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. 90390021501

Issued 10/25/90
Expires 04/25/91

ESTABLISHMENT
WAYNE MAROLF
T11N R7E SEC 1 QTR SE
RT 3 112 STREET

FEES: Permit 018754 $50.00

Total $50.00

PERMITTEE
WAYNE MAROLF
14440 DANVERS ST
WAVERLY NE 68462

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
10/30/90	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: 10-24-90

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 7E; Section 1;
Block _____; Lot _____; Addition N 1/2 of SE 1/4
Street Address R+3 112th St

2. Property Use: Residential X ☐; Commercial _____ ☐
No. Bedrooms 2
Describe _____
Other Use ☐
Describe _____

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

4. Description of proposed alteration, extension or repair: AT 60' concrete laterals

5. Work to be done by: Owner ☐; or Contractor ☒, Waverly Plumbing & well Mike Dietze
Contractor's Name

6. Estimated cost of project:

a. Materials	$ _____
b. Labor	$ _____
c. Other	$ _____
TOTAL	$ over 400.00

Wayne Marolf
Signature of Applicant (owner or lessee)

Waverly, Nebraska
Address

(Do not write below this line)

REVIEWING ACTION

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

2. Site Visits:
Date: 10/24/90 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/30/90 by: J.C. Hood

Owner
DarLene Markof

Installed
10-24-90

Waverly Plumbing & Well Co
Box 217
Waverly Neb
68462

786-5620

60' concrete
half moon Lateral

15 ton gravel

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