Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

009919

(402) 441-8000

Permit
SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

Establishment
FRED RETZLAFF
T10N R7E SEC 2 QTR NW
W 1/2 OF NW 1/4 LOT 21
8601 FLETCHER AVE

Permittee
FRED RETZLAFF
8601 FLETCHER AVE
LINCOLN NE 68507

Permit # 07390086601

Issued 04/12/07
Expires 04/12/08
Revenue Code 3157

FEES: $160.00

TOTAL: $160.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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1 of

Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

❒ Municipal Code 24.38 ❒ County Resolution Number 02-30

The undersigned hereby applies for a permit to: ❒ **ALTER** ❒ **EXTEND** ☒ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

LCR 5453

1. **Legal description of property:**
   Township 10 Range 7 ~~1/4~~ W 1/2 1/4 NW Section 2
   Block _____ Lot 21 Addition _____
   Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 8601 Fletcher Ave

2. **Property use:** ☒ residential ❒ commercial ❒ other use
   Number of bedrooms 5 Describe _____

3. **Type of Present Individual Disposal System** ☒ septic system ❒ lagoon ❒ other

4. **Description of proposed alteration, extension or repair** Existing system Replace Septic Tank with 1500 concrete Tank with Risers & Lids on Top of Tank

5. **Work to be done by:** ❒ owner ☒ contractor's name Doug Loftus

6. **Estimated project:**
   a. Repair, replace, or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A permit is required if the use, operation, location, or type of system is changed.

Print Name Fred Retzlaff Address 8601 Fletcher Av 68507 Phone: 402-466-9585

Applicant Signature (owner or lessee) Fred Retzlaff

Please include the permit fee ($150) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

- No records on current system

Date received 4/9/07 REVIEW: ☒ Approved ❒ Disapproved By: Doug Amen

Site visits
Date ____/____/____ By _____
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date ____/____/____ By _____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

* Covered w/last inspection # VH 4/4/08

Business Office Use Only

Received: Date: 04/12/07 Amount 160.00 Check No. 7592 Initials ss

White - Division Copy Pink - Business Office Revised 9-05