REC'D JAN 23 1985

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. 2172-C

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

DATE: 1-21-85

Betty Loudin

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. 11N ; Range 8E ; Section 17 ;
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: Total Replacement from 4' outside of house

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

6. Estimated cost of project:

a. Materials	$	MORE THAN 400.00
b. Labor	$	
c. Other	$	
TOTAL	$	

_____
Signature of Applicant (owner or lessee)
Strohmyer Exc. By Tom Schiroff

Address 4401 N 27th Lincoln.

(Do not write below this line)

REVIEWING ACTION

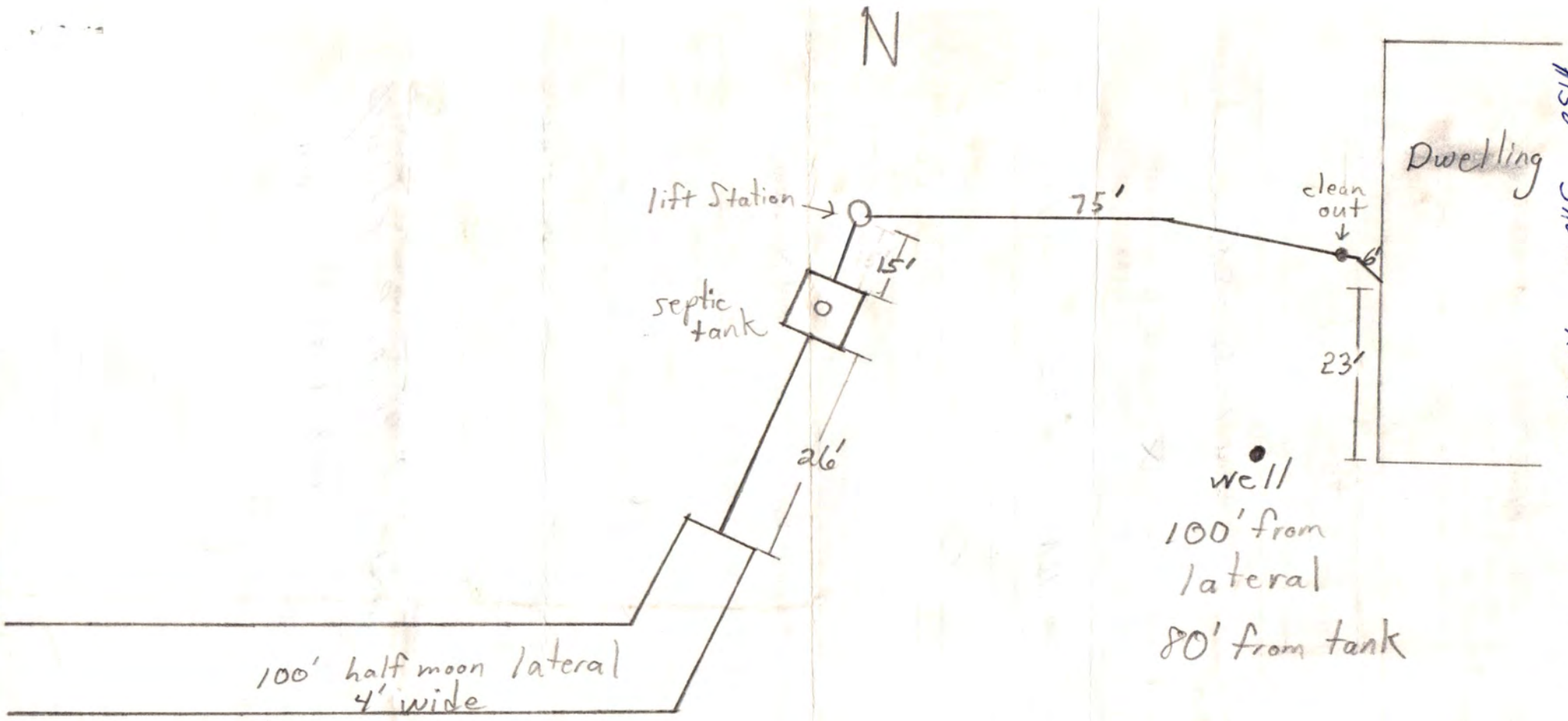
1. Date Rec'd: _____
Filing Fee: $ _____

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

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

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

* DISAPPROVED BECAUSE IT IS IN FLOOD PLAIN. ALLOWED TO REMAIN HOWEVER, SINCE IT IS AN OLD PREEXITING HOUSE.



Also show location of well