LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION
3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 96380146601

Issued 08/12/96
Expires 02/12/97
Revenue Code 18754

Establishment
MIKE REZAC
T9N R7E SEC 36
LOT 15
~~10401 ROKEBY ROAD~~

FEES: $150.00

TOTAL $150.00

Permittee
MIKE REZAC
1830 W BURNHAM ST
LINCOLN NE 68522

Issued By M. Jane Ford
Health Director

2458

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $_____

FILE NO._____

DATE: 8/9/96

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. 9N ; Range 7E ; Section 36 ;
   Block _____ : Lot 15 I.T. : Addition _____
   Street Address 10401 Rokeby Rd.

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☑ ; Other ☒ LAGOON

4. Distance to public sewer: _____ ft.

~~WILL INSTALL WHATEVER SOIL PERCOLATION TEST INDICATES~~

M Rezac
Signature of Applicant (Owner or Lessee)

1830 W. Burnham
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/9/96 . ACTION: Approved ☒ Disapproved ☐
   Date Frwd. 8/9/96 . Signature: Jerrold C. Heed

2. Supt. Bldg. Insp.: Date Rec'd. 8-9-96 . ACTION: Approved ☒ Disapproved ☐
   or Village Clerk Date Frwd. 8-9-96 . Signature: [signature]

3. City or County : Date Rec'd. 8/9/96 . ACTION: Approved ☒ Disapproved ☐
   Engineer Date Frwd. 8/9/96 . Signature: Doug Pillard

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11/13/96 by: J.C.H. ~~Need fence, etc.~~
Date: 1/31/01 by: J.C.H. ~~Need signs~~
Date: 4/11/01 by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 4/11/01 By: Jerrold C. Heed

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

FORM 23-43

Official Survey Record

LANCASTER County, Nebraska

Phone (402) 434-2686
Fax (402) 434-2687

ALLIED SURVEYING AND MAPPING, INC.

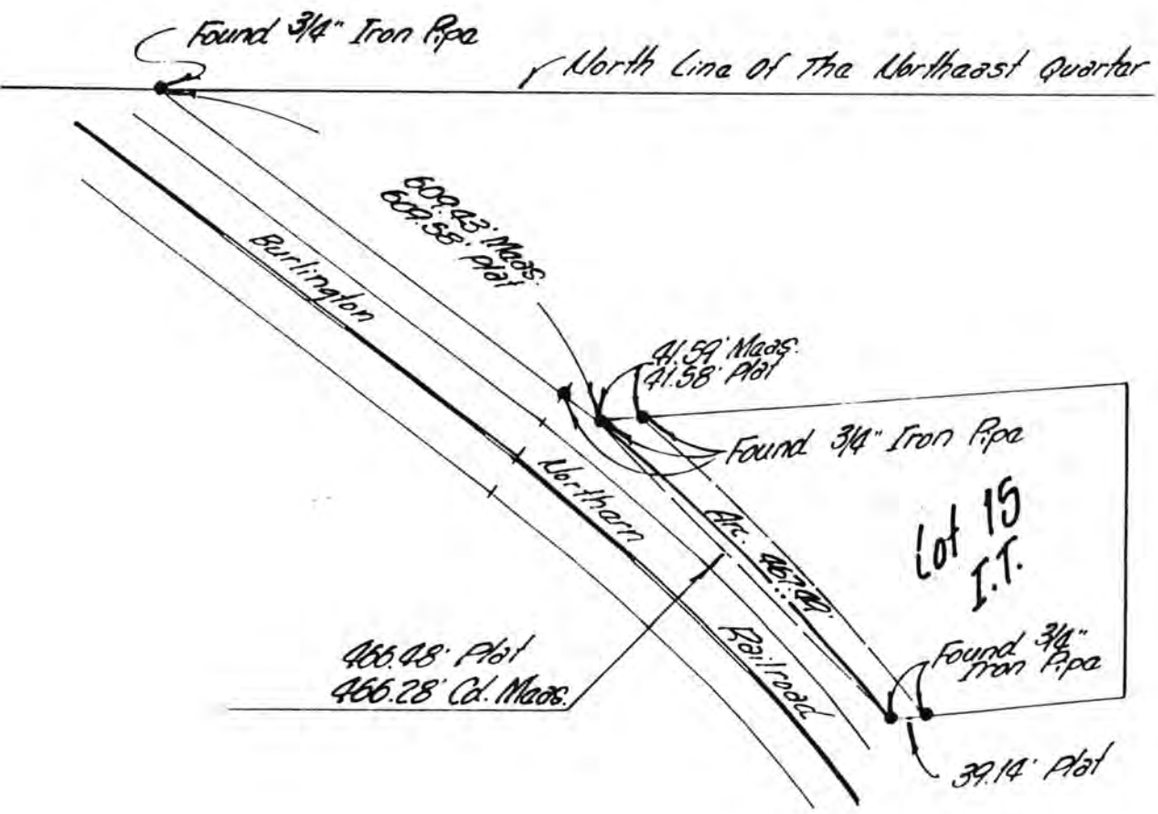
6120 South 58th Street - Suite "A" - Lincoln, Nebraska 68516

urvey to locate the FRONT property corners on Lot 15 of Irregular Tracts in the Northeast Quarter of Section 36 T. 9 N., R. 7 E of the 6th P.M.

ob No. 23756

Sheet 1 of 1

August 6, 1996





Scale: 1" = 200'

o = Set N.A.

● = Monuments Found 3/4" Iron Pipe

SURVEYORS CERTIFICATE

I hearby certify that I have accurately surveyed the property in the above plat. Iron ---- were set at points marked o. All dimensions are in feet and decimals of a foot.

Signed this 6th day of August, 19 96

NAME DENNIS D. SIMONDS

Surveyor's License No. 443
Nebraska L.S. (SEAL)

REGISTERED PROFESSIONAL LAND SURVEYOR
DENNIS D. SIMONDS
STATE OF NEBRASKA

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

Lincoln-Lancaster County Health Dept.
3140 "N" Street
Lincoln, NE 68510

D

DATE: 11-13-46

FILE NO. _____

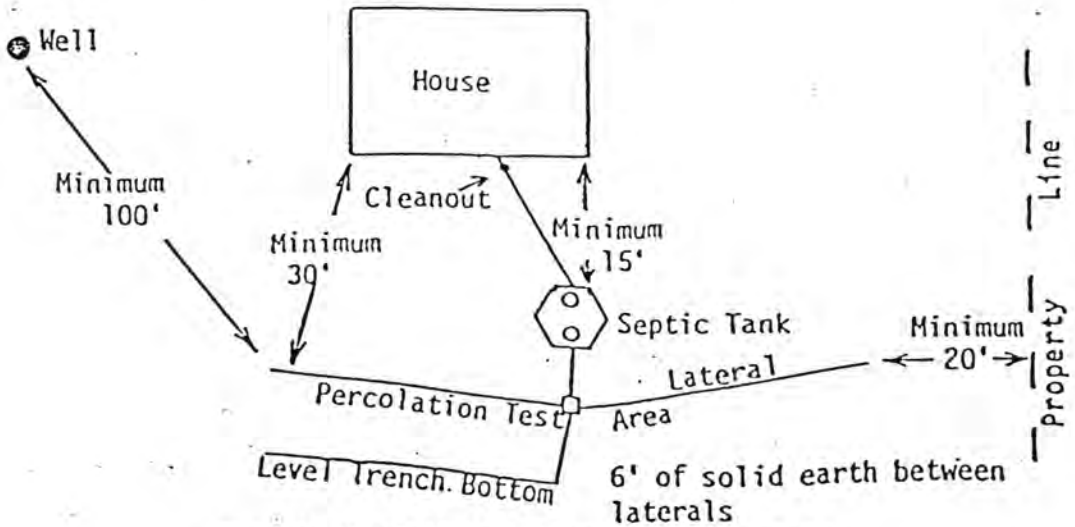
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank _____ ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

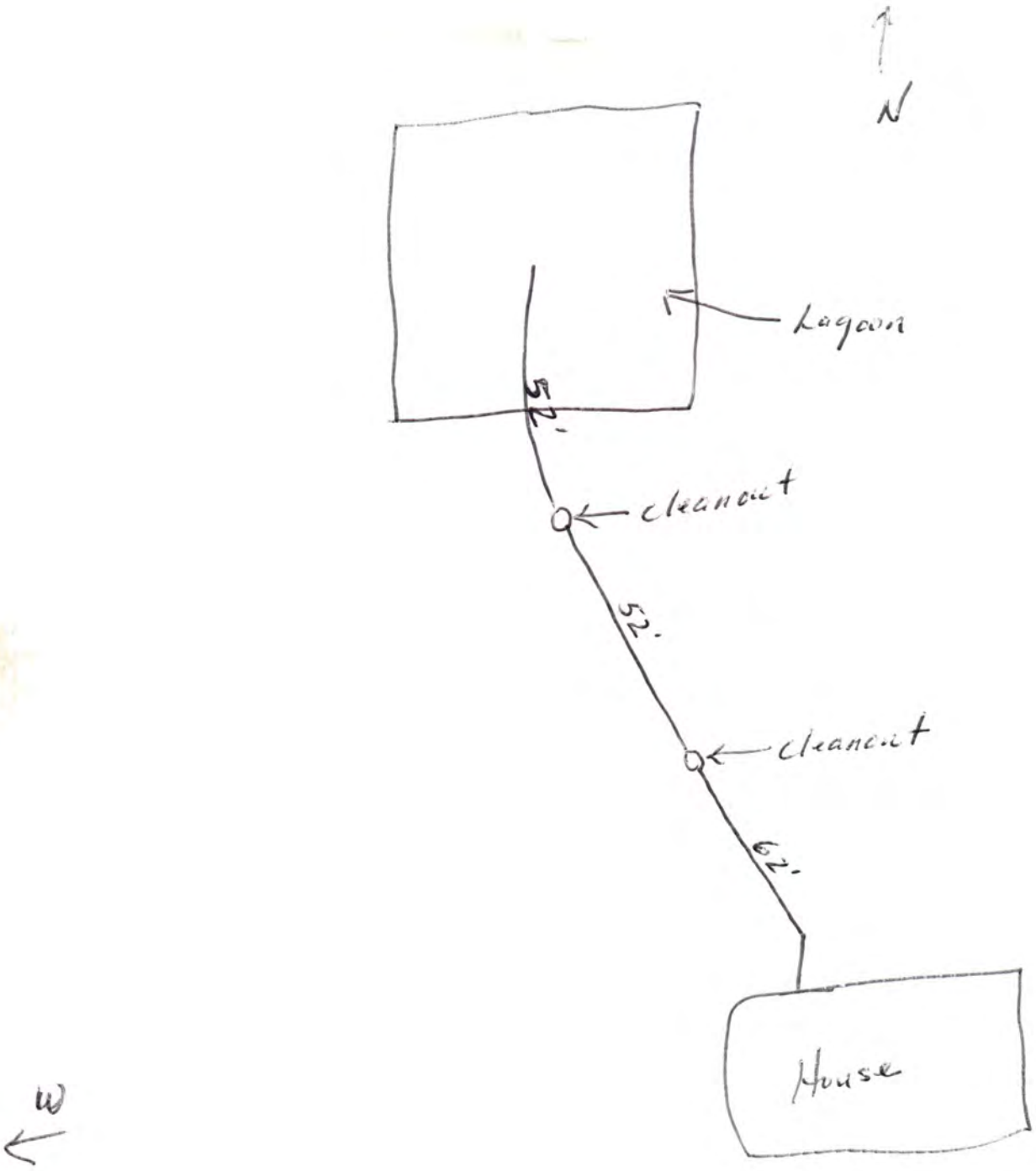
B. SEPTIC TANK:
1. Material _____; No. of compartments _____.
2. Capacity _____ gals.;
3. Factory Built: Yes ☐ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade _____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade _____ in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material _____; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☐
(Company _____)
3. Distance from Septic Tank _____ ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☐
Diameter of Half Round _____ or Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line _____, _____, _____, _____, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines _____ 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.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


N
Lagoon
52'
cleanout
52'
cleanout
62'
House
W