MAR 2 8 2016

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

A

Permit Number
HS001215

Additional system for living quarters in apartment shed

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

☒ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 9801 Roca Rd City Roca, NE Zip 68430
(no rural route)

Legal Description 24 8 7 16
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 15-24-100-009-000 *Approx. Address (If to be determined)

B. Owner

Name Michael Revroat Signature
Address 9801 Roca Rd City/State/Zip Roca NE 68430
Home Phone 402-203-9727 Work Phone

C. Certified Installer

Name: Jason Kubik Signature Jason Kubik
Address 105 Locust St City/State/Zip Pickrell NE 68372
Work Phone 402-440-7606

D. Engineer

☐ **Check and complete if engineer designed system** P.E. License Number:

Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 1 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres
Garbage Grinder? ☐ Yes ☒ No

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process

1. Health Department
Site visits
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 3-28-16 Amount Paid $385.00
Received By SB Cash/Check No. 2571

White - Health Department Yellow - Engineer Pink - Building & Safety

MAR 2 8 2016

Lincoln-Lancaster County Health Department (LLCHD)
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

B

Permit Number: HS001215

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 9801 Roca Rd (no rural route) City Roca NE, Zip 68430

Owner Michael Rexroat Address Same

Date of Tests 3/21/16 to 3/22/16 Weather: Precipitation 0 Temperature 50

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					L. M. N. Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	30	3/21	2:40p	3/22	8:50a	3/22	12:20	6	3/22	12:50	30	3/4	40
2	30	3/21	2:40p	3/22	8:50	3/22	12:20	6	3/22	12:50	30	5/8	48
3	30	3/21	2:40p	3/22	8:50	3/22	12:20	6	3/22	12:50	30	1 1/8	27
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Jason Kubik
Phone: 402-440-7606
Address: 105 Locust St PO Box 191 Hickman NE 68372
Soil type (NRCS Maps/Other): 7503 Pawnee Clay loam
Groundwater Depth: +12'

Sum of Percolation Rates: 115
Average of Rates: 38
Rate Used for Calculation: 59

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official _____ Date _____

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3140 N Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS001215

System Type: Standard

Situs: 9801 ROCA RD, RURAL, NE

Issued: 3/28/2016

Expires: 3/28/2017

Description: S24, T8, R7, 6th Principal Meridian, LOT 16 NW

Owner: REXROAT, MICHAEL
9801 ROCA RD
ROCA, NE 68430

Judith A Halstead
Judith A. Halstead, MS, Health Director

Dear Applicant:

The above document is your permit to construct a new On-site Waste Water System at the location listed. Please contact this office once the sytem is complete in order to schedule a final inspection before use.

Judith A Halstead
Judith A. Halstead, MS
Health Director

SOUTHWICK LIQUID WASTE INC
105 LOCUST ST
HICKMAN, NE 68372

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

Exhibit 5

Permit Number: HS00125

4/20/16

Onsite Wastewater Treatment System

Inspection Sheet

Date 3/31/16 Legal Description ____ ¼ ____ ¼ 24 8 7 Lot 16
Section/Township/Range

Onsite System Location

Address (no rural route) 9801 Roca Rd. City Roca

Owner Michael Rexroat Address ____

Mark One: ☐ Dwelling ☐ Non-dwelling

☒ New System ☐ Alteration [☐ Tank Only ☐ Trench Only] ☐ Lateral Only

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification): ____

Drainfield Absorption System:

☒ Lateral ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) ☐ Holding Tank ☐ Trench

Total square feet of drainfield 362.5 Sq. Ft. Tank Size 1000 gals

Total length of laterals 100' Type of Distribution: ☒ Chamber ☐ Perforated Pipe ☐ Other (describe) ____

No. of Absorption Laterals 1 Width 3.625 Factor No. of Drop Boxes — Distribution Box 1

Leveling Method Used Laser

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Distance From	Private Well	Public Well	Surface Water	Ground water	Pressure Water Lines	Property Lines
Tank (ft)	50 ☑	500 ☑	50 ☑	NA ☑	10 ☑	5 ☑
Field (ft)	100 ☑	500 ☑	50 ☑	4 ☑	25 ☑	5 ☑

Geographical Coordinates to 6 Decimals:

Tank ____

Lateral #1 N/A

Lateral #2 ____

Lateral #3 ____

Lateral #4 ____

Comments:

Inspections prior to Final Approval
Initial ____ Date 3/29/16

Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By D.S.

Date 3/31/16

Field Note Drawing (See Reverse Side):