Lincoln-Lancaster County Health Department

98081100 1

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 $150.00. Allow two weeks for processing. Incomplete information will delay processing.

CR 3737

Legal Description of Property: Street Address 9705 South 56th Street

Twp 9N Range 7E Section 29 1/4 ___ 1/4 ___ Block ___ Lot ___ Addition ___

Directions to Property ___

HOME VACANT W/LOKBOX

Location of Well ATTACHED Tap Location: Inside ☒ Outside ☒

Location of Sewage System ATTACHED Year Installed ~~1995~~ 1998

	NAME	ADDRESS	PHONE
Present Owner:	William Babcock	4924 W. Mathis Lincoln, NE 68524-1373	470-0548
Tenant/Buyer:	Bart Walline	724 B Street Lincoln, NE 68502	
Return to:	Capitol Title Attn: Marilyn Wimer	P. O. Box 6577 Lincoln, NE 68506-6577	434-3737

Signature of Applicant Ivan M Babcock Address ~~4924~~ W. MATHIS Date 7/17/98

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 7/20/98
Initials ___
Amount $150.00
Check No. 203

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

PRELIMINARY STATUS--By 7-21-98 JL **DATE:** ___/___/___

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	
Construction	☑ 7-30-98	☐	Approved	☐
Bacteria	☑ 0 /ml	☐ ___ /ml	Provisional	☐
Nitrate	☑ .4 ppm	☐ ___ ppm	Disapproved	☐

Additional Site Visits
Date 7/30/98 by JL
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: Well cap loose / need to fill depressions around well. If the septic tank has not been pumped recently, it should be checked to see if it's needed.

See Attached Letter ☐

Second letter

FINAL STATUS

8-10-98 called

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

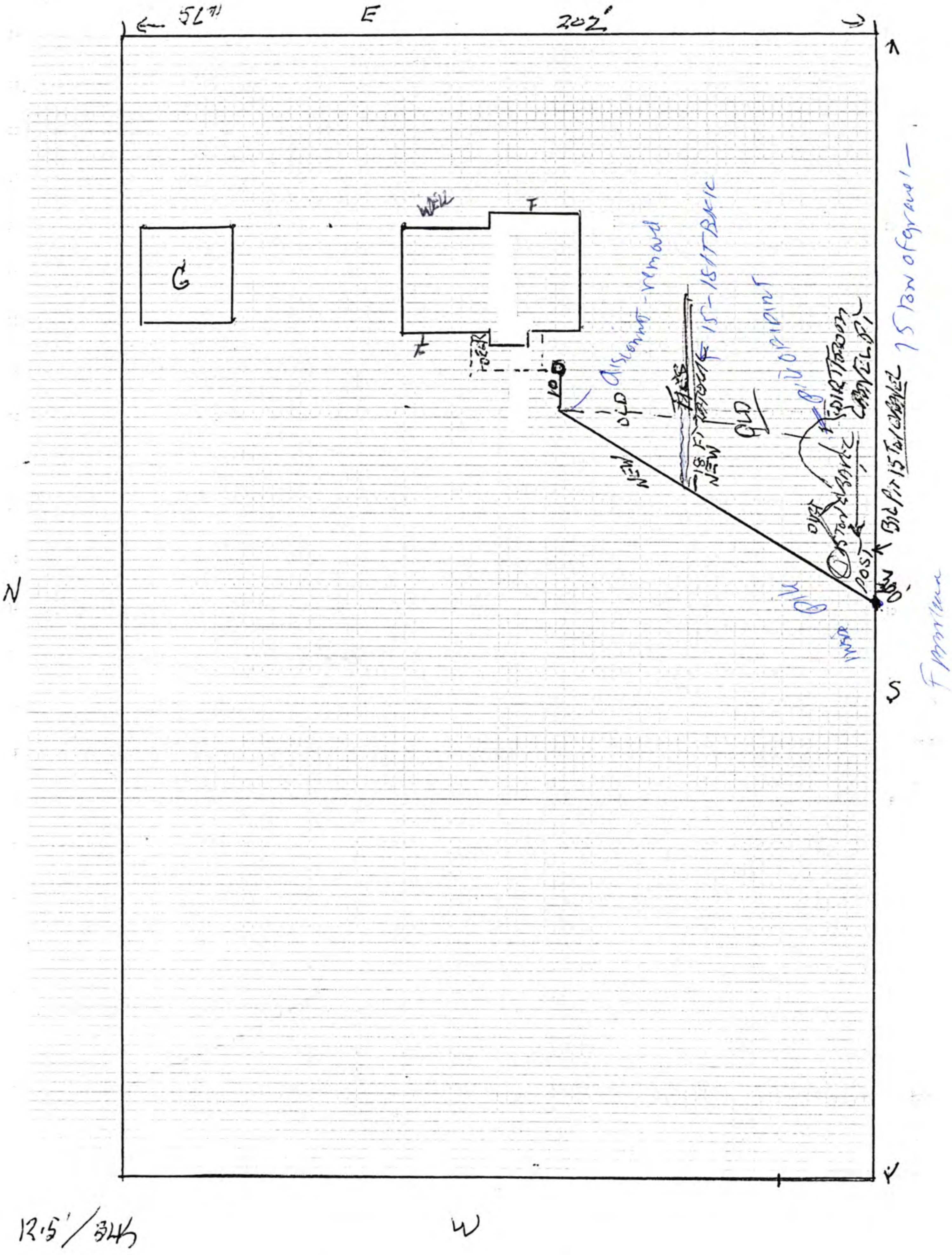
Approved by John J Chen RETHS mgr Date 8/10/98

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: 10-95

9705



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Scanned

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street ◆ Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit No. HW000230

Request for Site Clearance and Permit for Individual Water Well

The undersigned hereby requests:

- ☒ Site Clearance and Permit to construct a new individual water well - $160
- ☐ Bi-Annual Permit for an existing well - $105
- ☐ Permit to repair or alter existing well involving opening of well - $80

1. Well Site Address 9705 South 56th St City Lincoln, NE Zip 68516
(No Rural Route Please)
Township 9 Range 7 Section 29 1/4 Section
Block N/A Lot 2 Addition Babcock subdivision
Parcel ID 16 - 29 - 401 - 003 - 000 (i.e. 99-99-999-999-999)

2. Well use: ☒ Residential ☐ Commercial ☐ Other Describe

3. Distance to Public Water Supply +300 feet.

Signature of Owner Bart Walline Print Name Bart Walline
Current Address 9705 South 56th Lincoln, NE 68516
Current Home Phone 402-420-6761 Work Phone 402-304-4062

Signature of Contractor to be determined Print Name
Address
Home Phone Work Phone Cellular Phone

Sewage Permit Applied for: ☐ Yes ☒ No ☐ Not applicable

Please Submit Permit Fee with This Request

Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

Approval Process: Lincoln Municipal Code 8.44

1. Health Department	Date received 2/29/07 Date forwarded 2/28/07	ACTION ☒ Approved ☐ Disapproved Signature:			
2. Building & Safety	Date received 2/27/07 Date forwarded 2/27/07	ACTION ☒ Approved ☐ Disapproved Signature:			
3. City Engineer	Date received 2/27/07 Date forwarded 2/27/07	ACTION ☒ Approved ☐ Disapproved Signature:			

REMARKS OR REASONS FOR DISAPPROVAL:

Site Visits
Date: 4/10/2007 By Jim Newman (+ collect)
Date: 4/20/2007 By Jim Newman (+ collect)
Date: 4/30/2007 By Jim Newman

Nitrate Level 0.0 mg/L
Chloride Level mg/L
Bacteriological Analysis Satisfactory ✓ Yes ___ No
Other

Installation Final Written Approval
Date: 5/2/07 By

Business Office Use Only
Received: Date: 02/26/07 Amount 160.00 Check No. 1464 Initials

Distribution: White - Health Department Lt. Green - Engineer Lt. Blue - Building Inspector