LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE SYSTEM REPAIR

No. 93390033001

Issued 05/28/93
Expires 11/28/93
Revenue Code 18754

Establishment
ROBERT ATKINS
T10N R5E SEC 32
11900 W VAN DORN STREET

FEES: $50.00

TOTAL $50.00

Permittee
ROBERT ATKINS
RR0001
BOX 00029
DENTON NE 68339

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 MAY 27 1993

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: 5-26-93

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. 10N ; Range 5E ; Section 32 ;
Block_____; Lot_____; Addition_____
Street Address 1900 W VAN DORN

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: OLD LAGOON SILTED IN

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

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	1500 00

ROBERT ATKINS
Signature of Applicant (owner or lessee)

RT. #1, BOX 29, DENTON, NEBRASKA 68339
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd:_____
Filing Fee: $ 50.00

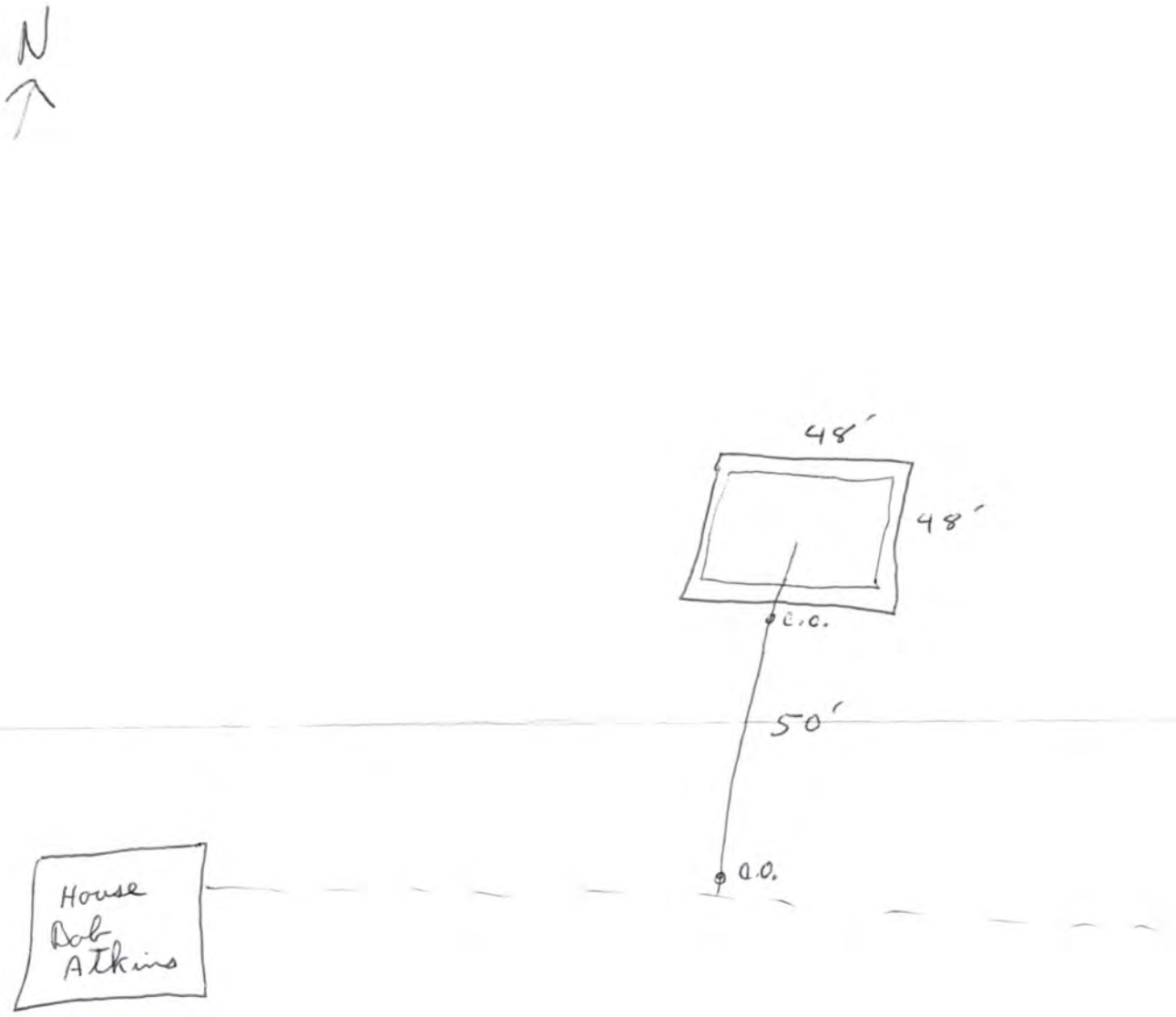
2. Site Visits:
Date: 5/25/93 by: J.C.H.
Date: 5/25/93 by: J.C.H.
Date: 9/7/93 by: J.C.H.

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/7/93 by: J.C.Hood

Larry Schwarck

8-30-93



007

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.

Legal Description of Property: Street Address 12140 West Van Dorn Denton, Ne 68339

Twp 10N Range 5E Section 32 1/4 SW 1/4 Block ___ Lot 36 Addition ___

Directions to Property ___

Location of Well Being Supplied by Seller Tap Location: Inside ☐ Outside ☐

Location of Sewage System ___ Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	Lee and Rhonda Merritt	12140 West Van Dorn Denton Ne, 68339	477-4566
Tenant/Buyer:	Chad A. Deinert	8205 NW 126 Malcolm Ne 68402	796-2219
Return to:	Chad A. Deinert ELLEN HIGH HOME REAL ESTATE	8205 NW 126 Malcolm Ne 68402 3910 SOUTH ST 68506	796-2219

Signature of Applicant Chad A. Deinert Address 8205 NW 126 Malcolm Ne 68402 Date 02/28/97

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 2/28/97
Initials ns
Amount $150.00
Check No. 1688

DATA ENTRY
Date ___/___/___
Case No. ___
Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 3/4/97

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 0.1 ppm	☐ ___ ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☐
Disapproved ☒

Additional Site Visits
Date 3/7/97 by J.C.H.
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: GATE POST ON LAGOON IS BOTTED OFF AT BOTTOM. FENCE HAS BEEN DRUG DOWN NEEDS TO BE PULLED UP. 3/7/97 Lagoon corrected, J.C.H. See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 3/7/97

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

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Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

This form must be completed and returned 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.

☑ Evaluation of the Individual Water System ☑ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 11900 West Van Dorn

Twp 10N Range 5E Section 32 1/4 SW 1/4 ___ Block ___ Lot 36 Addition ___

Directions to Property 2 1/2 miles west of spur 55A on West Van Dorn. North side of W. Van Dorn.

Location of Well SE Corner of Morton Building Tap Location: Inside ☑ Outside ☐

Location of Sewage System North of House Year Installed 1993

	NAME	ADDRESS	PHONE
Present Owner:	Bob & Donna Atkins	11900 West Van Dorn	475-1255
Tenant/Buyer:			
Return to:	Wm. Lee Merritt	Suite 1500, 206 So. 13th St. Lincoln, Nebraska 68508	474-0321 HOOSE 477-4566

Signature of Applicant Wm Lee Merritt Address " " Date 8/26/93

HEALTH DEPARTMENT USE ONLY

Date Received 8/30/93 Received $150.00 Check ☑ Cash ☐

PRELIMINARY STATUS--By Gerrold C. Hood **DATE:** 8/30/93

9/24/93 by J.C.H.

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☐	☒	Approved ☐	Date 8/31/93 by L.C.H.
Bacteria	☒ 0 /ml	☒ 7100 /ml	Provisional ☐	Date 9/7/93 by L.C.H.
Nitrate	☒ <0.1 ppm	☐ ___ ppm	Disapproved ☒	Date 9/23/93 by L.C.H.

Comments: LAGOON IS NOT FENCED YET. ~~AS BUILT DRAWING HAS NOT BEEN RECIEVED.~~ WELL CAP IS LOOSE. TWO BOLTS BROKE OFF IN CAP. Well repaired 8/31/93 L.C.H. Lagoon finished 9/7/93 L.C.H. See Attached Letter ☐

FINAL STATUS

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

Approved by Gerrold C. Hood R.E.H.S. Date 9/27/93

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.

NO EVIDENCE OF VOLITILE ORGANIC CHEMICALS OR PESTICIDES IN SAMPLE ANALYSIS. (SEE ENCLOSED COPIES OF TESTS.)

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