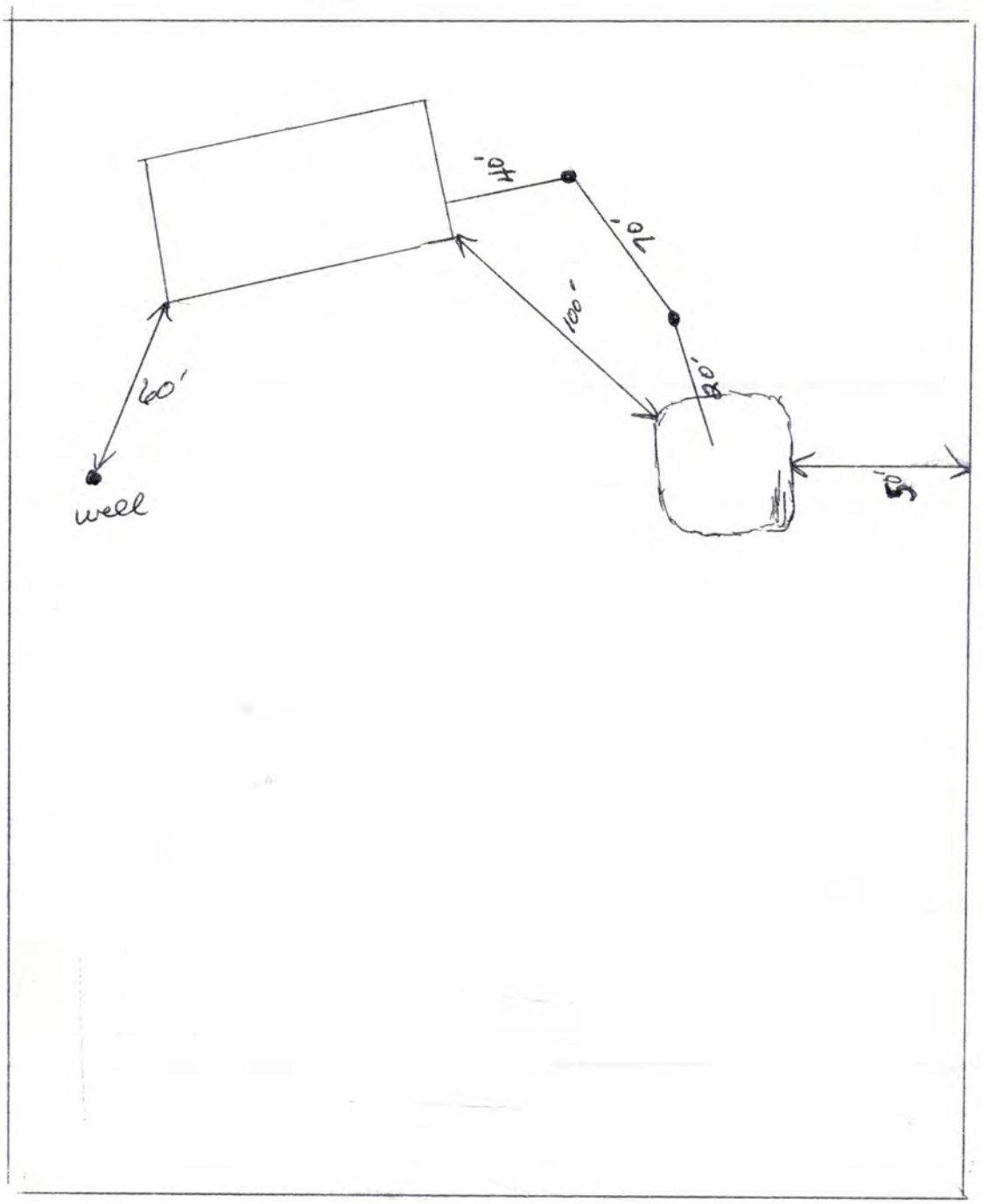
* (need drawing for 1) must be sealed 2) need fences

* Sewer line drops gradually into lagoon, therefore, effluent will back up considerable distance into sewer line toward house.

①	②	③	④	⑤	⑥
24 1/2	19	21	20	21 1/2	19 1/2
24	18 7/8	20 1/2	19 1/2	21	19 1/4
23 1/4	18 3/4	20 1/8	19	19 3/4	19
23	18 1/4	19 7/8	18 3/4	19 3/8	18 7/8
22 1/2	17 7/8	19 1/2	18 1/4	19 1/8	18 5/8
22 1/4	17 1/2	19 1/4	18	19	18 1/2
1/4	1/4	1/4	1/4	1/8	1/8



RECD MAR 12 1981



N
W E
S

5740 Rokeby Rd

008

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: 9/1/92

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

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 28; BLOCK ____

SW 1/4

LOT 71; ADDITION _____; Street Address 5740 Rokeby Road

Directions to Property 200 yds east of 56th on Rokeby Rd North Side of Road (2nd black mailbox) end of garden

Location of Well Southwest of House = North Tap Location: Inside ☐ Outside ☒

Location of Sewage System Lagoon East of Driveway Year Installed 82

	NAME	ADDRESS	PHONE
Present Owner:	Richard + Elaine Coster	5740 Rokeby Rd	423747
Tenant/Buyer:	(Refiance)		
Return to:			

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

Signature of Applicant Richard D Coster Address 5740 Rokeby Rd

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HEALTH DEPARTMENT USE ONLY

Date Received SEPTEMBER 2, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE SEPTEMBER 3, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☐	☒	Approved:	☐	Date 9/3/92	by J.C.H
Bacteria	☒	☐	Provisional:	☐	Date 9/18/92	by J.C.H
Nitrate <0.1ppm	☒	☐	Disapproved:	☒	Date _____	by ____

Comments: WELL HAS SLIGHT DEPRESSION AROUND IT. NEED VEGETATION CUT IN AND AROUND LAGOON. WEST SIDE OF FENCE IS NOT HIGH ENOUGH. Corrected 9/10/92 J.C.H See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Gerald C. Hood R.E.H.S. DATE SEPTEMBER 16, 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