LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE SYSTEM REPAIR

No. 90390019501

Issued 08/07/90
Expires 02/07/91

ESTABLISHMENT

ED BENES
T12N R6E SEC 8 QTR NE

FEES: Permit 018754 $50.00

Total $50.00

Issued By COUNTY HEALTH

PERMITTEE

ED BENES
2800 N 40 STREET
LINCOLN NE 68504

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
1/16/91	PAID

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

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: 10-16

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 8, NE¼;
Block_____; Lot_____; Addition_____
Street Address_____

2. Property Use: Residential_____ ☒; Commercial_____ ☐
No. Bedrooms 3
Describe_____
Other Use ☐
Describe_____
Vabandoned

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

4. Description of proposed alteration, extension or repair: Installed a lagoon sewage disposal system to replace septic system

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

6. Estimated cost of project:

a. Materials	$_____
b. Labor	$_____
c. Other	$_____
TOTAL	$1400

Eileen R Bence
Signature of Applicant (owner or lessee)

2803 N 40 68504
Address

(Do not write below this line)

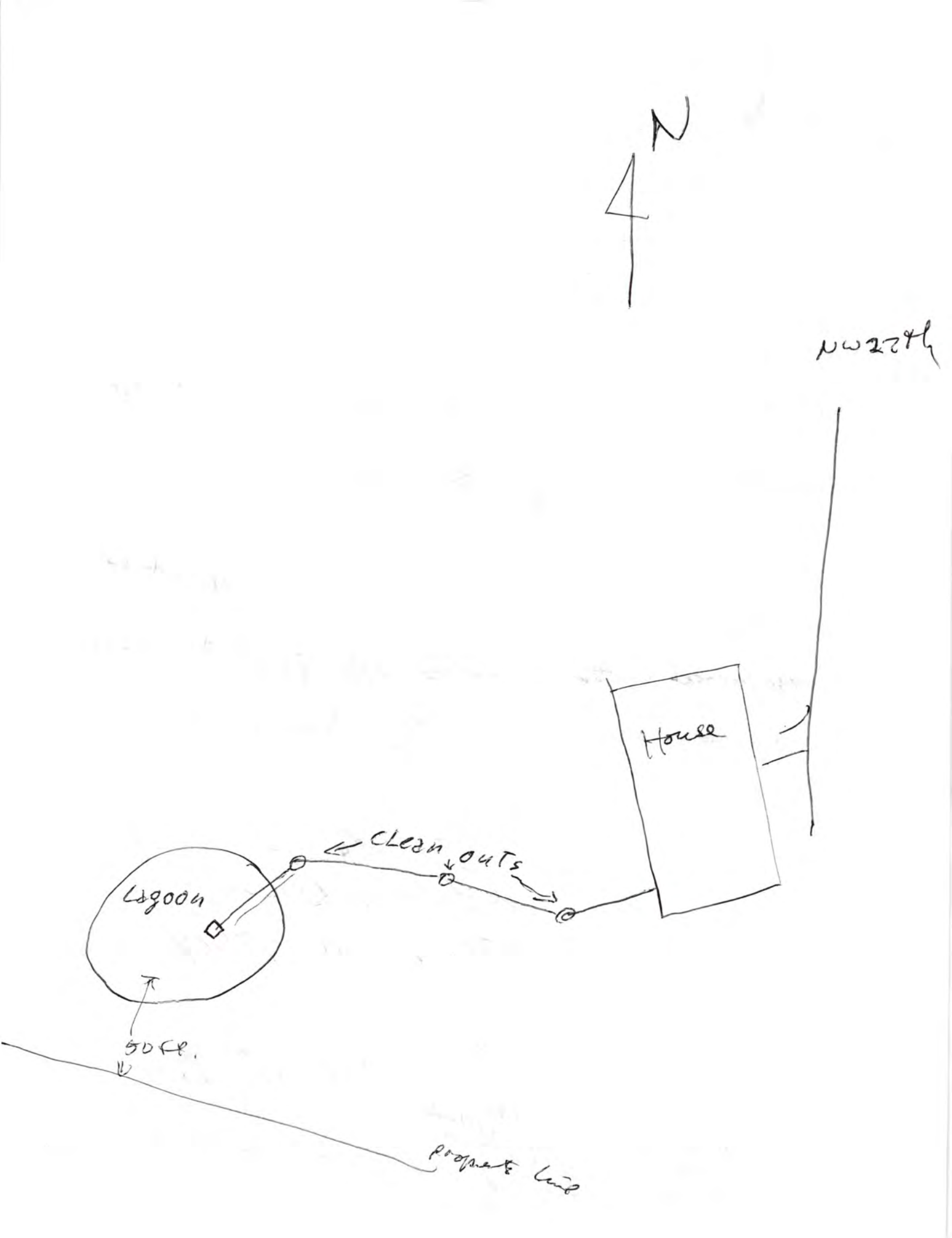
REVIEWING ACTION

1. Date Rec'd: 8-7-90
Filing Fee: $ 50.00

2. Site Visits:
Date: 10-16-90 by: ms sides of lake contain moist soil too steep
Date:_____ by:_____
Date: 10-23-90 by: ms connected

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10-23-90 by: Ron Moyer


N
NW 27th
House
Clean outs
Lagoon
50 ft.
Property Line

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: May 2, 1991

☐ Evaluation of the Sewage Disposal System ☒ Enclosed is $150.00

Legal Description of Property: TWP. 12N ; RANGE 6E ; SECTION 8 ; BLOCK ____

LOT 6 ; ADDITION _____ ; Street Address _____

Directions to Property NORTH on 14th to Agnew Rd., Go West to NW 27th, Go NORTH 3/4 mile to Acreage on West side of Road, enter gate

Location of Well Southside of shop Tap Location: Inside ☐ Outside ☒

Location of Sewage System _____ Year Installed N.side of deck

	NAME	ADDRESS	PHONE
Present Owner:	Edwin Benes	2800 N 40th, Lincoln	466-3270
Tenant/Buyer:	Mike + Geralyn Gothier	3130 N 3rd, Lincoln	475-4059
Return to:	Chuck Larsen, Century 21, Home + Farm,	2200 S. 40th #103 Lincoln 68506	489-5911

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Charles Larsen Address Century 21, Home + Farm 2200 So. 40th #103

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HEALTH DEPARTMENT USE ONLY

Date Received 5-3-91 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 5-3-91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒ Corrected	☒	Approved:	☐	Date 5-3-91	by rm
Bacteria	☒	☐	Provisional:	☒	Date 5-7-91	by ____
Nitrate	☒ <0.1	☐	Disapproved:	☐	Date _____	by ____

Comments: Sanitary seal loose. Need to seed dikes of lagoon with grass.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Ron Mangant R.S. DATE 5-9-91

Approval or disapproval is based on written 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 operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832