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. 97390054401

Issued 03/14/97
Expires 09/14/97
Revenue Code 18754

Establishment
ROBERT BROOKS
T12N R6E SEC 18
4400 W ROCK CREEK ROAD

FEES: $50.00

TOTAL $50.00

Permittee
ROBERT BROOKS
4400 W ROCK CREEK RD
RAYMOND NE 68428

Issued By M. Jane Ford
Health Director

3390

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
3140 "N" STREET LINCOLN, NE 68510-1514

FILE NO. _____

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

DATE: 3/13/97

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 6E ; Section SE¼ 18 ;
Block _____; Lot _____; Addition _____
Street Address 4400 W. Rock Creek 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: change to lagoon to replace failing septic system

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

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	900 00

Robert Brooks
Signature of Applicant (owner or lessee)

4400 W. Rock Creek
Address

(Do not write below this line)

REVIEWING ACTION

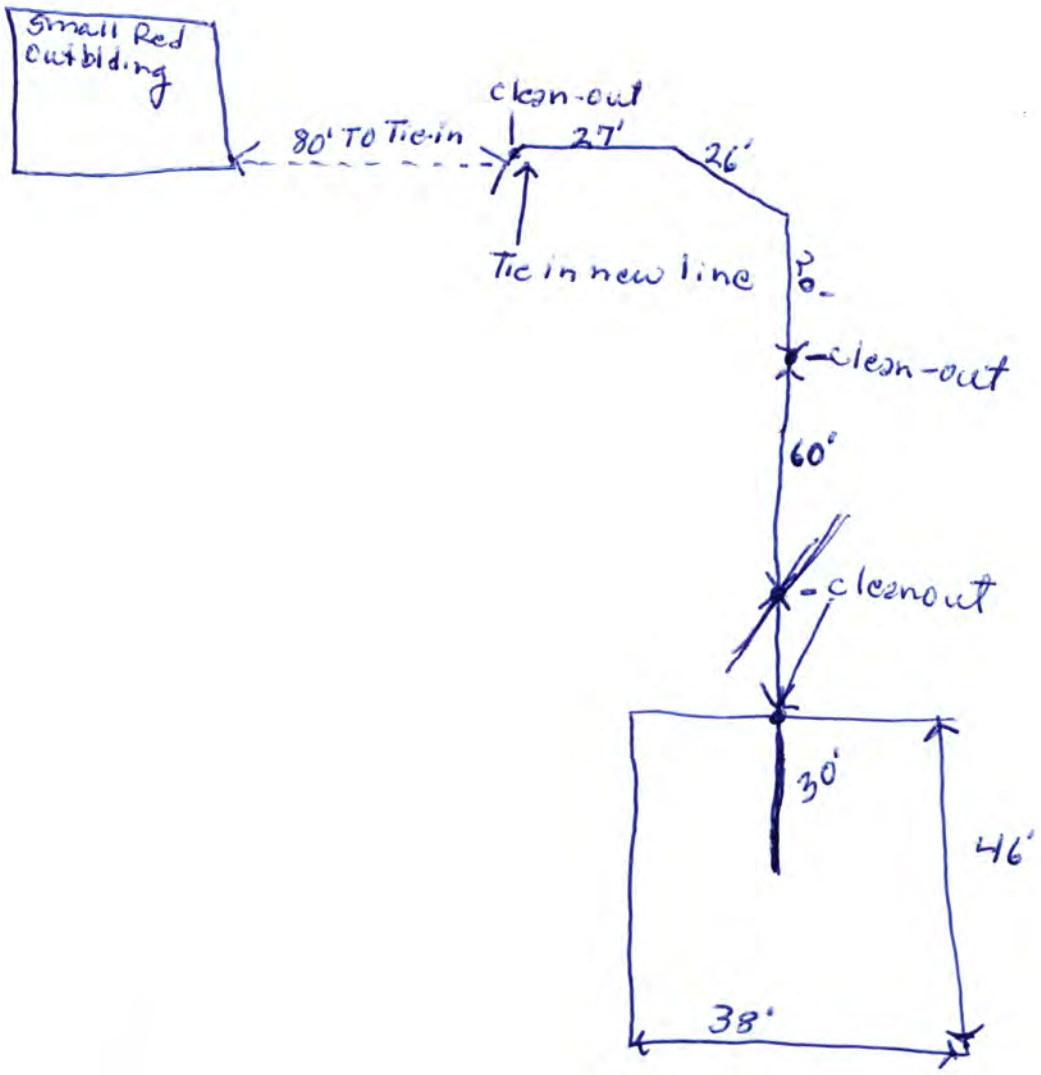
1. Date Rec'd: 3-13-97 LO
Filing Fee: $ 50.00 #7876

2. Site Visits:
Date: 3-19-97 by: new roadfence
Date: 9-23-97 by: new fence up
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐
by: Ron Yoquant
PROVISIONAL *

4. INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 9-29-97 by: Ron Yoquant

* Did not see original sewer line to this system


Small Red Outbidng
80' TO Tie-in
clean-out
27'
26'
Tie in new line
20'
clean-out
60'
cleanout
30'
46'
38'



2 740 000 FEET *(Joins sheet 8)*

009

Lincoln-Lancaster County Health Department

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. 1829

Legal Description of Property: Street Address 4400 W. Rock Creek Rd. Raymond, NE. 68428
Twp 12N Range 6E Section 18 1/4 ___ 1/4 ___ Block ___ Lot ___ Addition ___
Directions to Property ___

Location of Well East Side Of House Tap Location: Inside ☐ Outside ☒
Location of Sewage System W. Side Of Gravel Playground Year Installed ___
Well Is 4 Yrs Old also has 5 hydrants

	NAME	ADDRESS	PHONE
Present Owner:	Robert & Debra Brooks	4400 W. Rock Creek Rd.	783-3000 H. 421-4213 W.
Tenant/Buyer:			
Return to:	First Fed. Lincoln Attn: Susan	135 N. Cotner Lincoln, NE. 68505	473-6107

Signature of Applicant Robert R. Brooks Address 4400 W. Rock Creek Rd. Raymond, NE. 68428 Date 1 / 3 / 97

HEALTH DEPARTMENT USE ONLY

RECEIVED		DATA ENTRY	
Date	1 / 3 / 97	Date	___ / ___ / ___
Initials	JS	Case No.	___
Amount	$150.00	Initials	___
Check No.	83		

PRELIMINARY STATUS--By Ron Marquardt DATE: 1 / 9 / 97

owner called 7-14-97 + needs 30 more days.

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 1.7 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☒ corrected
Provisional	☐
Disapproved	☒

Additional Site Visits
Date 8 / 1 / 97 by RM + Lance
Date 9 / 23 / 97 by RM
Date ___ / ___ / ___ by ___

Comments: A waste stabilization lagoon has been constructed to replace a failing seepage bed - septic system. However the sewer line components of the original system have not been inspected. Thus, a provisional approval. See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Marquardt Date 9 / 23 / 97

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