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

A

Permit Number
HS002181

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

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

3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

JAO

A. Onsite System Location

Address 10055 Rokeby Rd (no rural route) City Lincoln NE Zip 68526

Legal Description 36 9 7 Burge Add. 2
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 16-36-101-004-000

B. Owner

Name Michael & Andrea Dickey Signature

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Steven C Lewis Signature

Address 3300 N 71st Street City/State/Zip Lincoln NE 68507

Work Phone 402 432 1082

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 26.5
Garbage Grinder? ☐ Yes ☑ No

☐ Commercial ~~Establishment~~/Other Facility Specify Design flow in gallons per day 200
Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

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

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

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

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 3-15-21 Amount Paid $440.00
Received By JAO Cash/Check No. CC5409

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

Form A Updated: 1/13

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

B

Permit Number:

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 10055 Rokeby Rd City Lincoln NE, Zip 68526
(no rural route)

Owner Michael Dickey Address

Date of Tests 3/8 to 3/9 Weather: Precipitation Ø Temperature 74

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		Initial	End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = cpi)
1	36	3/8	11:30	3/9	11:30	3/9	11:30	8	3/9	12:60	36	1/2	60
2	"	"	"	"	"	"	"	8	"	"	"	1/2	60
3	"	"	"	"	"	"	"	8	"	"	"	1/2	60
4	"	"	"	"	"	"	"	8	"	"	"	1/2	60
								8					
								8					
								8					
								8					

Person Conducting Percolation Test

Name: Steven Clewis
Phone: 402 432 1081
Address 3300 N 71st. Street
Lincoln NE, 68507

Sum of Percolation Rates: 240
Average of Rates: 60
Rate Used for Calculation: 60

Soil type (NRCS Map/Other) Wymore Silty clay loam 3-6%
Groundwater Depth >10

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

rable Form B 12_05

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS002181

System Type: Standard

Situs: No Site Address Specified

Issued: 3/22/2021

Expires: 3/22/2022

Description: BURGE ADDITION, Lot 2, 21.50+- AC IN W PT (DESC IN INST #2011-19703)

Owner: DICKEY, MICHAEL L & ANDREA C
10055 ROKEBY RD
LINCOLN, NE 68526

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, Interim 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.

Patricia D. Lopez

Patricia D. Lopez, RN, MSN
Health Director

STEVEN LEWIS
3300 N 71ST ST
LINCOLN, NE 68507

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

SCANNED

A

Permit Number
H5002181

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

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with this Application

3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

JAO

A. Onsite System Location

Address 10055 Rokeby Rd City Lincoln NE Zip 68526
(no rural route)

Legal Description 36 9 7 Burge Add. 2
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 16-36-101-004-000

B. Owner

Name Michael & Andrea Dickey Signature

Address City/State/Zip

Home Phone Work Phone

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Work Phone 402 432 1082

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

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Approval Process ☐ Municipal Code 24.38 ☑ County Resolution No. 02-30

1. Health Department
Site visits DS 5/4/21 Date rec'd 3/22/21 ACTION ☑ Approved ☐ Disapproved
Date frwd 3/22/21 Signature
Comments

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

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

Installation Final Written Approval
By Joey Theurer
Date 5/5/21

Business Office Use Only
Date Received 3-15-21 Amount Paid $440.00
Received By JAO Cash/Check No. 1059409

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

Form A Updated: 1/13

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

Exhibit 5

Permit Number: # 5002181

Onsite Wastewater Treatment System

Inspection Sheet

Date 05/05/21 Legal Description ____ ¼ ____ ¼ 36/9/7 Lot 2
Section/Township/Range

Onsite System Location

Address (no rural route) 10055 Rokeby Rd City ____

Owner ____ 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 720 Sq. Ft. Tank Size 1,500 gals

Total length of laterals 160' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) E-Z Flow

No. of Absorption Laterals 2 Width 4.5 facto 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 ☐

Installed + Covered prior to Inspection

Geographical Coordinates to 6 Decimals:

Tank NA

Lateral #1 ____ Lateral #3 ____

Lateral #2 ____ Lateral #4 ____

Comments:

Inspections prior to Final Approval
Initial OK Date 5/4/21

Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By Doug Thiele

Date 5/5/21

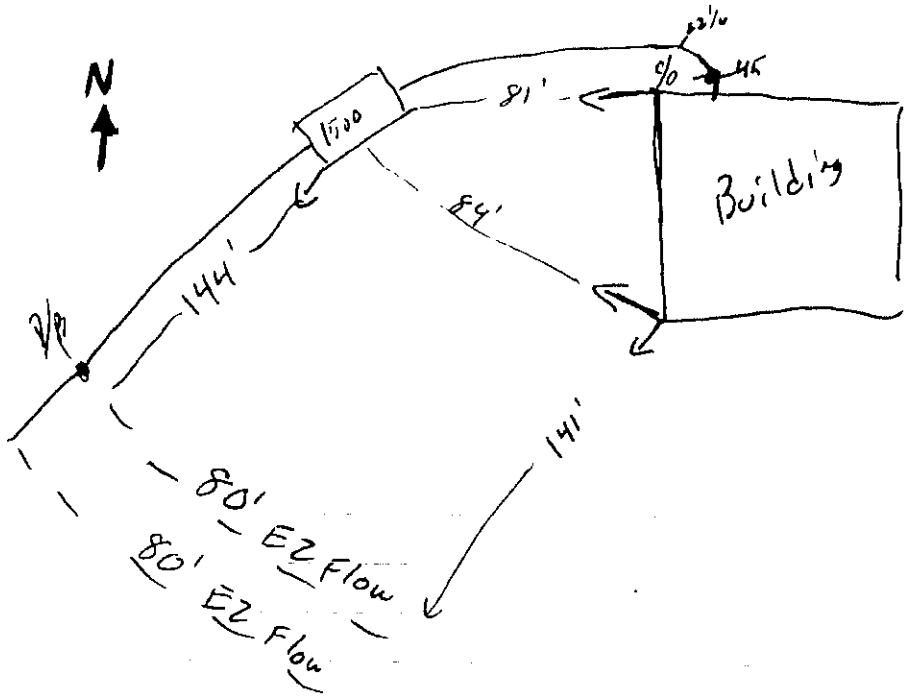
Field Note Drawing (See Reverse Side):

Updated 4/15

SUBJECT: 10055 Rokeby Rd Lincoln NE, 68526

DATE: ~~JH~~ 2012 10

81' 27y T → NW
84' 28y T → SW
144' 48y T → Lat
141' 47y SW → Lat



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

D Exhibit 4

Permit Number

Onsite Wastewater Treatment System
As-Built Description and Drawing

Type of Onsite Wastewater System: ☐ Lagoon (Skip to Back Page ☑ Subsurface Septic ☐ Mound

Onsite Wastewater System Location

Address or Legal Description or Parcel Identification Number (PID) 16-36-101-004-000

Owner Michael Dickey Address 10055 Rokeby Rd. Lincoln, 68526

A. Wastewater Piping

1. Material: Sch 40 pvc Diameter: 4 in.
2. Distance between dwelling and septic tank: _____ ft.

B. Septic Tank

1. Material Plastic
2. Capacity: 1500 gal
3. Depth to top of tank, below unfinished grade: 12 in. 2.5 ft @ 4in.
4. Distance to:
   Well NA ft.
   Pressure line NA ft
   Property Line over 100 ft.
   Foundation _____ ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: _____ ft. _____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless.
2. Number of Laterals: 2
3. Length of each lateral (linear): ft. 80 ft 80' ft. _____ ft. _____
4. Drainfield size: 720 sq. ft.
5. Distance to:
   Well NA ft.
   Pressure line NA ft.
   Property line over 100 ft.
   Depth of Groundwater over 10

Was the Onsite Wastewater System covered prior to LLCHD inspection? ☑ Yes ☐ No

If Yes, the Certified Professional must sign below for final approval:

I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: _____ Date: 5-1-21

Complete As-Built drawing on the back of this form.

Nate C. Hartman

From: Steven Lewis <nebraskaseptic@gmail.com>
Sent: Wednesday, March 17, 2021 8:03 AM
To: Nate C. Hartman
Subject: Rokeby information

Good morning Nate!

I have verified that it was permitted as a living space and the camper is only being stored there until the bedroom is constructed. They will not use the septic for dumping camper waste.

Plumbing permits were pulled for the building as a future two bed, with kitchen and bath. Please let me know if you have any further questions or concerns, we do want to ensure everyone is aware of the situation.

Steven Lewis
www.NebraskaSeptic.com
(402)432-1082

Doug R. Smith

From: Steven Lewis <nebraskaseptic@gmail.com>
Sent: Monday, May 3, 2021 8:30 AM
To: Doug R. Smith
Subject: 201210 D Sheet and as built May 03, 2021.pdf
Attachments: 201210 D Sheet and as built May 03, 2021.pdf

Permit no. Hs002181
Pid: 16-36-101-004-000

This was the job I completed Saturday at 10055 Rokeby rd. Please give me a call if you have any questions!

Thank you!

Steven Lewis
www.NebraskaSeptic.com
(402)432-1082

SCANNED

Lincoln-Lancaster County Health Department (LLCHD)
Environmental Public Health Division
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B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

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Owner Michael Dickey Address

Date of Tests 3/8 to 3/9 Weather: Precipitation 0 Temperature 74

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								6					
								6					
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								6					

Person Conducting Percolation Test

Name: Steven C Lewis

Phone: 402 432 1081

Address 3300 N 71st. Street Lincoln NE, 68507

Soil type (NRCS Map/Other) Wymore Silty Clay Loam 3-6%

Groundwater Depth >6

Sum of Percolation Rates: 240

Average of Rates: 60

Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date