LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE SYSTEM REPAIR

No. 93390032401

Issued 04/26/93
Expires 10/26/93
Revenue Code 19754

Establishment
RONALD MACKEY
T11N R6E SEC 35
GARDEN VALLY BLK 4 LOT 4

FEES: $50.00

TOTAL $50.00

Permittee
RONALD MACKEY
6007 GARDEN VALLEY
LINCOLN NE 68521

Issued By M. Jane Ford
Health Director

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

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: 2-9-93

The undersigned hereby applies for a permit to ALTER [ ], EXTEND [X], 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 6E; Section 35 SE¼SE¼;
Block 4; Lot 4; Addition Garden Valley
Street Address _____

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

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

4. Description of proposed alteration, extension or repair:
ADDED 2 LINES 100' & 50 OF LATERALS - REPLACED DISTRIBUTION BOX
150' TOTAL WITH 18" GRAVEL BASE

5. Work to be done by: Owner [ ]; or Contractor [X]; Sintek Service
Contractor's Name

6. Estimated cost of project:

a. Materials	$	5
b. Labor	$	
c. Other	$	
TOTAL	$	>400

Ronald Mackey — Ronald T. Mackey
Signature of Applicant (owner or lessee)

RR 5 - 6007 No. 14TH Lincoln NE 68521
Address

(Do not write below this line)

REVIEWING ACTION

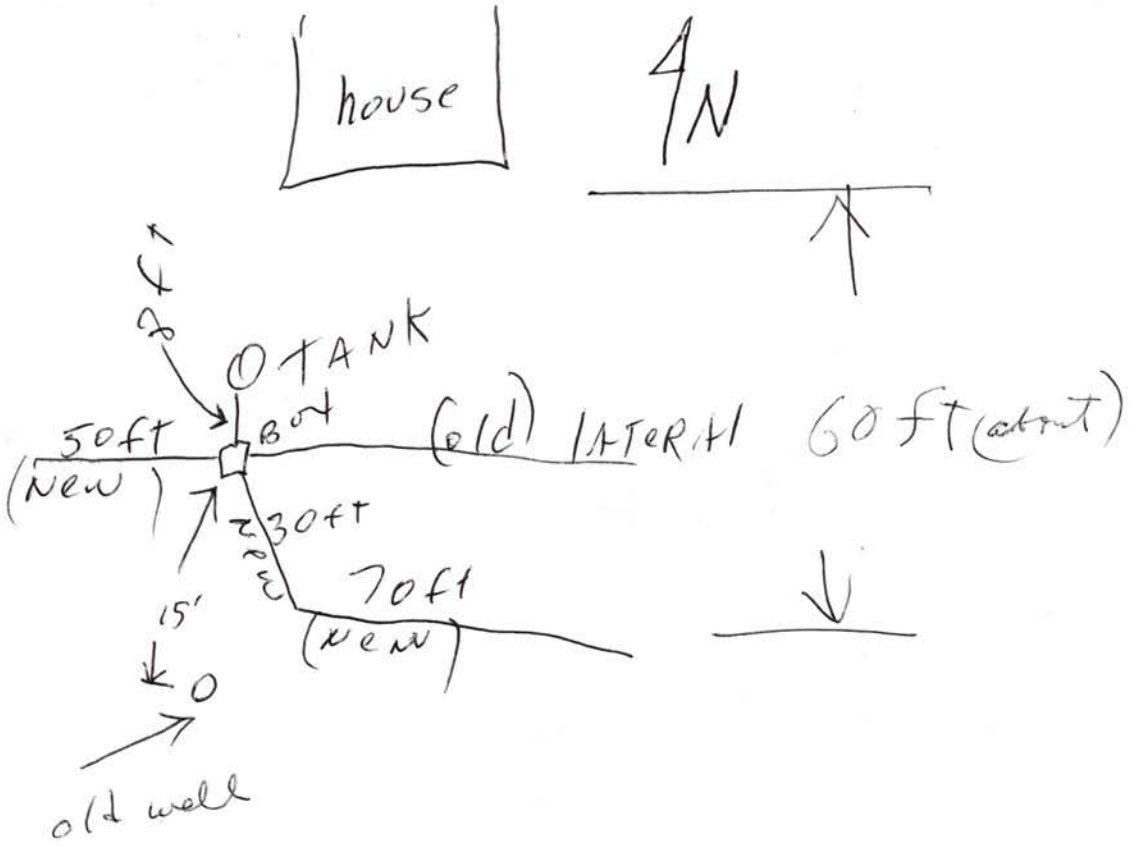
1. Date Rec'd: 2-9-93
Filing Fee: $ 50

2. Site Visits:
Date: 2-9-93 by: rm old well not abandoned & too close to extend
Date: 4-30-93 by: rm well not abandoned Door can't call
Date: 9-17-93 by: rm well abandoned

3. Date: Approved [X]; Disapproved [ ]
by: Ron Mayhew

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-17-93 by: Ron Mayhew

6007 NORTH 14TH ST.



Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☒ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 6007 No. 14TH St. Lincoln NE 68521

Twp 11N Range 6E Section 35 1/4 ___ 1/4 ___ Block 4 Lot 4 Addition Garden Valley

Directions to Property North on 14TH to 14TH & Fletcher. 1ST House North of Interstate on West Side of 14TH. NW Corner of N. 14TH & Fletcher. West of House

Location of Well NE Corner of House. North & Rt of Drive Tap Location: Inside ☒ Outside ☒

Location of Sewage System South & Little West of House Approx 50' on Slope Year Installed Approx 1995-96

Sun Dial Is On Top of Cover to Septic Tank

	NAME	ADDRESS	PHONE
Present Owner:	Ronald L. Mackey	6007 No. 14TH	402-476-2982
Tenant/Buyer:			
Return to:	Ronald L. Mackey	6007 No. 14TH St. Lincoln NE 68521	402-476-2982

Signature of Applicant Ronald L. Mackey Address 6007 N. 14TH Lincoln NE 68521 Date 05 / 15 / 98

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 5 / 18 / 98

Initials MS

Amount $150.00

Check No. 233

DATA ENTRY

Date ___ / ___ / ___

Case No. ___

Initials ___

PRELIMINARY STATUS--By Ron Marquart **DATE:** 5 / 18 / 98

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM		Additional Site Visits
Construction	☒	☐ shock treatment corrected bacterial positive	Approved	☐	Date 5 / 22 / 98 by RM
Bacteria	☒ 0 /ml	☒ present /ml	Provisional	☒	Date 5 / 26 / 98 by RM
Nitrate	☒ <0.1 ppm	☐ ___ ppm	Disapproved	☐	Date 5 / 27 / 98 by RM

Comments: In 1993 a repair permit was approved to extend the original septic system by 150 feet of drainfield laterals. The original installation predated regulations and no record of a permit or inspection can be found. Thus, a provisional approval. There was no visible malfunction at the time of inspection. ☐ See Attached Letter

Recommend checking to see if septic tank needs pumping every 2-3 years.

FINAL STATUS

WATER SYSTEM: Approved ☒ **SEWAGE DISPOSAL SYSTEM:** Approved ☐ Provisional Approval ☒

Approved by Ron Marquart Date 5 / 29 / 98

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 10-95