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. 94390040201

Issued 07/07/94
Expires 01/07/95
Revenue Code 18754

Establishment
KEVIN BROPHY
T12N R7E SEC 30
17707 N 40 STREET

FEES: $50.00

TOTAL $50.00

Permittee
KEVIN BROPHY
RR0001
BOX 00047
DAVEY NE 68336

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"

RECEIVED JUN 05 1994

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: 6-14-94

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. 12N ; Range 7E ; Section 30 ;
Block _____; Lot _____; Addition _____
Street Address 17707 North 40th

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

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

4. Description of proposed alteration, extension or repair: New

5. Work to be done by: Owner ☐ ; or Contractor ☑ , Jim Burress
Contractor's Name

6. Estimated cost of project:

a. Materials	$ > 400.00
b. Labor	$
c. Other	$
TOTAL	$

Kevin Brophy
RR #1 Box 47
Davey NE 68336

Signature of Applicant (owner or lessee)

Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: 7-6-94
Filing Fee: $ 9.50

2. Site Visits:
Date: 6-14-94 by: rm
Date: _____ by: _____
Date: _____ by: _____

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 3-17-98 by: Ron Maynard

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