LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

P E R M I T

Permit SEWAGE SYSTEM REPAIR

No. 93390032801

Issued 05/27/93
Expires 11/27/93
Revenue Code 18754

Establishment LARRY SINTEK
T11N R6E SEC 35
6100 N 1 STREET

FEES: $50.00

TOTAL $50.00

Permittee LARRY SINTEK
6710 N 7TH ST
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 [X]
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: 5-25-93

The undersigned hereby applies for a permit to ALTER [ ], EXTEND [X], or REPAIR [X] 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, SW¼ ;
Block_____; Lot_____; Addition_____
Street Address 6160 N. 1st St.

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: Add 100 ft 3 Wide LATERAL

5. Work to be done by: Owner [ ] ; or Contractor [X], SINTEK SERVICE
Contractor's Name

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	over $400

Larry Sintek
Signature of Applicant (owner or lessee)

6710 N 7th
Address Lincoln, NE 68521

(Do not write below this line)

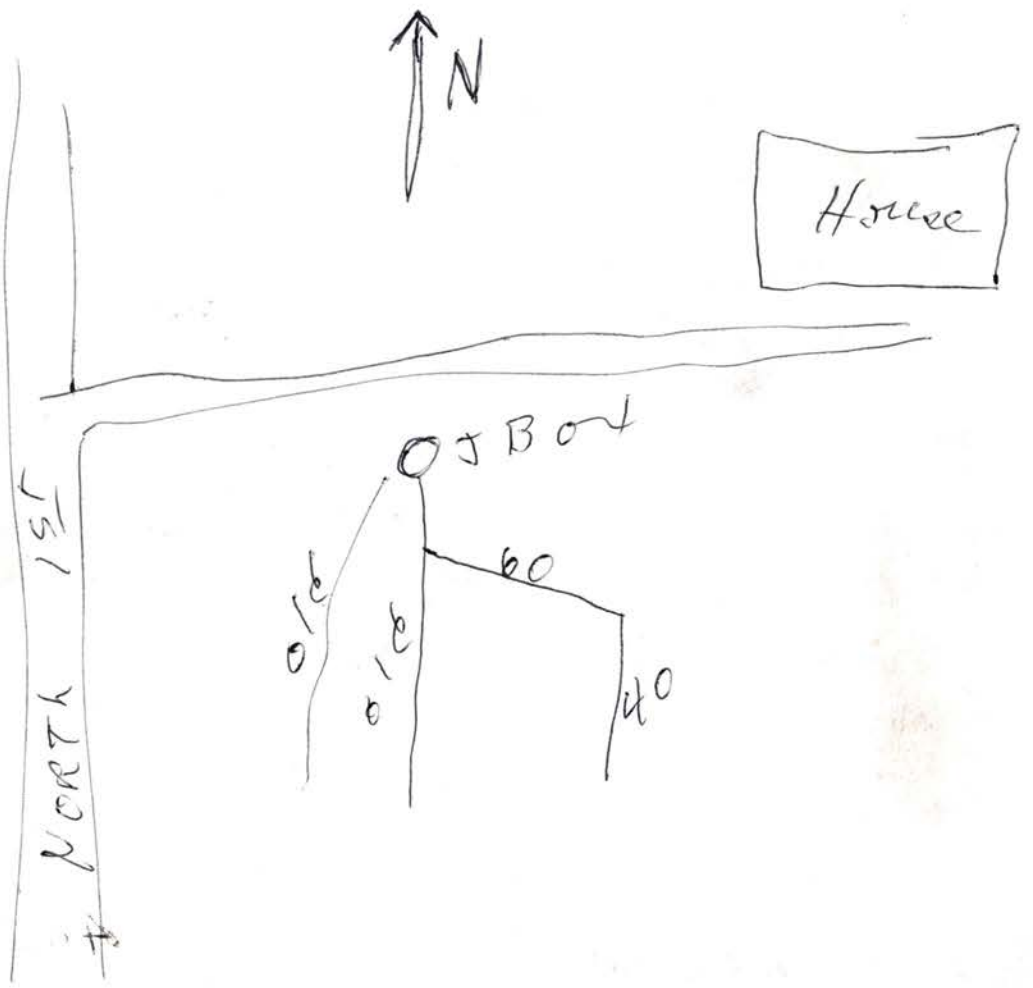
REVIEWING ACTION

1. Date Rec'd: 5-25-93
Filing Fee: $ 50.00

2. Site Visits:
Date: 5-25-93 by: [illegible]
Date:_____ by:_____
Date:_____ by:_____

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-10-93 by: Ron Magnuson



Well

MORE THEN 100 ft.

1777

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

November 11, 1981 — THIS LICENSE OR PERMIT EXPIRES

GORDON JOHNSON — LICENSEE OR PERMITTEE

ROUTE 5, LINOOLN NE 68508 — ADDRESS

T11N, R6E, Section 35, Addition Cumberland Heights — NAME OF ESTABLISHMENT, IF ANY

Lot 25 — ADDRESS

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 30.00	$	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE	
018854	110.16	148.14	6-2	
SERIAL NO.	DATE	AMOUNT		

57305 11 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. 1777

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

DATE: 4-28-81

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 6E; Section 35;
Block ____; Lot 25; Addition Cumberland Heights
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: Dist Box & 100' Lat 3' Wide

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

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$ 937.00

Gordon Johnson
Signature of Applicant (owner or lessee)

RR 5 Lincoln, Nebr 68508
Address

(Do not write below this line)

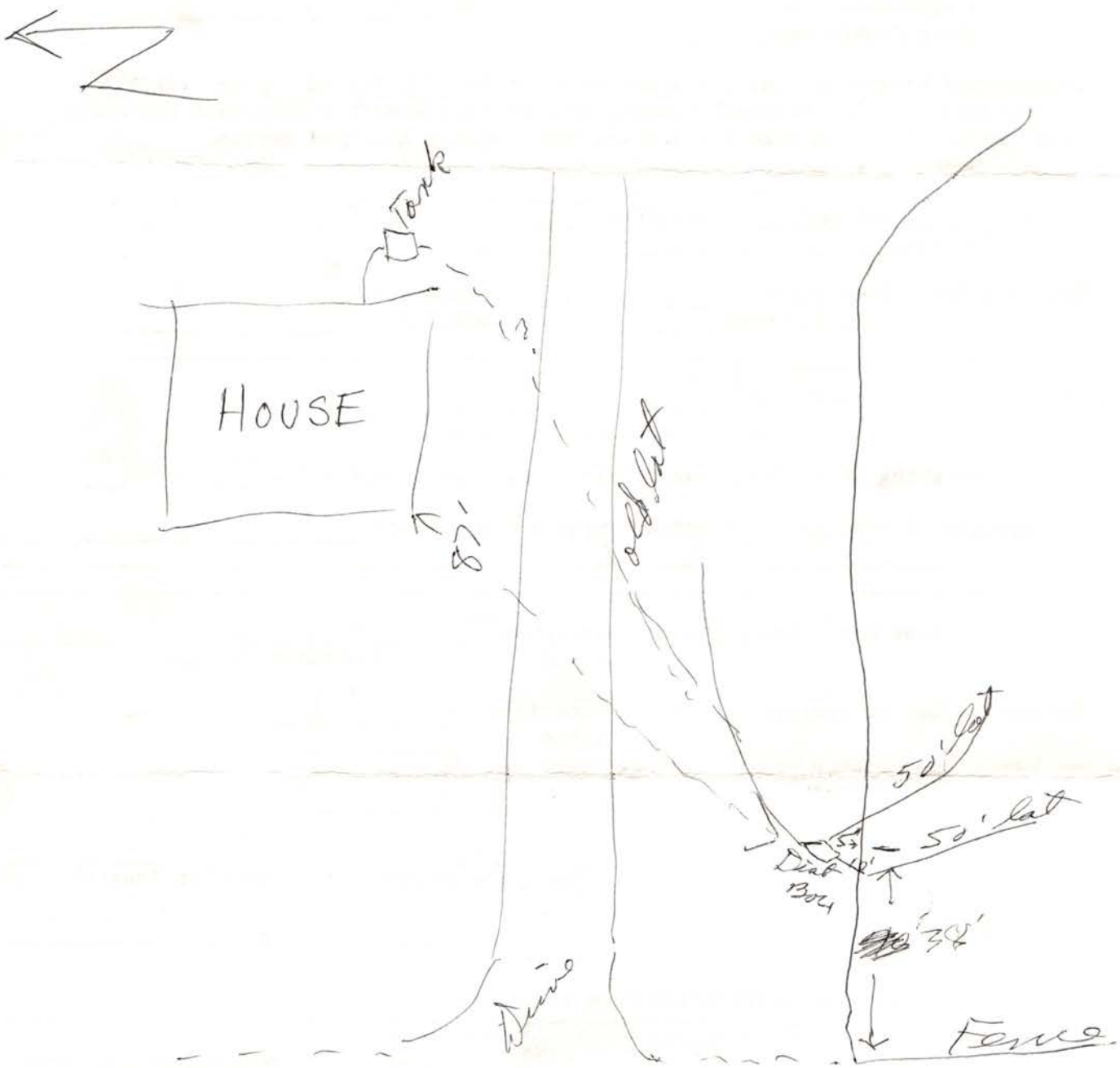
REVIEWING ACTION

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

2. Site Visits:
Date: 5/11/81 by: J.C.H.
Date: 5/11/81 by: J.C.H.
Date: ____ by: ____

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 5/11/81 by: J.C. Hood


N
Tank
HOUSE
13'
60'
8" Sewer Line
50' Leach
50' Leach
Drive
Fence