LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE SYSTEM REPAIR

No. 94390042301

Issued 11/16/94
Expires 05/16/95
Revenue Code 18754

Establishment
WAVERLY PLUMBING
T12N R8E SEC 29

FEES: $50.00

TOTAL $50.00

Permittee
WAVERLY PLUMBING
14150 LANCASTER ST
WAVERLY NE 68462

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: 11-15-94

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. 12 N; Range 8 E; Section 29 SE¼
Block _____; Lot _____; Addition _____
Street Address _____

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

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

4. Description of proposed alteration, extension or repair:
Extending existing laterals from septic tank
add 100' of Laterals

5. Work to be done by: Owner ☐; or Contractor ☒, Waverly Plbg.
Contractor's Name

6. Estimated cost of project:
a. Materials $ _____
b. Labor $ _____
c. Other $ _____
TOTAL $ Don't know # 400.00

Waverly Plumbing
Signature of Applicant (owner or lessee)

Box 116 14150 Lancaster
Address
Waverly Nebr

(Do not write below this line)

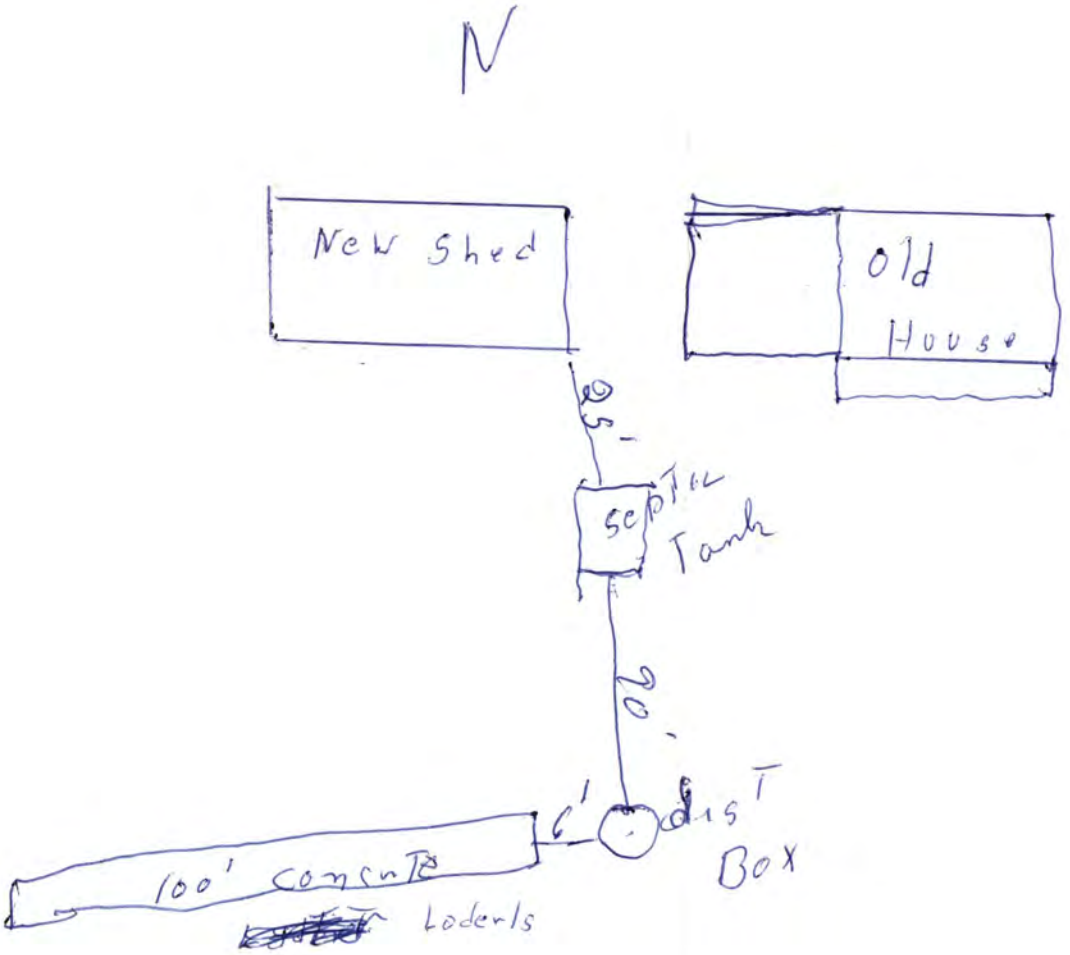
REVIEWING ACTION

1. Date Rec'd: 11-15-94
Filing Fee: $ $50.00

2. Site Visits:
Date: 11-15-94 by: [illegible]
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐
by: Ron Maynard

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 11-18-94 by: Ron Maynard


N
New Shed
Old
House
25'
septic
Tank
W
E
20'
6'
dist
Box
100' concrete
Laterals
S