CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

FILE NO. 585

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF LICENSE OR PERMIT

September 6, 1975
THIS LICENSE OR PERMIT EXPIRES

Bob Gilliam — Route #7, Lincoln
LICENSEE OR PERMITTEE — ADDRESS

TION; R6E; Sec. 31; Bl. 1; Lot 2; High Ridge West Acres 1st Add.
NAME OF ESTABLISHMENT, IF ANY — ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
624-1535	10.0116	24.0114	6-2

SERIAL NO.	DATE	AMOUNT
34704	9-6-75	30.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☒

County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 585

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

DATE: Mar. 6, 1975

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 10N ; Range 6E ; Section 31
Block 1 ; Lot 2 ; Addition High Ridge West Acres 1st Addition
Street Address _____

2. Property Use: Residential _____ ☒ ; Commercial _____ ☐
No. of Bedrooms 3 . Describe: _____
Other Use _____ ☐
Describe: _____

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

4. Distance to public sewer: _____ ft.

Mrs. Bob Gilliam
Signature of Applicant (Owner or Lessee)

Rt. #7 Lincoln
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 3/6/75 . Date Frwd. 3/6/75 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 3-6-75 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: Ernest D. Timm

3. City ~~or County~~ Engineer : Date Rec'd. 3-6-75 . Date Frwd. 3-6-75 . ACTION: Approved ☒ Disapproved ☐ Signature: A. Long

REMARKS OR REASONS FOR DISAPPROVAL _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT 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 Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. _____

DATE: _____

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 10N ; Range 6E ; Section 31 ; Block 1 ; Lot 2 ; Addition High Ridge West Acres 1st Addition
Street Address _____.

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. of Bedrooms 3
Describe: _____
Other Use _____
Describe: _____

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

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Mrs. Bob Gillam
Signature of Applicant (owner or lessee)

Rt. #7 Lincoln
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd; _____
Filing Fee: $ 30.00

2. Site Visits:
Date: July-11-75 by: rm
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ] 3/6/75
by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: July-11-75 by: Ron Mazuret

Lot 2, Block 4, High Ridge West 1st addition

12 / 8 = 1 4/8 acres

1 $13\frac{3}{4} = \frac{6}{8} = 1\frac{1}{8}$ 1.1250

2 $13\frac{5}{8}$ $11\frac{7}{8} = 1\frac{3}{4}$ 1.75

3 $10\frac{3}{8} = \frac{1}{2}$ $9\frac{7}{8}$ .5

4 $12\frac{1}{4} = \frac{3}{4}$ $11\frac{1}{4}$ .75

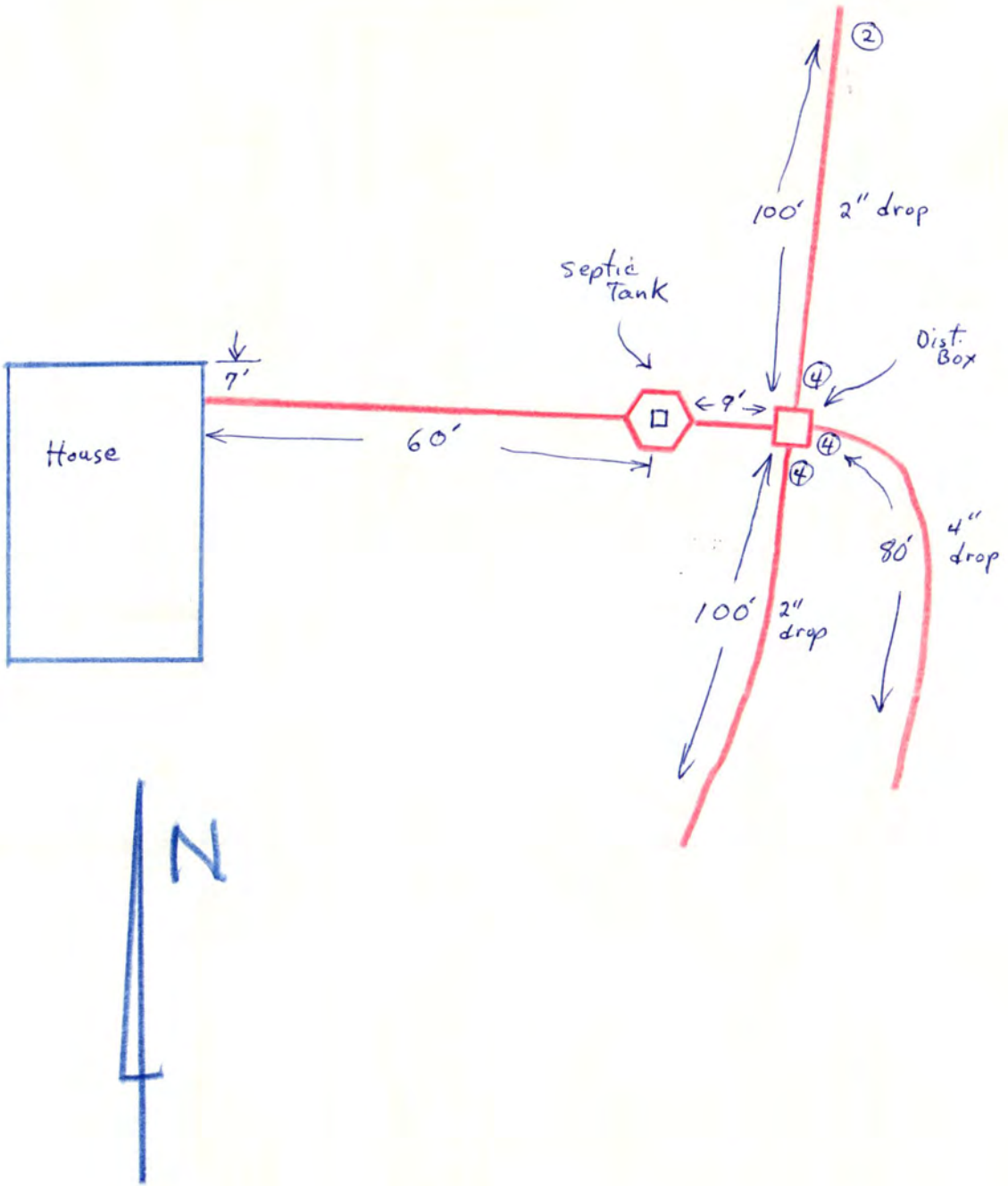
5 $8\frac{7}{8} = \frac{7}{8}$ $8\frac{1}{2}$ .3750

3,3 = 277
3,4 208

6 $9\frac{1}{4}$ $8\frac{3}{4} = \frac{1}{2}$ .5

37 min/in

0.833


②
100'
2" drop
septic Tank
Dist. Box
④
7'
9'
House
60'
④
④
4" drop
80'
100'
2" drop
N

rm
July-11-75

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 474-1541 Lincoln, Nebraska 68502

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: APR. 3, 1980
☑ Evaluation of the Sewage Disposal System ☑ Enclosed is $45.00

Legal description of property: TWP. 10N ; RANGE 6E ; SECTION 31
BLOCK 1 ; LOT 2 ; ADDITION HIGH RIDGE WEST ACRES 1ST ADD
Street Address 4901 W MULBERRY
Directions to Property W. A. TO S.W. 50TH - SW 50TH TO W MULBERRY, TURN LEFT ON RT SIDE OF ROAD
Location of Well FRONT YARD Tap Location: Inside ☒ Outside ☒
Location of Sewage System ~~EAST~~ SIDE OF HOUSE Year Installed 1978

	NAME	ADDRESS	PHONE
Present Owner:	RAY & JAN PORTER	4901 W. MULBERRY	475-7535
Tenant/Buyer:	EDWARD & KATHY VADER	1648 S 20TH	475-1129
Return To:	AUSTIN REALTY CO	3910 SOUTH ST	489-9361

NOTE: Allow two weeks for processing. (4-11-80 if possible) Incomplete information will delay processing.
489-9361 - will pick up.

Signature of Applicant Roger Schlemic Address 3910 SOUTH ST

HEALTH DEPARTMENT USE ONLY

Date Received 4-3-80 Received $45.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 4-8-80

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:	SITE VISIT:
Construction	☒	☐	Approved: ☒	Date 4-8-80 by [illegible]
✓ Bacteria	☒	☐	Provisional: ☐	Date ____ by ____
✓ Nitrate	☒	☐	Disapproved: ☐	Date ____ by ____

Comments: _____

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM:
Approved: ☒

SEWAGE DISPOSAL SYSTEM:
Approved: ☒ Provisionsal Approval: ☐

APPROVED BY Ron Magnuson DATE 4-9-80

FN 20215-1079R