Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR
REPAIR W/ COST <$400-NO FEE REQUIRED

Establishment

ROBERT C LANDKAMER
T9N R7E SEC 28
LOT 19IT
5900 ROKEBY RD

Permittee

ROBERT C LANDKAMER
5900 ROKEBY RD
LINCOLN NE 68516

Permit # 01390070401

Issued 07/30/01
Expires 01/30/02
Revenue Code 3157

FEES:

TOTAL: $.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

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Application to Alter, Extend or Repair an Individual Sewage Disposal System

☒ Municipal Code 24.38 ☐ County Resolution Number 2832

The undersigned hereby applies for a permit to: ☐ **ALTER** ☐ **EXTEND** ☒ **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:**
   Township 9N Range 7E Section 28 1/4 Section _____
   Block _____ Lot 19 I.T. Addition _____
   Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address 5900 Rokeby Rd

2. **Property use:** ☑ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe _____

3. **Type of Present Individual Disposal System** ☑ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** REPLACE TANK AND A SECTION OF HOUSE SEWER AND RESET DISTRIBUTION BOX

5. **Work to be done by:** ☐ owner ☑ contractor's name Brad Southwick

6. **Estimated project:** (a.) Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Robert & Barbara Landkamer Address 5900 Rokeby Rd Phone _____
Applicant Signature (owner or lessee) Debra Andrews

Please include the permit fee ($100) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 7/30/01 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date 7/27/01 By Jerrold C. Hood
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 7/30/01 By Jerrold C. Hood

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 07/30/01 Amount 0 Check No. NA Initials ____

White - Division Copy Pink - Business Office Revised 9/00

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

D

Permit Number: 0139 00704

Sewage Disposal System

As Built Plans & Specifications

Southwick Sewer & Drain

Date 7-27-01 Septic Tank Replaced 7-27-01

System Location (Indicate correct number and street)

Address 5900 Rokeby Rd. (no rural route) City Lincoln NE, Zip 68516

A. Building Sewer

1. Material: PVC SDR40 + Sch 40
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 56 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line NA ft.
   stream NA ft.
   pressure line NA ft.
   property line > 25 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 6 x 9 in.
   Over outlet, diameter 6 x 9 in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 6 in.
8. Distances to: Well or suction line NA ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line > 25 ft.

C. Distribution Box

1. Material: PVC → 7-27-01
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 10' ft.

D. Absorption Field

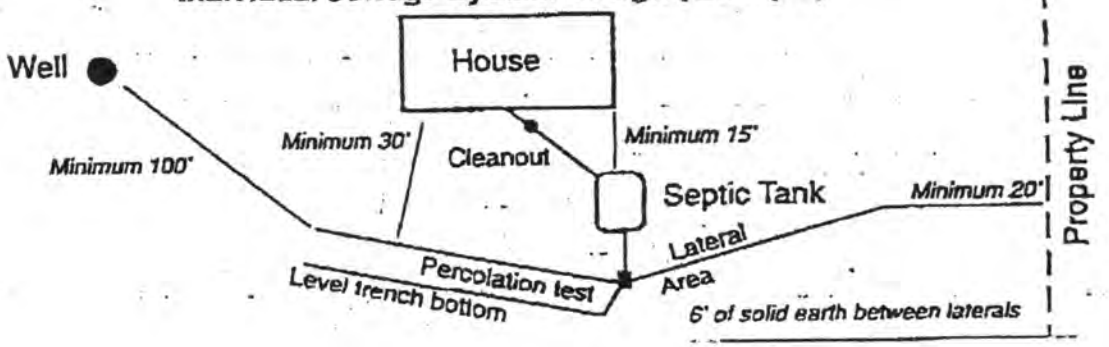
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 16"
   or perforated pipe: _____
   Material: ☒ fiberglass ☐ plastic ☐ concrete
   ☐ other Corr-A-Glas
2. Lateral lines: Number 2
   Length of each line: 100 ft. 100 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Complete "As Built" drawing on back of this form.

Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

013 900704

As Built Drawing

