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. 92390027001

Issued 03/25/92
Expires 09/25/92

ESTABLISHMENT

MARK SOUTHWICK
T10N R6E SEC 19 QTR NE
1640 NW 48 STREET

FEES: Permit 018754 $50.00

Total $50.00

PERMITTEE

MARK SOUTHWICK
1020 N 52 ST
LINCOLN NE 68504-3221

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
3-26-92	

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 [X]
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: MAR. 12, 1992

The undersigned hereby applies for a permit to ALTER [ ], EXTEND [X], or REPAIR [X] 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 6E; Section 19, NE 1/4;
Block_____; Lot_____; Addition_____
Street Address 1640 N.W. 48th

2. Property Use: Residential [X]; Commercial [ ]
No. Bedrooms 3
Describe_____
Other Use [ ]
Describe_____

3. Type of existing Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Description of proposed alteration, extension or repair: repair Incoming Line, 8 FT add Dist. Box and 900' of Perforated Pipe Lateral 3X100'-2 Pitches.

5. Work to be done by: Owner [ ]; or Contractor [ ], A-1ST RATE Pumping Service
Contractor's Name

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	OVER $ 400

Mark V. Lorenzen
Signature of Applicant (owner or lessee)

1090 N. 52 Lincoln, Ne 68
Address

(Do not write below this line)

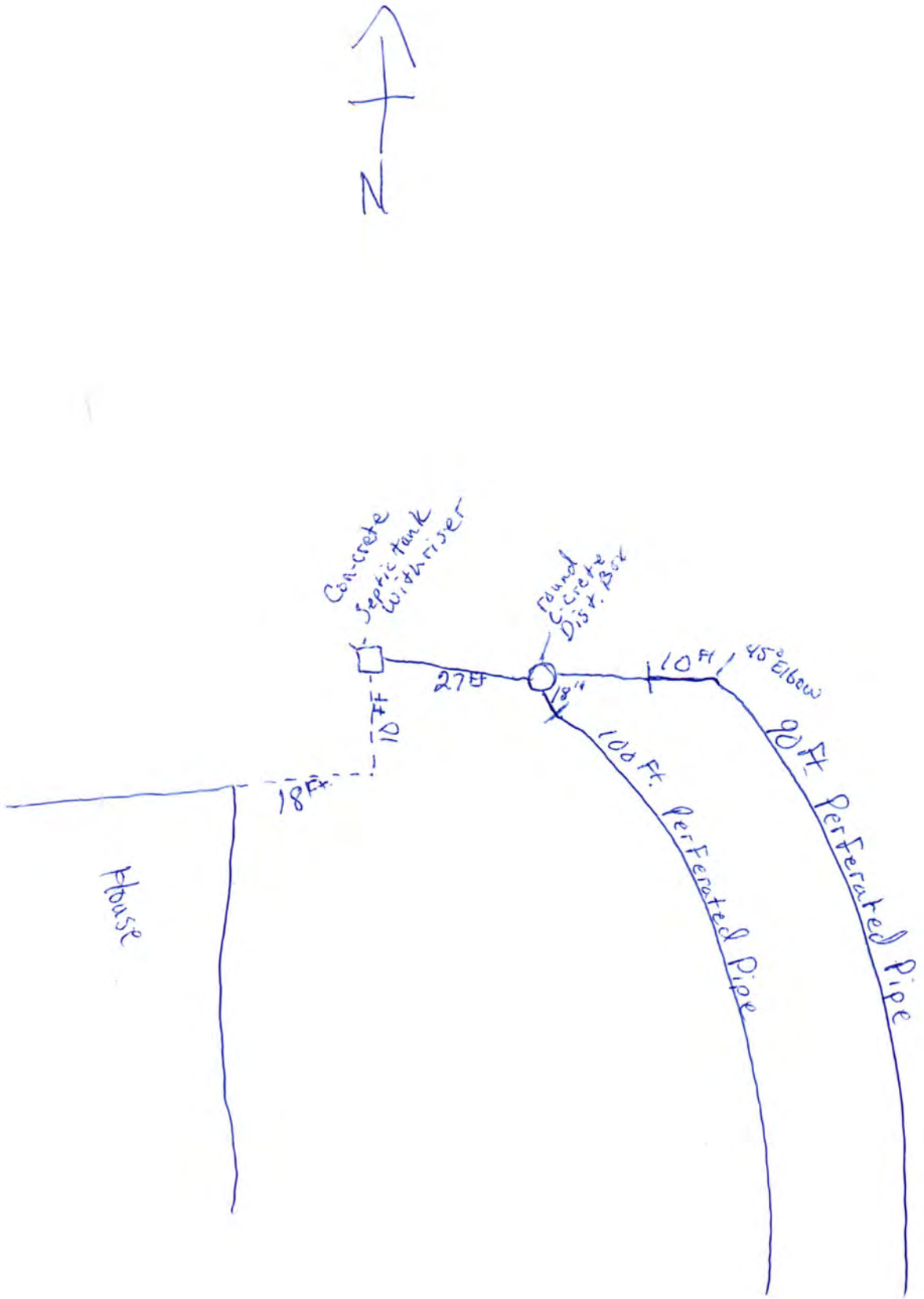
REVIEWING ACTION

1. Date Rec'd: 3-12-92
Filing Fee: $ 150

2. Site Visits:
Date: 3-12-92 by: mm
Date:_____ by:_____
Date:_____ by:_____

3. Date: Approved [X]; Disapproved [ ]
by: Ron Mayent

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 3-12-92 by: Ron Mayent


N
Concrete septic tank w/ riser
round Concrete Dist. Box
27 Ft
10 Ft
45° Elbow
18"
100 Ft. Perforated Pipe
90 Ft Perforated Pipe
10 Ft
18 Ft.
House

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER /

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: 11-18-91

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

Legal Description of Property: TWP. 10 ; RANGE 6 ; SECTION NE¼ 19 ; BLOCK ___

LOT 404 44 ; ADDITION _____ ; Street Address 1640 NW 48

Directions to Property West O to NW 48 - North To 1640
1st place Eastside after I80

Location of Well 2. Tap Location: Inside ☒ Outside ☐

Location of Sewage System East of house Year Installed 1976-?

	NAME	ADDRESS	PHONE
Present Owner:	Veterans Administration c/o	4444 O St 68510	475-4444
Tenant/Buyer:	To be determined		
Return to:	Century Realty Harry Rotthaus	same 4444 O St.	same 483-4308

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

Signature of Applicant Harry E. Rotthaus Address 4444 O St

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HEALTH DEPARTMENT USE ONLY

Date Received 11-18-91 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 11-19-91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction 2.	☒	☐	Approved: 2.	☐	Date 11-19-91 by rm
Bacteria	☒	☐	Provisional:	☐	corrected Date 12-2-91 by rm
Nitrate	☒	☐	Disapproved:	☒ 3-12-92	Date 3-25-92 by rm

Comments: Construction of this septic system apparently predates regulations, thus a provisional approval. There was no visible evidence of malfunction at the time of inspection* Recommend checking to see if septic tank needs pumping. * the unavailability of malfunction on 2-26-92 3-5-92 rm See Attached Letter ☐

3-12-92 rm

FINAL STATUS

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

APPROVED BY Ron Mayont R.S. DATE 3-12-92

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