LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit No. 96380145301

SEWAGE INSTALLATION

Issued 07/15/96
Expires 01/15/97
Revenue Code 18754

Establishment

DONNA FAHLESON
T11N R7E SEC 1
LOT 1

FEES: $150.00

TOTAL $150.00

Permittee

DONNA FAHLESON
10105 RAYMOND RD
LINCOLN NE 68517

Issued By M. Jane Ford
Health Director

2360

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $ 150.00

FILE NO. _____

DATE: _____

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

1. Legal description of property: Twp. 11N ; Range 7E ; Section 1 ;
   Block _____ : Lot 1 : Addition NW4 EX A 20.01 AC. TRACT
   Street Address _____

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

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

4. Distance to public sewer: N/A ft.

Donna Fallon
Signature of Applicant (Owner or Lessee)

8105 Raymond Rd Lincoln 68517
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/12/96. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 7/16/96. Date Frwd. 7/16/96. ACTION: Approved ☒ Disapproved ☐ Signature: _____

3. City or County Engineer: Date Rec'd. 7/15/96. Date Frwd. 7/15/96. ACTION: Approved ☒ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 8-1-96 by: RWM [need to build dikes up] [corrected need drawing]
Date: 9-12-96 by: RWM also need fence [bottom of lagoon may not be 2' above groundwater]
Date: 12-10-97 by: RWM fence ok, but

PROVISIONAL

INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 12-12-97 By: Ron Maynard

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

FORM 23-43

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2932 ☐

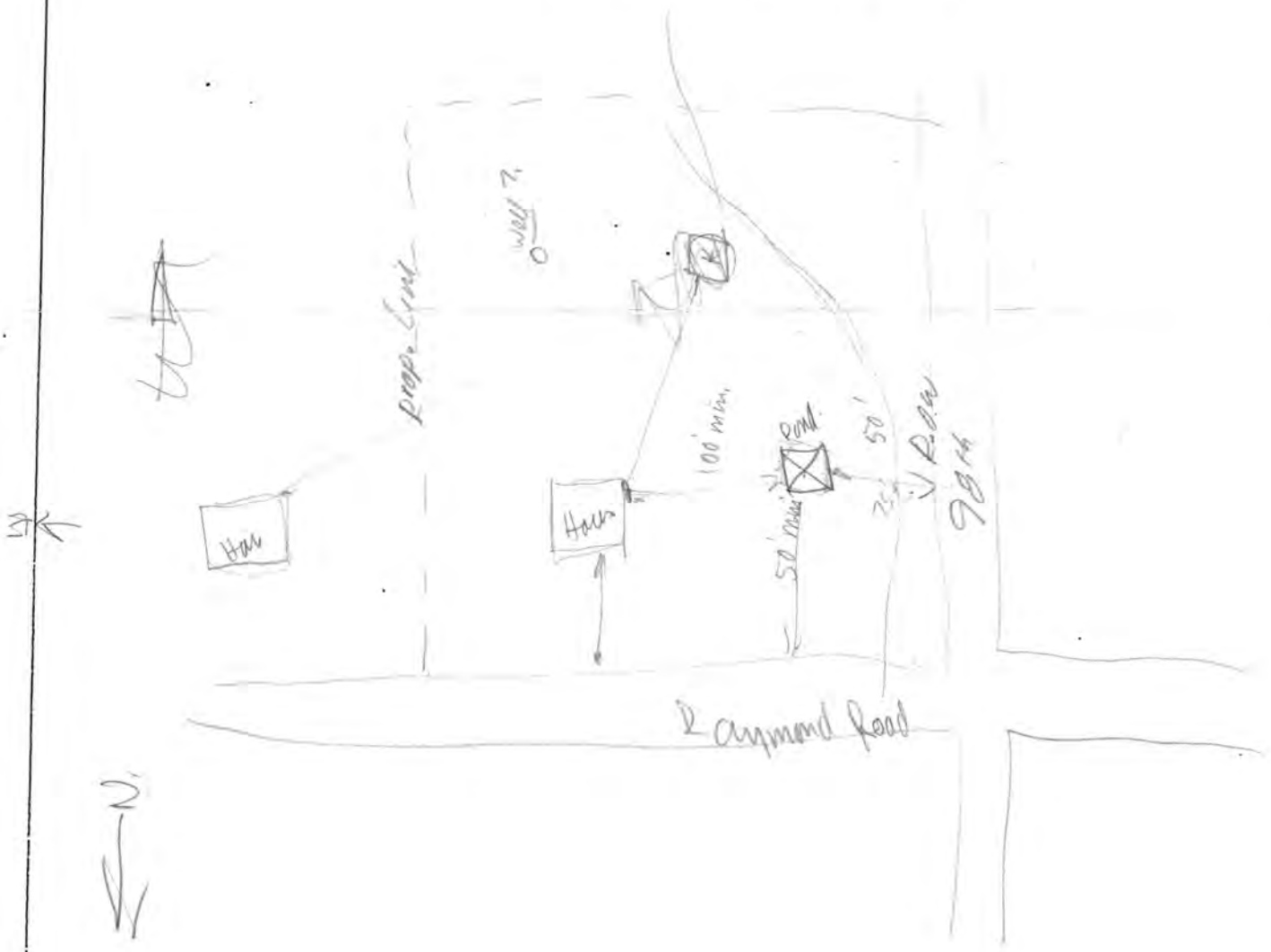
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank _____ gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed _____ sq.ft.

_____
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
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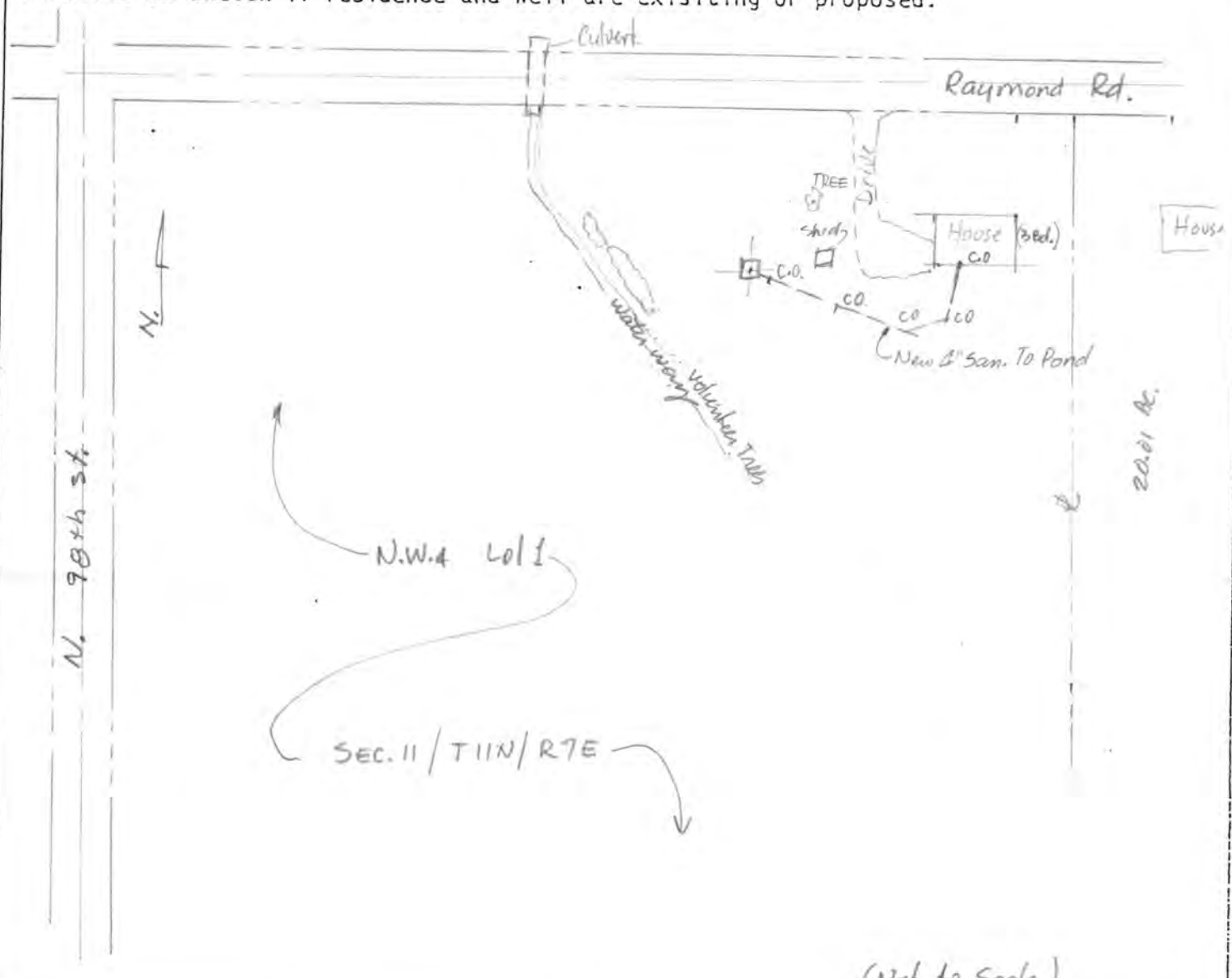
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FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.



(Not to Scale)

REVIEWING ACTION

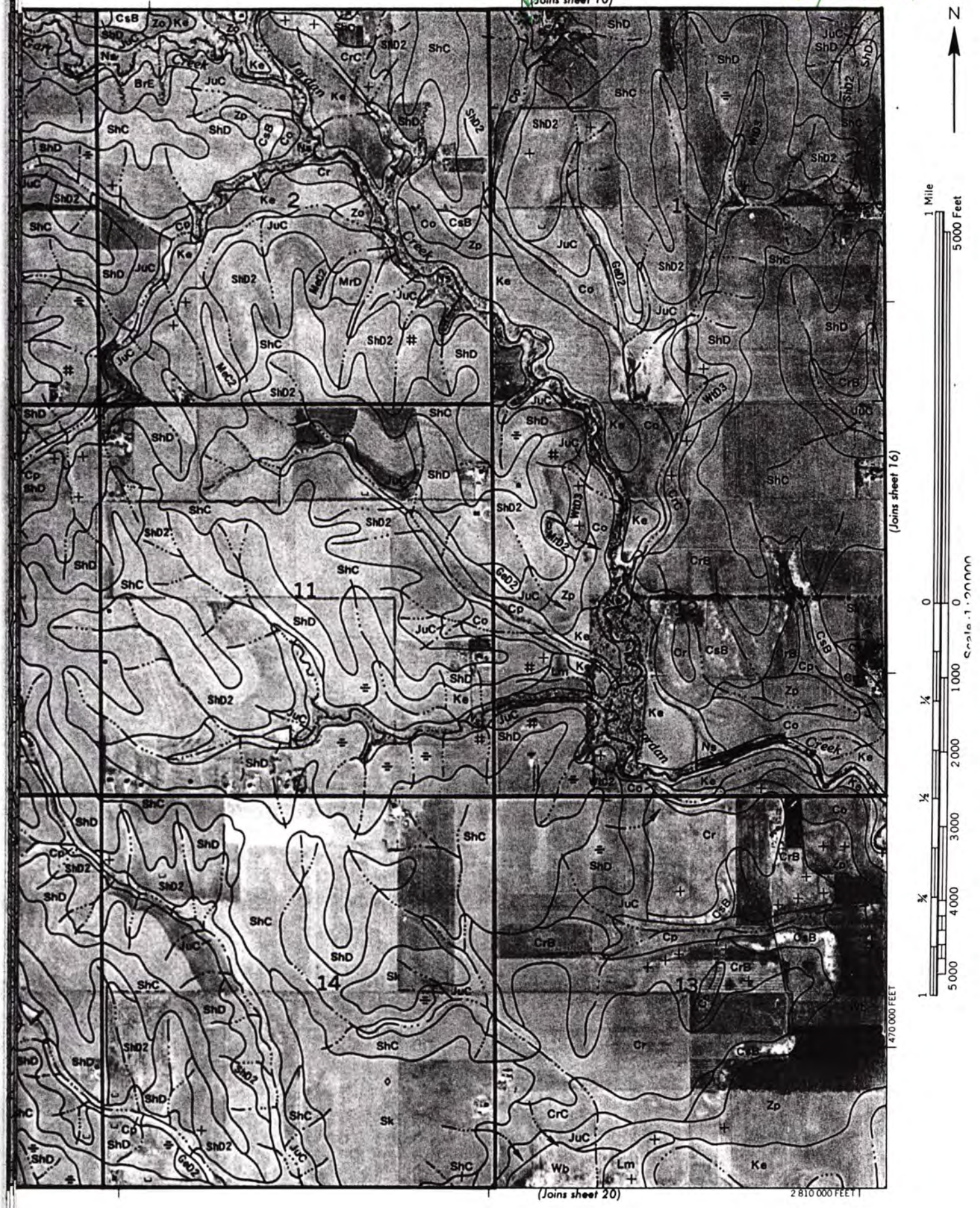
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_____
Signature of Reviewing Official


New lagoon
Raymond Rd
(15)
N
(Joins sheet 10)
(Joins sheet 16)
(Joins sheet 20)
2 810 000 FEET
470 000 FEET
1 Mile
5000 Feet
Scale 1:20000
Jordan Creek
Cart Creek
1
2
11
13
14