LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 471-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE SYSTEM REPAIR

No. 92390029501

Issued 08/31/92
Expires 03/01/93
Revenue Code 18754

Establishment
STEWART/NANCY DEY
T11N R5E SEC 9

FEES: $50.00

TOTAL $50.00

Permittee
STEWART/NANCY DEY
RR0001
BOX 00171
MALCOLM NE 68402

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)

RECEIVED AUG 2 8 1992

FILE NO._____

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

DATE: 8-21-92

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. SW¼SE¼ OVER 9

1. Legal description of property: Twp. 11N; Range 5E; Section _____;
Block _____; Lot _____; Addition _____
Street Address _____

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

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

4. Description of proposed alteration, extension or repair: Install lagoon to replace Septic System. Owner will abandon septic tank and some line appears to be within 50 ft of well

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

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	2400.00

50.00 See

Stewart Dey

Stewart & Nancy Dey
Signature of Applicant (owner or lessee)

Rt 1, Box 171, Malcolm Ne 68402
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 50.00

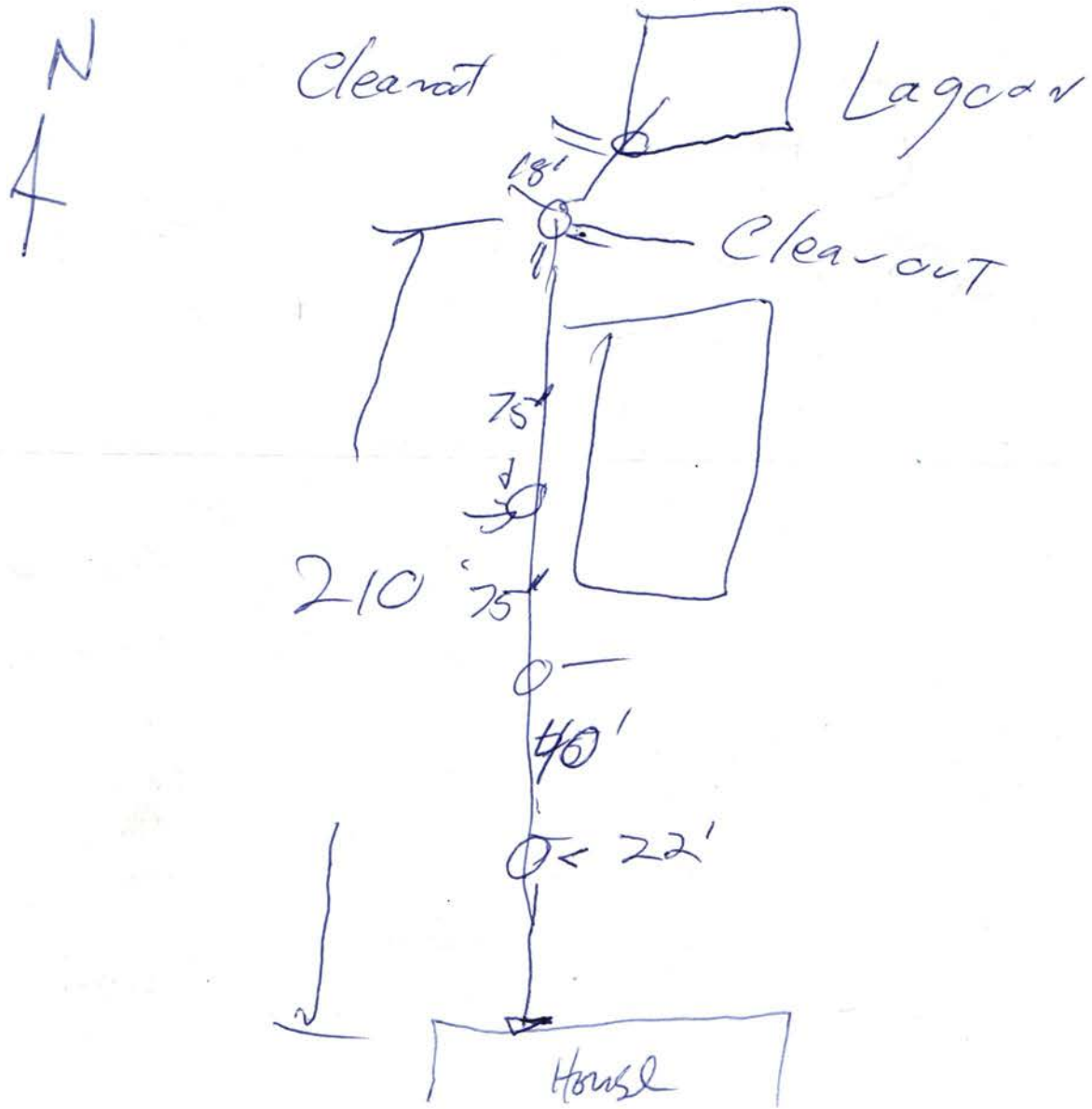
2. Site Visits:
Date: 8-21-92 by: rm Need fence
Date: 6-9-94 by: rm
Date: _____ by: _____

3. Date: Approved ☒; Disapproved ☐
by: Ron Mangurt
PROVISIONAL

4. INSTALLATION ~~FINAL~~ WRITTEN APPROVAL
Date: 6-13-94 by: Ron Mangurt

LEGAL DESCRIPTION

IRREGULAR TRACT of LAND SW CORNER of SE QTR of SECTION (9) TOWNSHIP 11, N RANGE 5, EAST of 6th P.M., LANCASTER COUNTY, NE PARTICULARY DESCRIBES AS FOLLOWS: BEGINNING AT SW CORNER of SE QTR of SECTION (9), THENCE NORTHERLY ON the WEST LINE, SAID SE 1/4 A DISTANCE of 1379.4 FT, THENCE EASTERLY DISTANCE of 165.0 FT THENCE SOUTHERLY A LINE of 165.0 FT, ~~THENCE~~ EASTERLY FROM & PARALLEL to SAID WEST LINE A DISTANE of 1379.4 FT, THENCE WESTERLY A DISTANCE of 165.0 FT to POINT of BEGINNING CONTAINING 5.23 A. MORE OR LESS.



ATTACHMENT ~~TO APPRAISAL~~

Case Number: **3211705889**
HUD Act Number: **203 B**
Borrower Name(s): **Keith L. Powell**
Teresa J. Powell
Property Address: **10444 West Waverly**
Malcolm NE 68402

Legal Description:

A tract of land described as follows: beginning at the Southwest corner of the Southeast Quarter (SE 1/4) of Section Nine (9), Township Eleven (11), Range Five (5) East of the Sixth P.M., Lancaster County, Nebraska; thence North 1320 Feet along the West line of said Southeast Quarter; thence East a distance of 165 Feet parallel to the South line of said Southeast Quarter; thence South a distance of 1320 Feet parallel to the West line of said Southeast Quarter; thence West a distance of 165 Feet along the South line of said Southeast Quarter a distance of 165 Feet to the point of beginning, said tract of land containing Five (5) acres more or less.

Sent on: 1-27-94

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

This form must be completed and returned 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.

☐ Evaluation of the Individual Water System ☐ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 10444 West Waverly Rd see attached Legal
Twp 11 Range 5 Section 9 1/4 SE 1/4 Block ___ Lot ___ Addition ___
Directions to Property ___

Location of Well ___ Tap Location: Inside ☐ Outside ☐
Location of Sewage System ___ Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	Stewart Dey	10444 W. Waverly Rd Malcom, NE 68402	796-2558
Tenant/Buyer:	Keith Powell	3726 Clover Cir Lincoln, NE 68516	423-5307
Return to:	Mortech, Inc.	4535 Normal, #295 Lincoln, NE 68506	434-5626

Signature of Applicant [signature] Address " Date 1/1/

HEALTH DEPARTMENT USE ONLY

Date Received 5/31/94 Received $150.00 Check ☒ Cash ☐ #001152

PRELIMINARY STATUS--By Ron Marquart **DATE:** 6/3/94

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☒ Corrected	Approved ☐	Date 6/9/94 by rm
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ 6.1 ppm	☐ ___ ppm	Disapproved ☒ Corrected	Date ___/___/___ by ___

Comments: Original septic system was replaced with a waste stabilization lagoon in 1992. The original sewer line may be within 50 feet of the water well. Thus, a provisional approval. See Attached Letter ☐

FINAL STATUS

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

Approved by Ron Marquart, R.S. Date 6/13/94

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.