LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit No. 96390053001

SEWAGE SYSTEM REPAIR

Issued 11/01/96
Expires 05/01/97
Revenue Code 18754

Establishment

ROBERT BROPHY
T11N R6E SEC 7
303 W MILL ROAD

FEES: $50.00

TOTAL $50.00

Permittee

ROBERT BROPHY
5303 W MILL RD
RAYMOND NE 68428

Issued By M. Jane Ford
Health Director

2756

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

OCT 3 1 1996

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

3140 "N" STREET LINCOLN, NE 68510-1514

$50.00 fee #3762 10/31/96 ao

FILE NO. _____

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

DATE: 10-28-96

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 7;
Block _____; Lot _____; Addition _____
Street Address 5303 W Mill Road — See Attached Survey

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: Install a Waste Stabilization Pond to Replace Septic System

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

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	10000 00 Estimate

Robt C Brophy (Robert C Brophy)
Signature of Applicant (owner or lessee)

5303 W Mill Rd Raymond, Ne 68428
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ _____

2. Site Visits:
Date: 11-14-96 by: rwm need Smear at to seal lagoon Shortsburg Coal
Date: 4-10-98 by: rm need Shortsburg coal
Date: 6-26-98 by: rm OK Pats, Cathy seal & seal

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-26-98 by: Ron Mayer

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

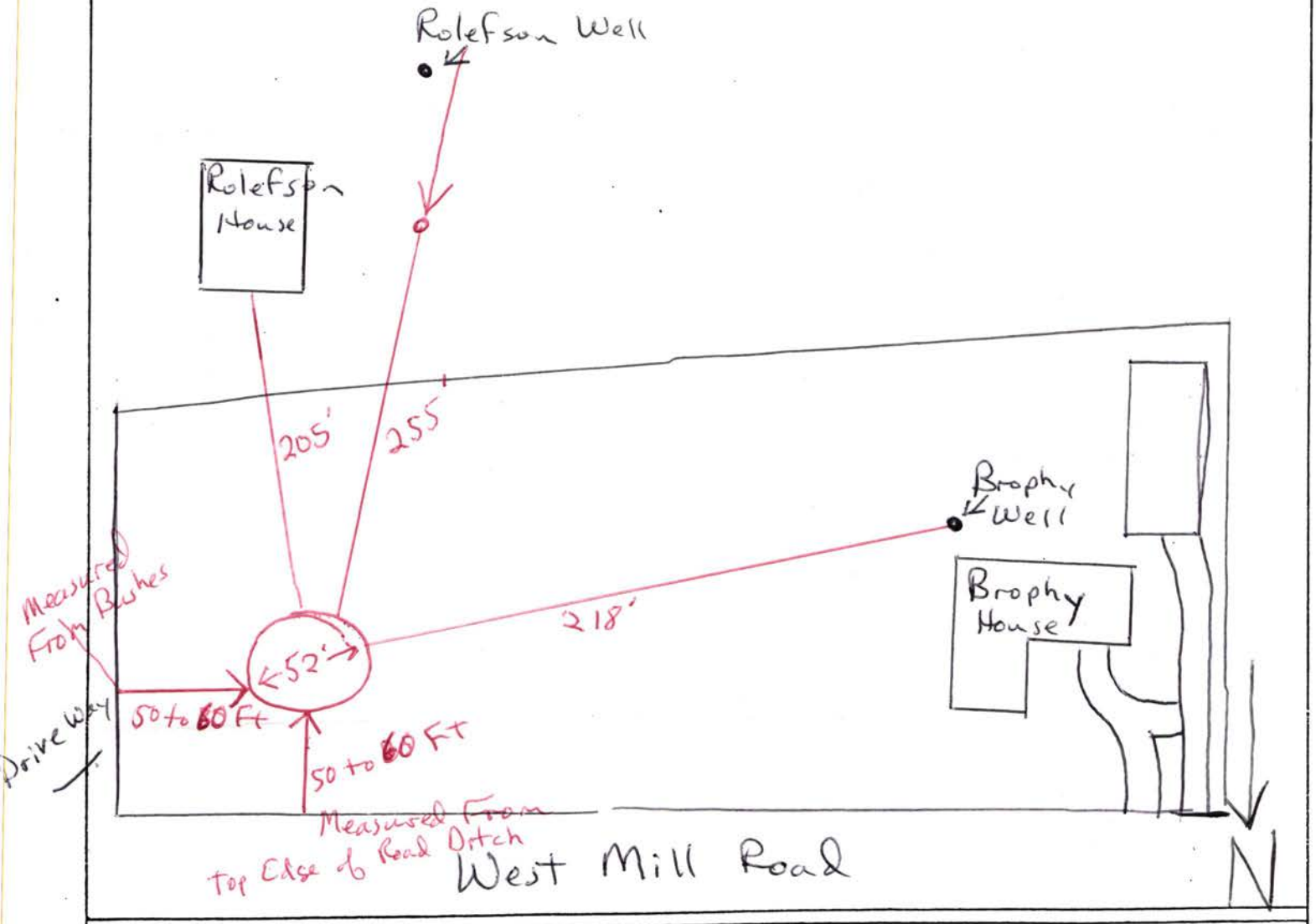
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510 OCT 31 1996
(402)-441-8022

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

Plot Plan

OCT 3 1 1996

LANCASTER County, Nebraska

ALLIED SURVEYING AND MAPPING, INC.
LAND SURVEYORS
6120 South 58th Street - Suite "A" - Lincoln, Nebraska 68516
Phone (402) 434-2686
FAX (402) 434-2687

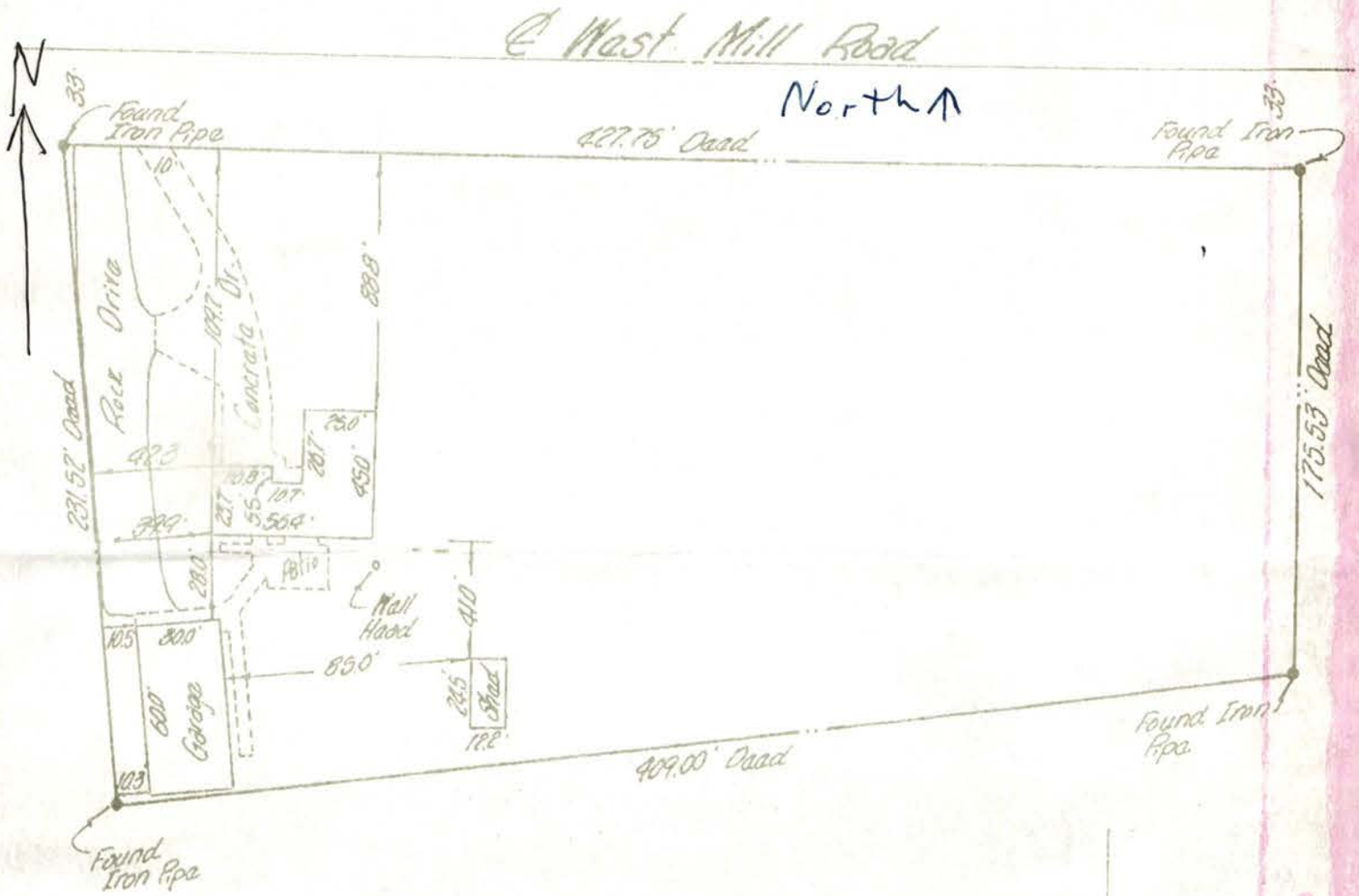
Sheet 1 of 1

5303 West Mill Road - Lot 19 of Irregular Tract located in the East One-Half of the Northwest Quarter of Section 7 T 11 N, R 6 E of the 6th P.M

Job No. 23128

March 15, 19 96

Buyer/Robert C. Brophy 65662



This property appears to be located in BOTH zone "B", (500 year flood plain and in zone "C" (Not in the flood plain) on Flood Rate Map, Community #310138, Panel #0001-B, Effective 8-3-1981. The very East Edge of this property is the portion that appear to be in zone "B" and does not affect any structures or improvements.

N

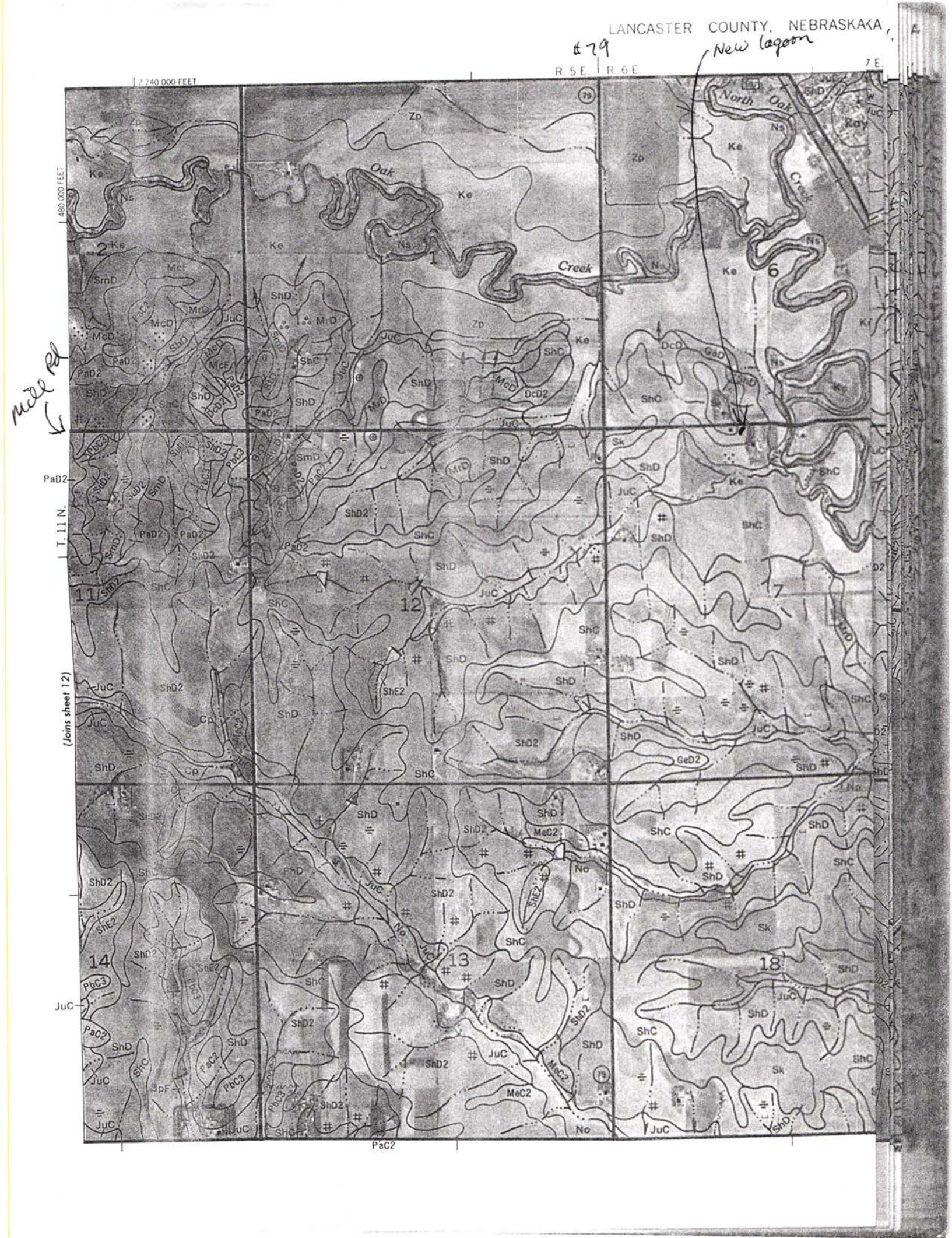
Scale: 1" = 60'

NEBRASKA REGISTERED LOCATION CERTIFICATION

This inspection and the accompanying plat is true and correct to the best of our knowledge and belief and were prepared for mortgage title insurance only. This does not constitute a boundary survey and is subject to any inaccuracies that a subsequent boundary survey may disclose; no property corners were set, and is not to be used or relied upon for the establishment of any fence, structure or other improvements.

Kenneth W. Almond

Date March 15, 19 96


LANCASTER COUNTY, NEBRASKA
#79
New lagoon
R. 5 E.
R. 6 E.
7 E.
2 740 000 FEET
480 000 FEET
T. 11 N.
(Joins sheet 12)
North Oak Creek
Oak Creek
Ray
Zp
Ke
Ns
Sk
McD
McF
MrD
SmD
ShD
ShC
ShD2
ShE2
PaD2
PaC2
PbC3
JuC
DcD2
GeD2
MeC2
No
Cp
BpF
1
2
6
7
11
12
13
14
18

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

SEWAGE SYSTEM REPAIR

No. 90590019901

Issued 08/14/90
Expires 02/14/91

ESTABLISHMENT

C. VERNON NELSON
11N R6E SEC 7 QTR NW

FEES: Permit 018754 $50.00

Total $50.00

PERMITTEE

C. VERNON NELSON
RR0001
BOX 00105
RAYMOND NE 68248

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
8/22/90	PAID

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

9039000199

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: _____

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 7 E½ NO¼
   Block _____; Lot _____; 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: Add 100 ft of lateral

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

6. Estimated cost of project:

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

G Vernon Nelson
Signature of Applicant (owner or lessee)

Raymond, Nebr RR 1 Box 105
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: 8-14-90
   Filing Fee: $ 50.00

2. Site Visits:
   Date: 8-14-90 by: [illegible]
   Date: _____ by: _____
   Date: _____ by: _____

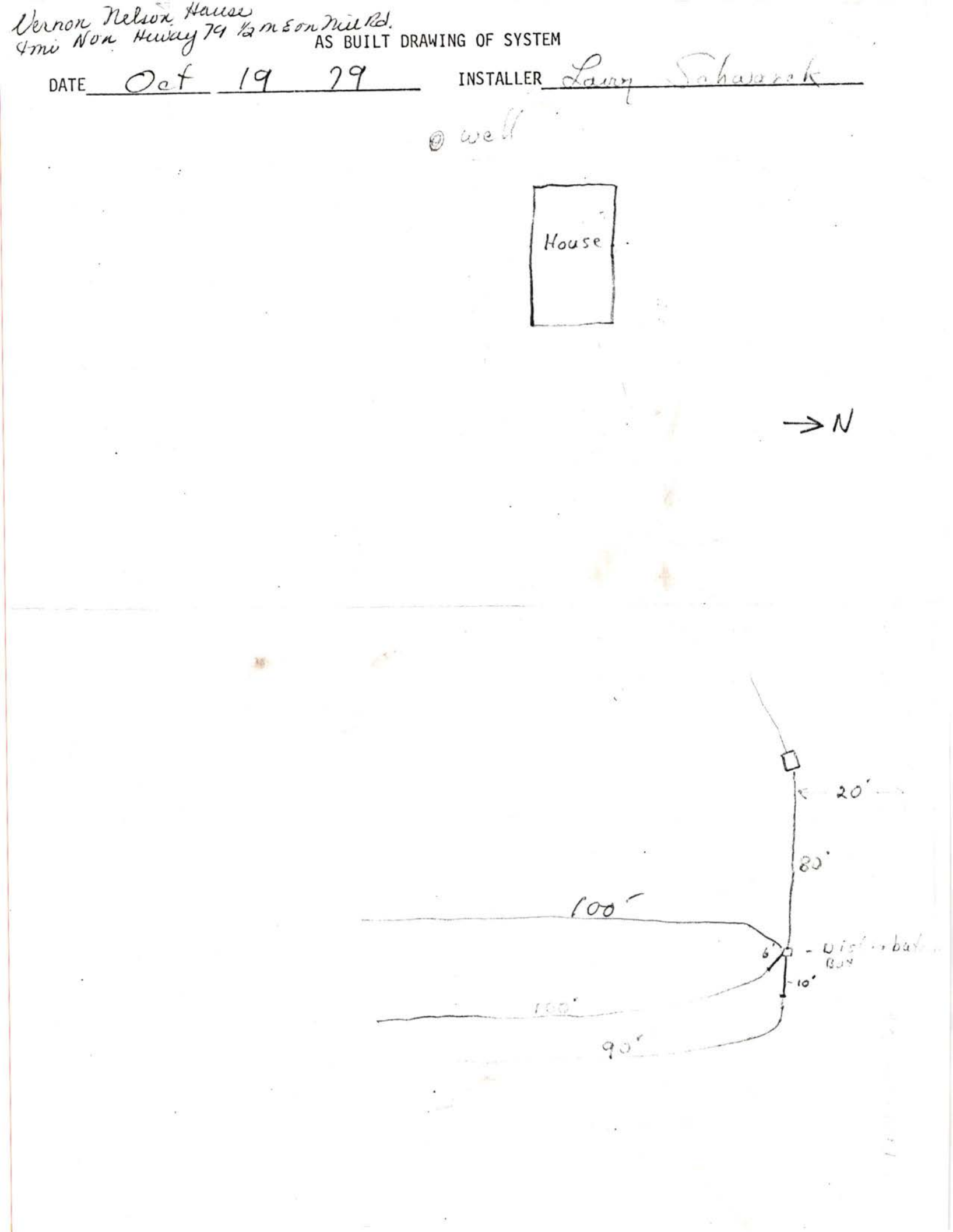
3. Date: Approved ☒; Disapproved ☐
   by: Ron Haynes

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 8-14-90 by: Ron Haynes

Vernon Nelson House
4mi N on Hiway 79 ½ mi E on Mill Rd.

AS BUILT DRAWING OF SYSTEM

DATE Oct 19 79 INSTALLER Larry Schaarsk



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1617-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

APRIL 25, 1980 — THIS PERMIT EXPIRES

C. Vernon Nelson — ISSUED TO

R.R. 1, Raymond, NE 68428 — ADDRESS

T11N, R6E, Section 7 E½ of NW¼

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH

ISSUING OFFICER

2832

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. _____

20109-0977

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
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

A

FILING FEE: $ 60

FILE NO. 1617-C

DATE: Oct 16, 1979

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 6E ; Section 7 ;
   Block _____ : Lot _____ : Addition E½ OF NW¼
   Street Address _____

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

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

4. Distance to public sewer: _____ ft.

C. Vernon Nelson
Signature of Applicant (Owner or Lessee)

Raymond, Nebr RR1
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/25/79. Date Frwd. 10/25/79. ACTION: Approved ☒ Disapproved ☐ Signature: Gerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 10-19-79. Date Frwd. 10-23-79. ACTION: Approved ☒ Disapproved ☐ Signature: Sally Brant

3. City or County Engineer: Date Rec'd. 10-25-79. Date Frwd. 10-25-79. ACTION: Approved ☒ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10-19-79 by: jw
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10-19-79* By: jw

* Signed actually 12-23-80 cannot recall why not signed earlier.

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

B

E 1/2 NW 7-11-6

FILE NO. 1617-C

PROPERTY WHERE SOIL TESTED:

Location: Township 11 ; Range 6 ; Section & ¼ Section 7 .
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 10-7-79 to 10-8-79 . Weather: Precip. Fair Temp. 70' .

OWNER: VERNON C. NELSON

Address: ¼ mi EAST OF 79 + MILL Rd
783-2706

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	30 min
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36"	10/7	2:00pm	10/8	6:00pm	10/8	5:00 pm	14"	7:30		2½hrs		2½
2	"	"	"	"	"	"	"	"	"		"		2¼
3	"	"	"	"	"	"	"	"	"		"		2¼
4	"	"	"	"	"	"	"	"	"		"		1½
5	"	"	"	"	"	"	"	"	"		"		1½
6	"	"	"	"	"	"	"	"	"		"		2

* Donald Sumner
Signature of Person Conducting Test

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Address 2700 Dan ave Phone 464-0638

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: October 18, 1979

Approved Percolation Rate (a)
A. 15 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

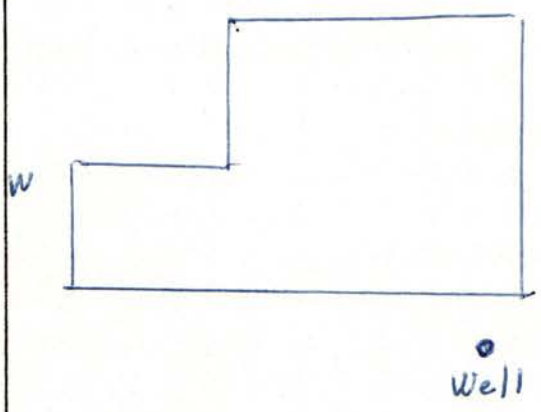
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

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

FILE NO. 1617-C

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



REVIEWING ACTION

Remarks: _____

Date: October 19, 1979

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 190 ft.
3. With a Trench Width of 36" in.
4. Total Area of Lateral needed 570 sq.ft.

Jerrold C. Wood
Signature of Reviewing Official

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: _____

FILE NO. 1617-C

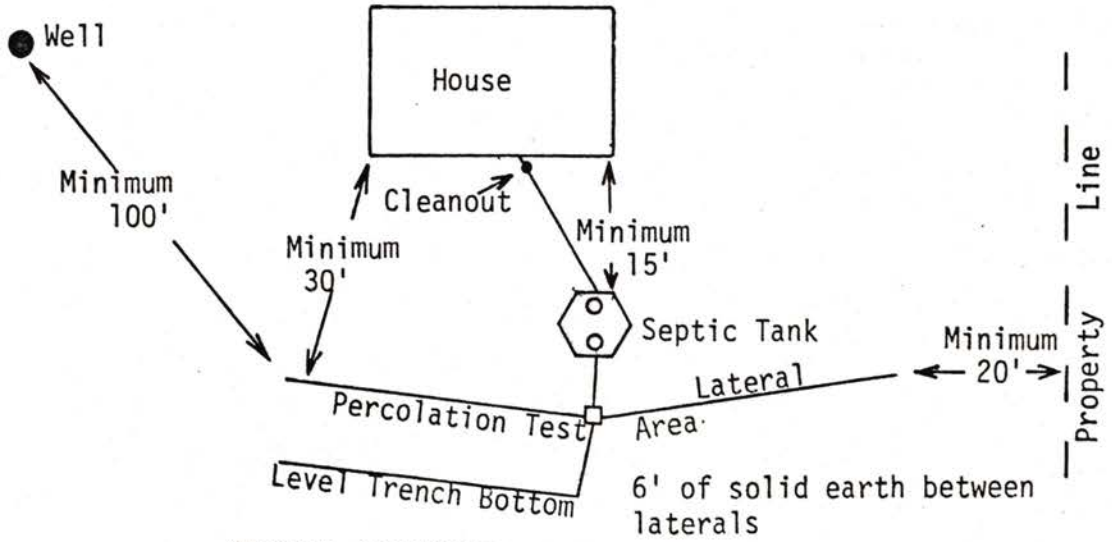
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material _____; Diameter _____ in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank _____ ft.
4. Number of clean-outs _____.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material _____; No. of compartments _____.
2. Capacity _____ gals.;
3. Factory Built: Yes ☐ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade _____ in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Concrete; Number - available outlets _____.
2. Factory Built: Yes ☒ No ☐
(Company Pre Cast Step)
3. Distance from Septic Tank 5' ft.

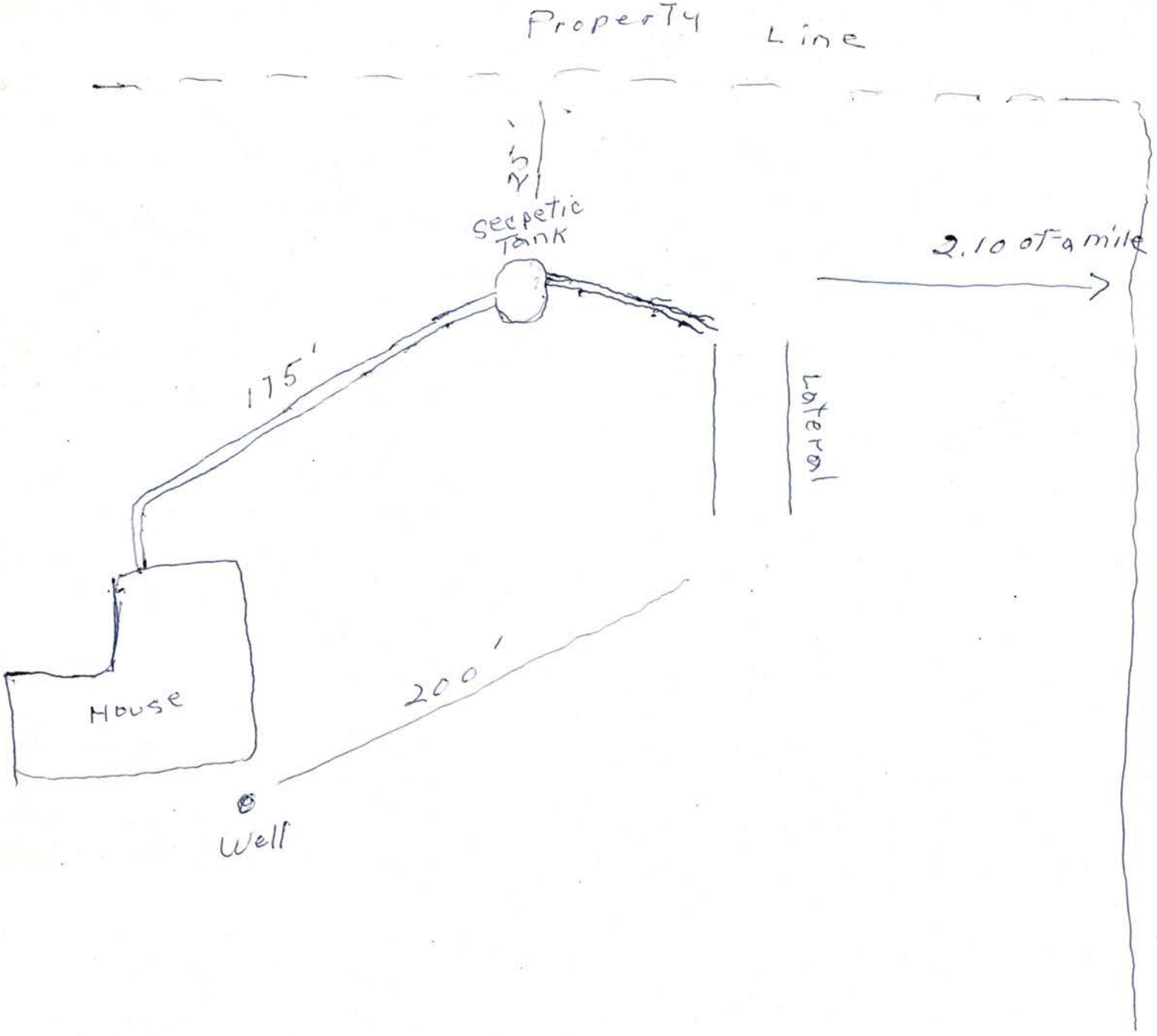
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round _____ or
Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☒ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line _____, _____, _____, _____, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines ____ ft.
3. Trench dimensions: Width 4 ft.; Slope 3 in/100 ft.; Average Depth 30" in.
4. Filter Material: Rd Gravel
Depth of Material 30 in.
5. Distances to:
Well or Suction Line 200' ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 30' ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE_____ INSTALLER_____



FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: _____

FILE NO. 1617-C

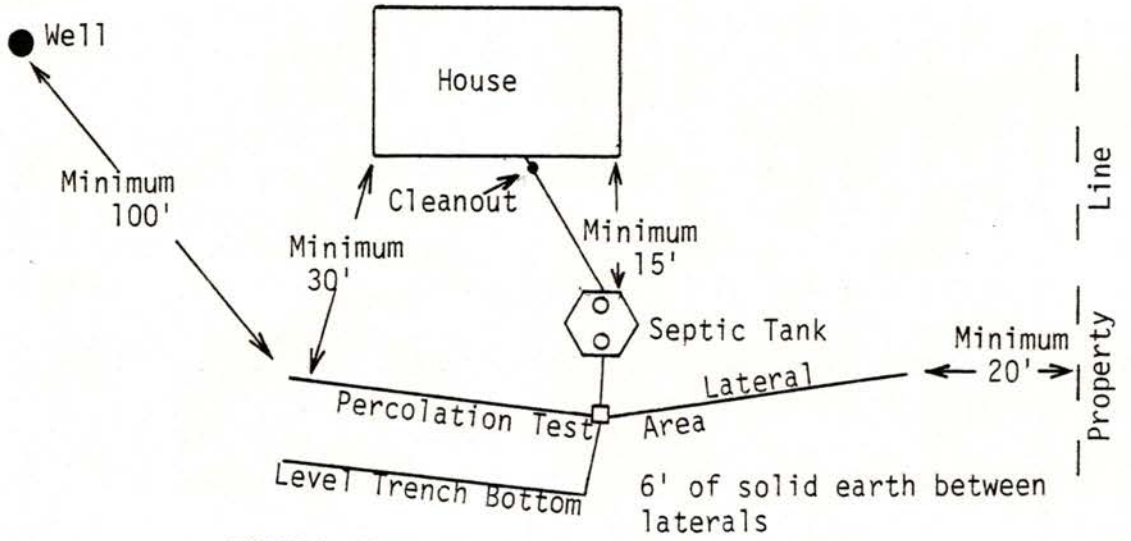
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic; Diameter 4" in.
2. Distance above basement floor _____ in., or below basement floor 5 in.
3. Distance between dwelling and septic tank 150 ft.
4. Number of clean-outs _____.
5. Distances to:
Well or Suction Line 50 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 75 ft.

B. SEPTIC TANK: Precast
1. Material _____; No. of compartments _____.
2. Capacity _____ gals.;
3. Factory Built: Yes ☒ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 12 in.
8. Distances to:
Well or Suction Line 100+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 25 ft.

C. DISTRIBUTION BOX: Pre-cast
1. Material cement; Number - available outlets _____.
2. Factory Built: Yes ☒ No ☐
(Company _____)
3. Distance from Septic Tank 90' ft.

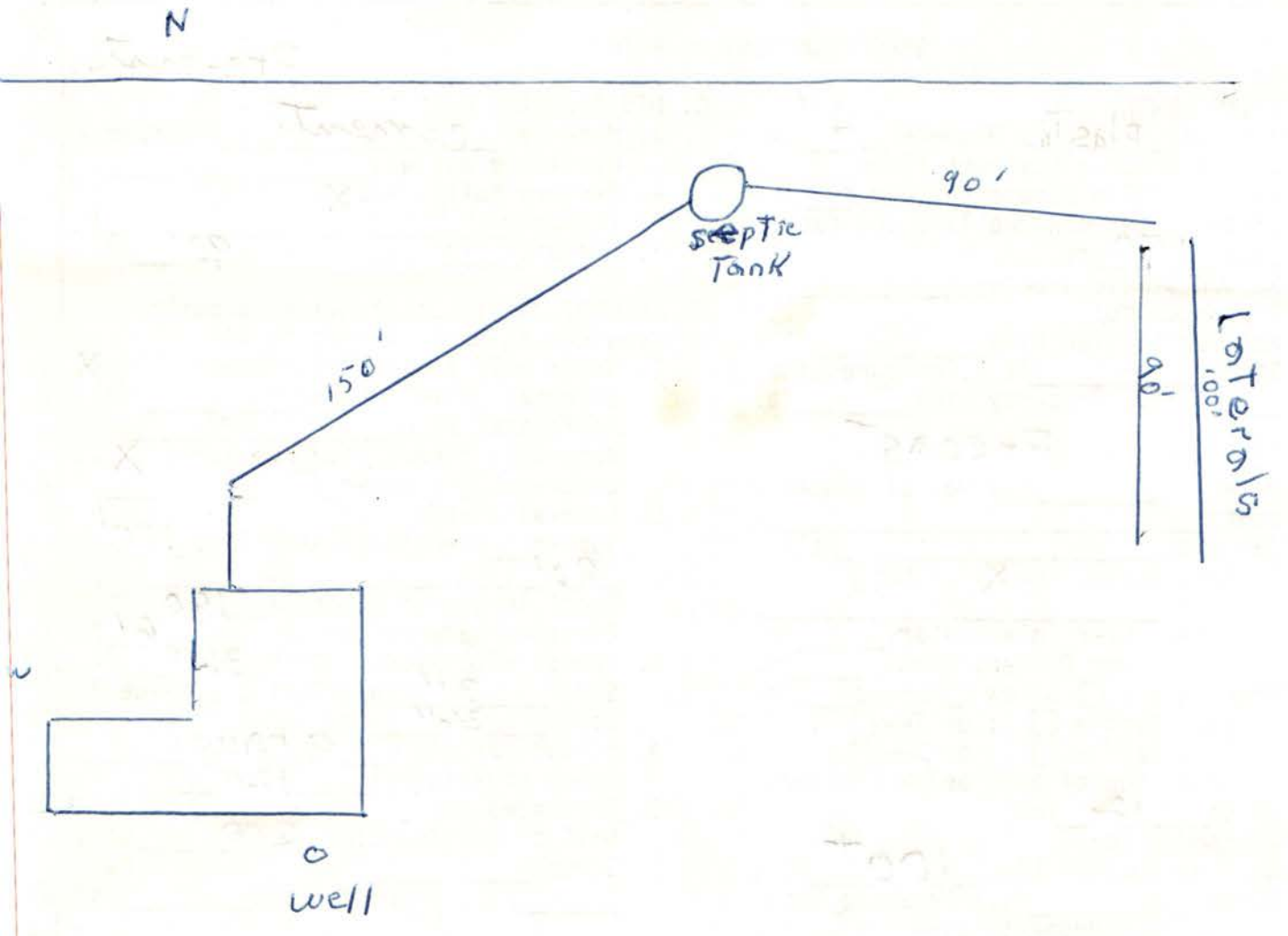
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or Perforated Pipe 4" .
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line 100', 90', _____, _____, _____ ft.;
Total length of laterals 190 ft.;
Distance between lateral lines 6' ft.
3. Trench dimensions: Width 36" ft.;
Slope 3" in/100 ft.; Average Depth 36" in.
4. Filter Material: gravel
Depth of Material 12" in.
5. Distances to:
Well or Suction Line 200' ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 30 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE Oct 16, 1979 INSTALLER Larry Swartz



FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: _____

FILE NO. 1617-C

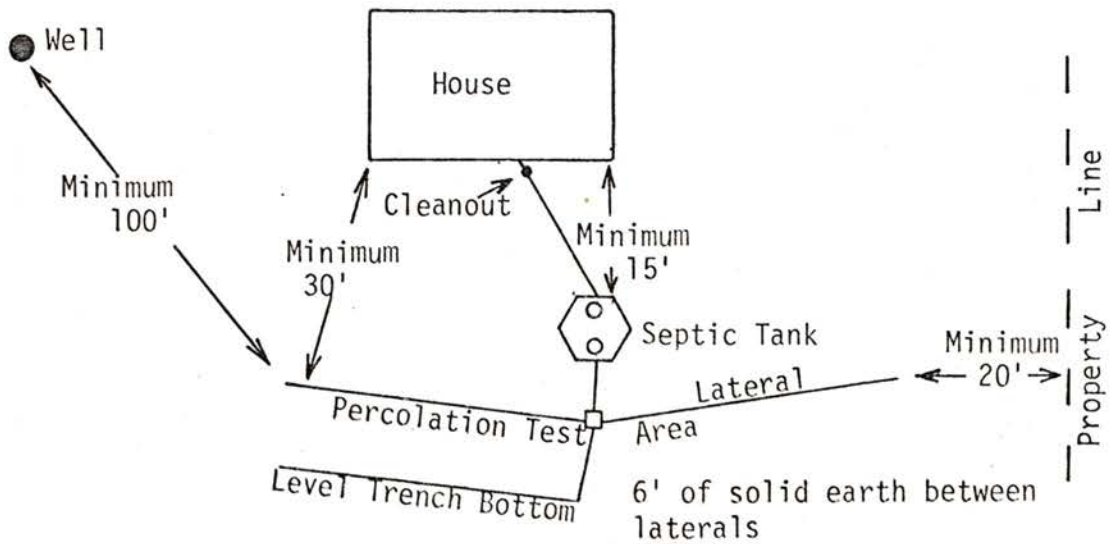
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material _____; Diameter _____ in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank _____ ft.
4. Number of clean-outs _____.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material _____; No. of compartments _____.
2. Capacity _____ gals.;
3. Factory Built: Yes ☐ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade _____ in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material concrete; Number - available outlets 5.
2. Factory Built: Yes ☒ No ☐
(Company Pre Cast)
3. Distance from Septic Tank 80 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or Perforated Pipe 4" .
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 2; Length of each line 100, 90, _____, _____, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines 6 ft.
3. Trench dimensions: Width 36 ft.;
Slope 3 in/100 ft.; Average Depth 30 in.
4. Filter Material: Road Gravel
Depth of Material 14 in.
5. Distances to:
Well or Suction Line 100'+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line 20'+ ft.

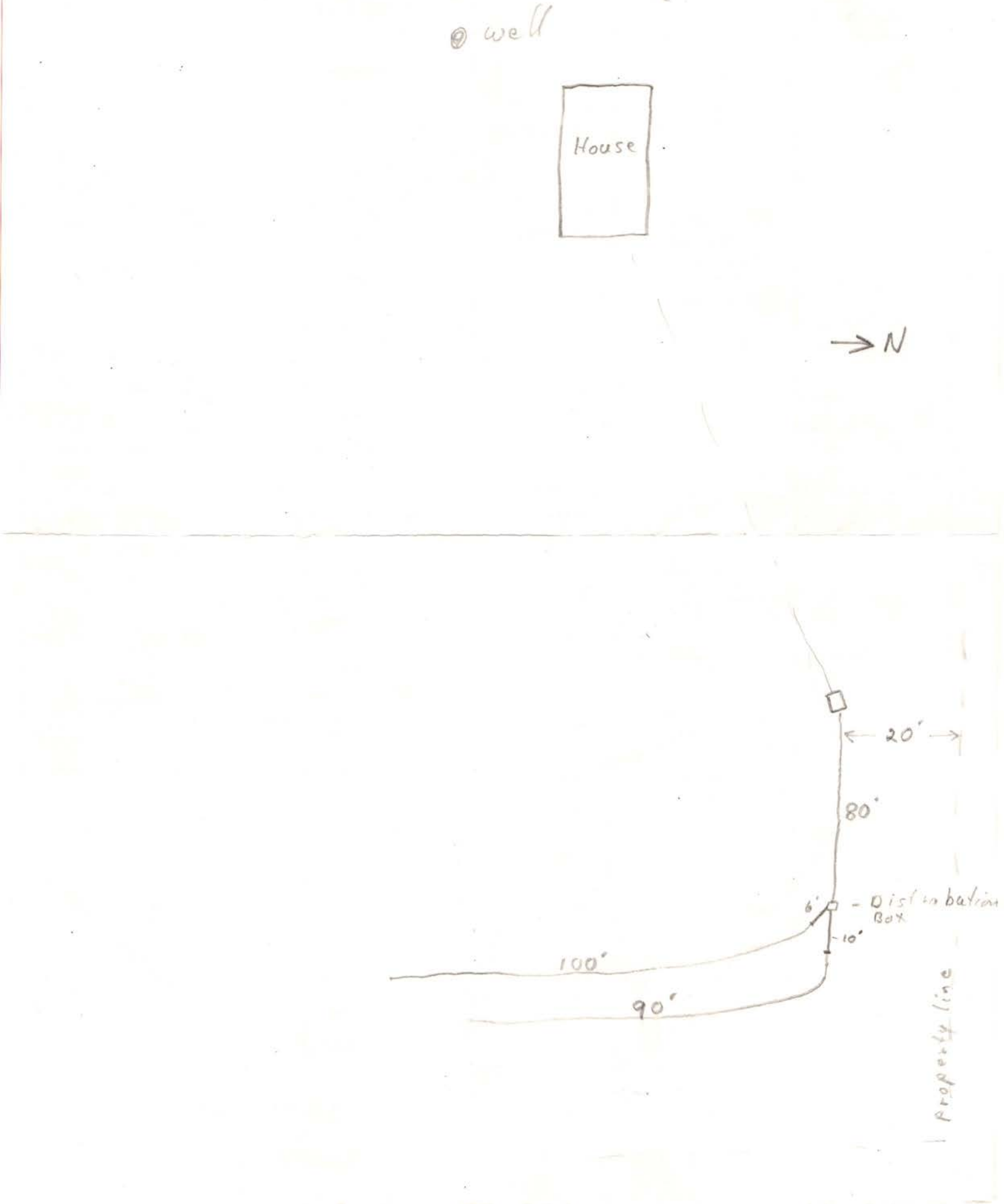


TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Vernon Nelson House
4mi N on Hiway 79 ½ mi E on Mill Rd.

AS BUILT DRAWING OF SYSTEM

DATE Oct 19 79 INSTALLER Larry Schwarck



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

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

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 9-13-90

☒ Evaluation of the Sewage Disposal System ☐ Enclosed is $150.00

Legal Description of Property: TWP. 11-N; RANGE 6-E; SECTION 7; BLOCK ___

LOT ___; ADDITION _____; Street Address 5303 W. Mill Road

Directions to Property North on 79 to Mill Rd. turn East 1/4 mile on South Side of Road.

Location of Well _____ Tap Location: Inside ☐ Outside ☒

Location of Sewage System East of House 200 Ft Year Installed 1979

	NAME	ADDRESS	PHONE
Present Owner:	Vernon Nelson	Rate 1, Raymond Ne	783-
Tenant/Buyer:	Robert C Brophy	4711 So 67 Lincoln 68516	488-6629
Return to:	Deb Holsing	Vistar Bank, 70th & O St	

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Robt C Brophy Address 4711 So 67 Lincoln

==========

HEALTH DEPARTMENT USE ONLY

Date Received SEPTEMBER 13, 1990 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 9/14/90

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☒	Date 9/14/90	by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date _____	by ___
Nitrate	☒	☐	Disapproved:	☐	Date _____	by ___

Comments: SEPTIC SYSTEM WAS ADDED ONTO 8/14/90.

See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Jerrold C. Hood R.S. DATE SEPTEMBER 18, 1990

Approval or disapproval is based on written 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 operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832