LINCOLN-[illegible]CASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2526-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JANUARY 15, 1987 — THIS PERMIT EXPIRES

DANIEL M. SESTAK — ISSUED TO

ROUTE #1, BOX 8-B DAVEY, NE 68336 — ADDRESS

T12N; R6E; Sec E!, SE° 22; 200 West Davey Rd. — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE ALTER, EXTEND OR REPAIR

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
MG	7-16-87	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER
2832

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. _____

20109-0977

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. 1526-C

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

DATE: 7-15-87

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. T12N ; Range R6E ; Section 22 E½SE¼;
Block _____; Lot _____; Addition _____
Street Address 200 WEST DAVEY 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:
REPAIR DAMAGED LATERAL LINE

5. Work to be done by: Owner ☐ ; or Contractor ☒, LARRY SCHWARCK (GLEN WELLMAN)
Contractor's Name

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$ 1000.00

Daniel M. Sestak
Signature of Applicant (owner or lessee)

200 W. DAVEY RD DAVEY, NE. 68336
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 30.00

2. Site Visits:
Date: 7/15/87 by: J.C. Hood
Date: _____ by: _____
Date: _____ by: _____

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 7/17/87 by: J.C. Hood

JUL 17 1987

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: 475-6221)

FILE NO._____

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

DATE: 7-15-87

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._____; Range_____; Section_____;
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:_____
_____
_____

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

6. Estimated cost of project:

a. Materials	$ 500	
b. Labor	$ 400	
c. Other	$ 100	
TOTAL	$ 1000	

_____
Signature of Applicant (owner or lessee)

_____
Address

(Do not write below this line)

REVIEWING ACTION

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

2. Site Visits:
Date:_____ by:_____
Date:_____ by:_____
Date:_____ by:_____

3. Date: Approved ☐; Disapproved ☐
by:_____

4. INSTALLATION FINAL WRITTEN APPROVAL
Date:_____ by:_____

Larry Schwarek - 7-14-87

