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 SYSTEM REPAIR

No. 93390036401

Issued 12/08/93
Expires 06/08/94
Revenue Code 18754

Establishment
CLAYTON KELLING
T9N R7E SEC 32
BLK 5 LOT 5
THE HIGHLANDS BLOCK

FEES: $50.00

TOTAL $50.00

Permittee
CLAYTON KELLING
RR0008
LINCOLN NE 68506

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 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: 471-7800)

FILE NO. _____

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

DATE: 12-3-93

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 32 ;
Block 5 ; Lot 5 ; Addition Highlands South
Street Address 5201 Brakhaker Rd.

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: Install Sewage Treatment lagoon.

5. Work to be done by: Owner ☐ ; or Contractor ☒, Southwick Sewer & Drain
Contractor's Name

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	400 00

Clayton Kelling Brad Southwick
Signature of Applicant (owner or lessee)

RT. #8, LINCOLN, NE 68516 701 E. 4 Hickman 68372
Address

(Do not write below this line)

REVIEWING ACTION

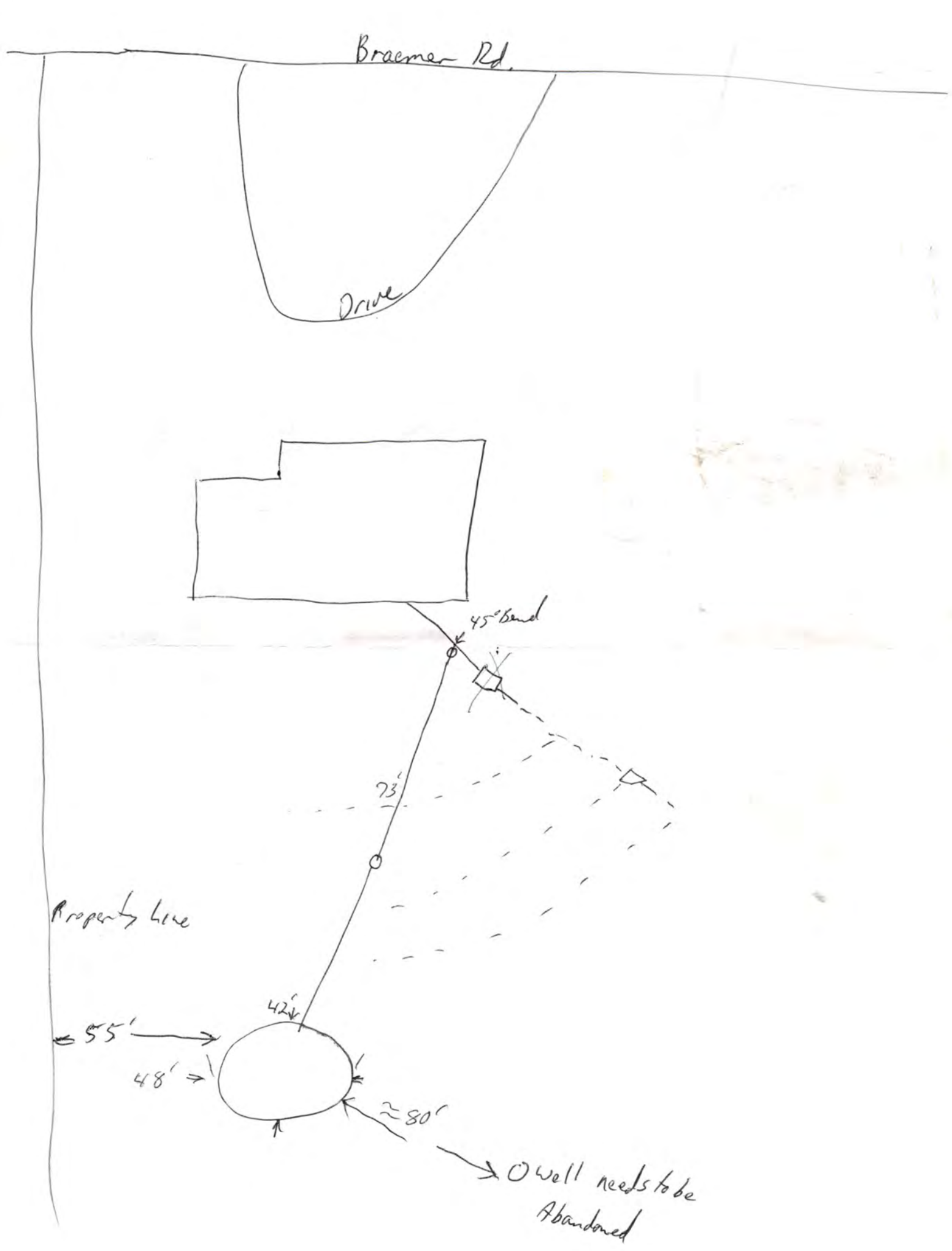
1. Date Rec'd: _____
Filing Fee: $ 50.00

2. Site Visits:
Date: 12/7/93 by: J. C. H.
Date: 1/16/96 by: J. C. H.
Date: _____ by: _____

well must be abandoned write letter.

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 1/16/96 by: J. C. Hood


Braemar Rd.
Drive
45° Bend
73'
Property Line
42'
55'
48'
≈80'
O well needs to be Abandoned