FILE #2386

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

MARCH 22, 1987 — THIS LICENSE OR PERMIT EXPIRES

TENHOSP, C/O LARRY SCHWARCK — LICENSEE OR PERMITTEE

8200 OLD CHENEY RD. LINCOLN, NE 68516 — ADDRESS

T11N; R7E; Sec 22; Lot 4 I.T.; 9300 Bluff Road — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE ALTER, EXTEND OR REPAIR

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 30.00	018754	$ 30.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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. 2386

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

DATE: 9-22-86

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. 11 N ; Range 7E ; Section 22 ;
Block ____; Lot 4 ~~NE 4~~; Addition ____
Street Address 8301 Bluff RD.

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

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

4. Description of proposed alteration, extension or repair: 170' Lateral + DISTRIBUTION BOX.

5. Work to be done by: Owner ☐ ; or Contractor ☒, LARRY SCHWARCK
Contractor's Name

6. Estimated cost of project:

a. Materials	$ 500
b. Labor	$ 870
c. Other	$
TOTAL	$ 1370.

Signature of Applicant (owner or lessee)

RT #3 Lincoln, NE 68505
Address

(Do not write below this line)

REVIEWING ACTION

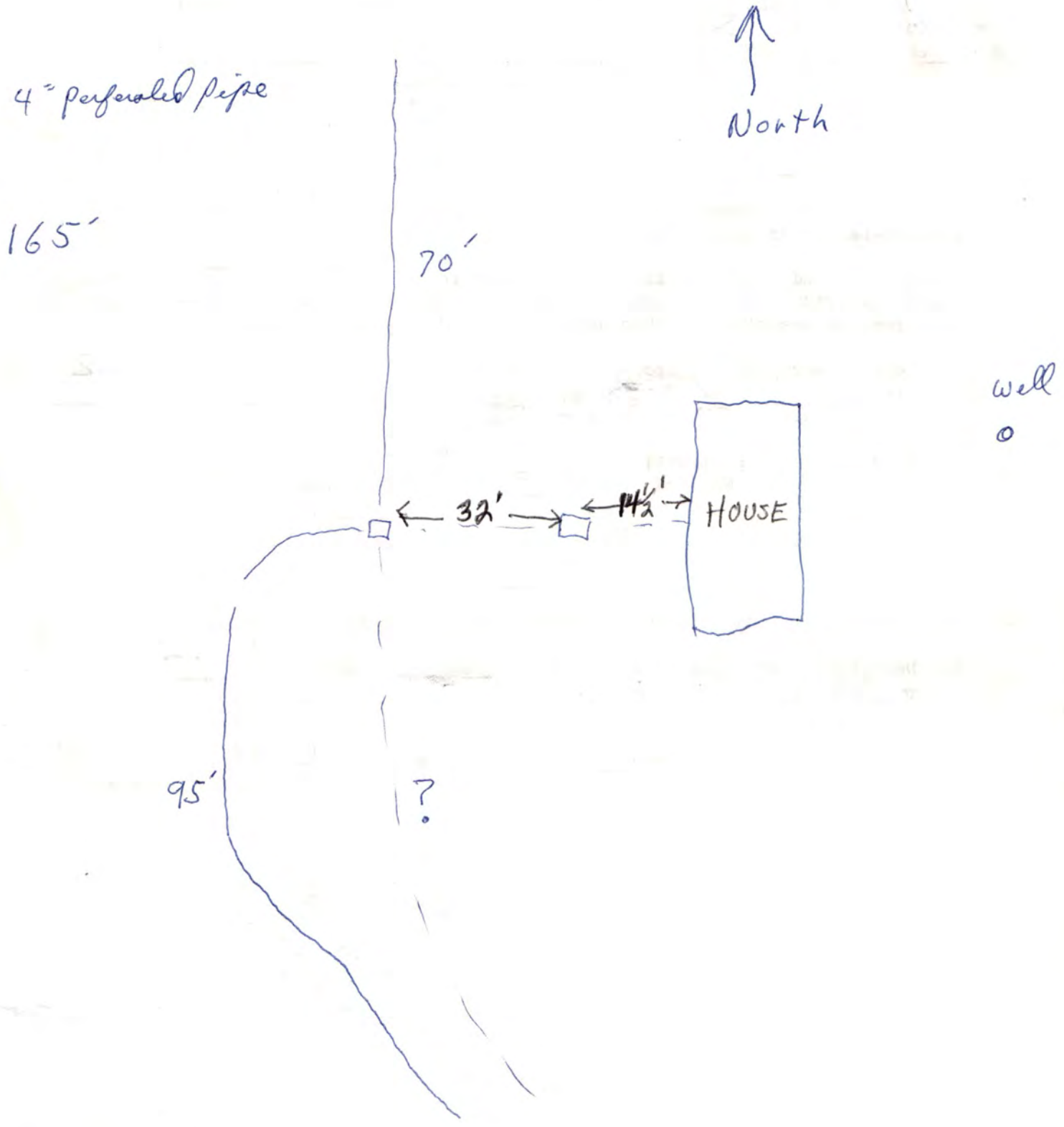
1. Date Rec'd: ____
Filing Fee: $ 30.00

2. Site Visits:
Date: 9/22/86 by: J. C. H. Lateral was covered but had started raining
Date: ____ by: ____
Date: ____ by: ____

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/23/86 by: J. C. Hood

Larry Schwarck. 8301 Bluff Rd.



FILE NO. 1671

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

January 7, 1981 — THIS LICENSE OR PERMIT EXPIRES

L. L. Sintek — LICENSEE OR PERMITTEE

6710 North 7th, Lincoln, NE 68521 — ADDRESS

T11N; R7E; Section 22; L4 I.T. — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NONTRANSFERABLE (Alter and Extend)

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

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
018754	110.16	148.14	6-2

SERIAL NO.	DATE	AMOUNT
55329	JA 7	30.00

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

HEALTH APPLICATION

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: 475-6221)

FILE NO. 1671

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

DATE: 7/7/80

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 22 ;
Block ____ ; Lot H.T. ; Addition ____
Street Address ____

2. Property Use: Residential ____ ☒; Commercial ____ ☐
No. Bedrooms ____ Describe ____
Other Use ☐
Describe ____

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

4. Description of proposed alteration, extension or repair: ____
100 FT LATERAL

5. Work to be done by: Owner ☐ ; or Contractor ☒, SINTEK SERVICE CO.
Contractor's Name

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$ 870.00

T. T. Smith
Signature of Applicant (owner or lessee)

6710 No 7th 475-4486
Address for Woods Bros. Realty
to 27 Plaza

(Do not write below this line)

REVIEWING ACTION

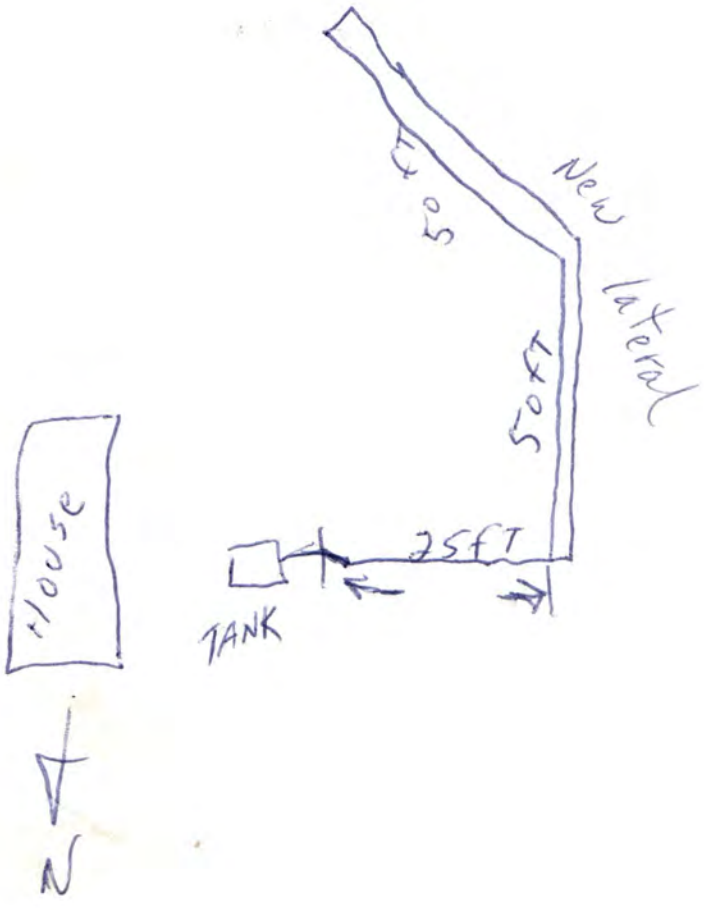
1. Date Rec'd: ____
Filing Fee: $ 30.00

2. Site Visits:
Date: 7-3-80 by: rm
Date: ____ by: ____
Date: ____ by: ____

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

PROVISIONAL

4. INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 7-3-80 by: Ron Maynard


New lateral
50 ft
50 ft
25 ft
TANK
House
N

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

WATER WELL

No. 91400026601

Issued 09/13/91
Expires 03/13/92

ESTABLISHMENT

BECKY SIMPSON
T11N R7E SEC 22

FEES: Permit 019851 $75.00

Total $75.00

PERMITTEE

BECKY SIMPSON
8301 BLUFF RD
LINCOLN NE 68517

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
9/20/91	PAID

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

RECEIVED SEP 1 3 1991

FORM: 20222-0483 REQUEST FOR SITE CLEARANCE AND PERMIT FOR INDIVIDUAL WATER WELL	LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT DIVISION OF ENVIRONMENTAL HEALTH 2200 ST. MARYS AVENUE LINCOLN, NEBRASKA 68502 PHONE: 471-7800
FILING FEE $ [redacted] 75.00	FILE NO. _____

DATE: Sept 11 1991

The undersigned hereby requests: Site Clearance and Permit to construct a new individual water well ☒ ; Permit existing well ☐ ; well repair or alteration involving opening of well ☐ ; in conformance with appropriate ordinance, as described herein:

1. Legal description of property: Twp. 11N : Range 7E : Section 22
   Block _____ : Lot _____ : Addition _____
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: _____ Ft. Don't Know
4. Intended use of well water supply

Becky Simpson
Signature of Applicant (owner or lessee)

hm: 464-5653
wk: 466-8294

8301 Bluff Rd. Lincoln, Neb 68517
Address

City Water Yes ☐ No ☒

Sewage Permit Applied For Yes ☐ No ☐ Not Applicable ☒

1. Health Department: Date Rec'd 9/13/91. Date Frwd. 9/13/91. Action: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hoe
2. Supt. Bldg. Insp.: Date Rec'd 9/13/91. Date Frwd. 9/13/91. Action: Approved ☐ Disapproved ☐ Signature: Gary Lyon
3. City or County Engineers: Date Rec'd 9/13/91. Date Frwd. 9/13/91. Action: Approved ☒ Disapproved ☐ Signature: John D Miniugh

REMARKS OR REASONS FOR DISAPPROVAL old, unused well within 15 ft of house well.

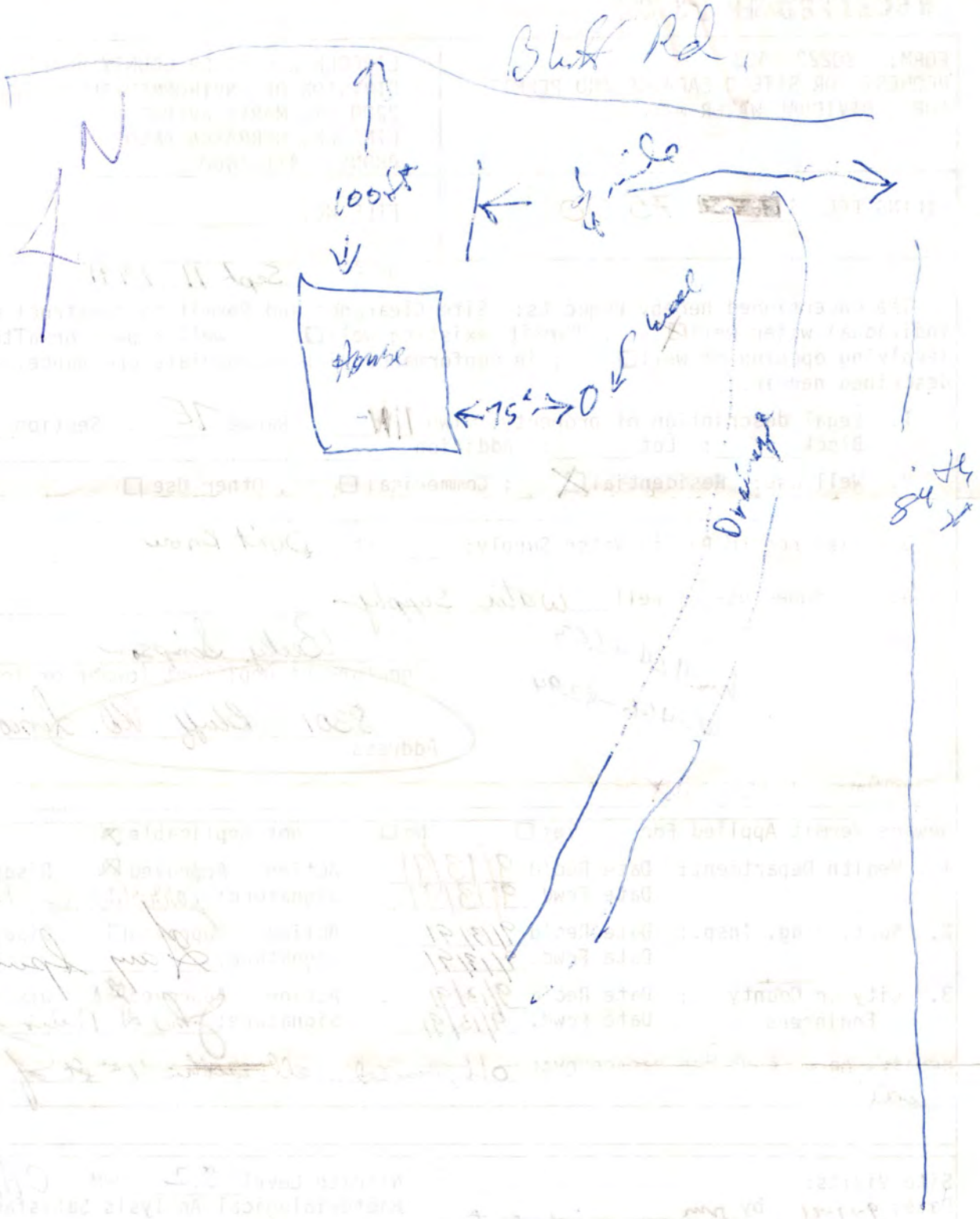
Site Visits:
Date: 9-17-91 by pm
Date: 10-23-92 by pm owner intends to use unused well
Date: _____ by _____

Nitrate Level 0.2 PPM CHLORIDE 144 p.p.m.
Bacteriological Analysis Satisfactory
Yes ☒ No ☐

INSTALLATION FINAL WRITTEN APPROVAL
Date: NOV-5-92 By: Ron Magnuson

Health Department copy: White
Engineers Copy: Light Green
Building Inspectors Copy: Light Blue

FORM 23-13


Bluff Rd.
N
100'
house
75' → 0' west
Driveway
84'