LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 91380072101

Issued 06/21/91
Expires 12/21/91

ESTABLISHMENT

RICKY FARR
T11N R7E SEC 18
LOT 46
12800 W BLUFF RD MALCOLM

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

RICKY FARR
RR0001
BOX 00045
MALCOLM NE 68402

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
6/21/91	PAID

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

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: 471-7800

A

FILING FEE: $_____

FILE NO._____

DATE: 6-18-91

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. 11 N ; Range 5 ~~East~~ W; Section 18 ;
   Block _____ : Lot 46 I.T. ; Addition _____
   Street Address 12800 West Bluff Rd Malcolm

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.

Legal
Lot 46 described as the East 232 feet of the West 630 feet of Lot 38 in SE¼ of Sec 18, Town 11 North Rang 5 east 6th P.M Lancaster

Ricky M. Farr
Signature of Applicant (Owner or Lessee)

c/o Gil Kisling
RT 1 Box 45 Malcolm, Nebr 68402
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/19/91 . Date Frwd. 6/19/91 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 6.19.91 . Date Frwd. 6.19.91 . ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bowne

3. City or County Engineer: Date Rec'd. 6/19/91 . Date Frwd. 6/19/91 . ACTION: Approved ☒ Disapproved ☐ Signature: Dan Fidler

REMARKS OR REASONS FOR DISAPPROVAL
Part of Lot in Flood Plain

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

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

FORM 23-43