SITE PLAN

CONCORD TOWNSHIP, LAKE COUNTY, OHIO

for: DAN LILLY (CLIENT) — OWNER

170 LINDELL DR. (ADDRESS, STREET) — PAINESVILLE (CITY) — ZIP

SUBDIVISION NAME	LOT 3 — TRACT
VOL. – PG.	VOLUME 88-2-8 — PAGE
SUBLOT NO. — STREET	PERM. PARCEL NO. — WINCHELL RD STREET

LEGEND

SANITARY MANHOLE
STORM MANHOLE
INLET OR CATCH BASIN
HYDRANT
EXISTING CONTOURS
PROPOSED CONTOURS
EXIST. ELEV. 100.0 / 100.0 PROP. ELEV.
WATER VALVE (GAS)
WATER METER (GAS)
AS BUILT ELEVATION 100.0
INDICATES DIRECTION OF SURFACE DRAINAGE

REMARKS

ALL BOUNDARY DATA SHOWN WAS OBTAINED FROM (DEEDS, RECORDED SUBDIVISION PLAT OR OTHER PUBLIC RECORDS)

LOCATIONS AS SHOWN OF ADJACENT WELLS AND SEPTIC TANKS OBTAINED FROM LAKE COUNTY HEALTH DEPARTMENT

DESIGN CERTIFICATION

THIS PLAT WAS PREPARED BY ME, AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF

NAME — SURVEYOR — REGISTRATION NO. #6343

CHECK LIST

NO. OF BEDROOMS
DIMENSIONS
BEARINGS
TIE TO NEAREST STREET
SUBLOT NO. PARCEL NO.
SURROUNDING OWNERS
BLDG. DIMENSIONS FIN. GR.
BLDG. TIES FL'R. GRADES
APRON TYPE WIDTH THICKNESS
SIDEWALK TYPE WIDTH THICKNESS
CULVERT TYPE DIA., LENGTH
ROCK OUTCROPPINGS
WATER MAIN SIZE, LOCATION
SAN. SEWER SIZE % GR. LOC.
SAN. MH. CAST. ELEV. INV. ELEV.
SAN. CONN. SIZE, LOC. DEPTH
STORM SEWER SIZE % GR. LOC.
STORM MH. CAST ELEV. INV. ELEV.
PAV'T TYPE GRADE CURBS
GAS LINE LOC. SIZE PRESSURE
SEPTIC TANK LOCATION & DUPLICATION AREA
WELL LOCATION
ISOLATION RADIUS FROM WELL

REVISIONS		
NO.	DATE	BY
1	11/4/87	HF
2		
3		
4		
5		

PLAN PREPARED BY:

BABCOCK • JONES & ASSOCIATES, INC.

PAINESVILLE, OHIO

DRAWN BY HF	SCALE 1" = 30'	PHONE NO. 357-1811	
CHK'D. HF	DATE 4/5/87	DRAWING NO. 87-024	
CREW CHIEF CB	APP'D. HF		

"AS BUILT" CERTIFICATION

I, HEREBY CERTIFY THAT THE CIRCLED GRADES ARE EXISTING FINISH GRADES CHECKED IN THE FIELD ON _____, 19 ____ AND ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

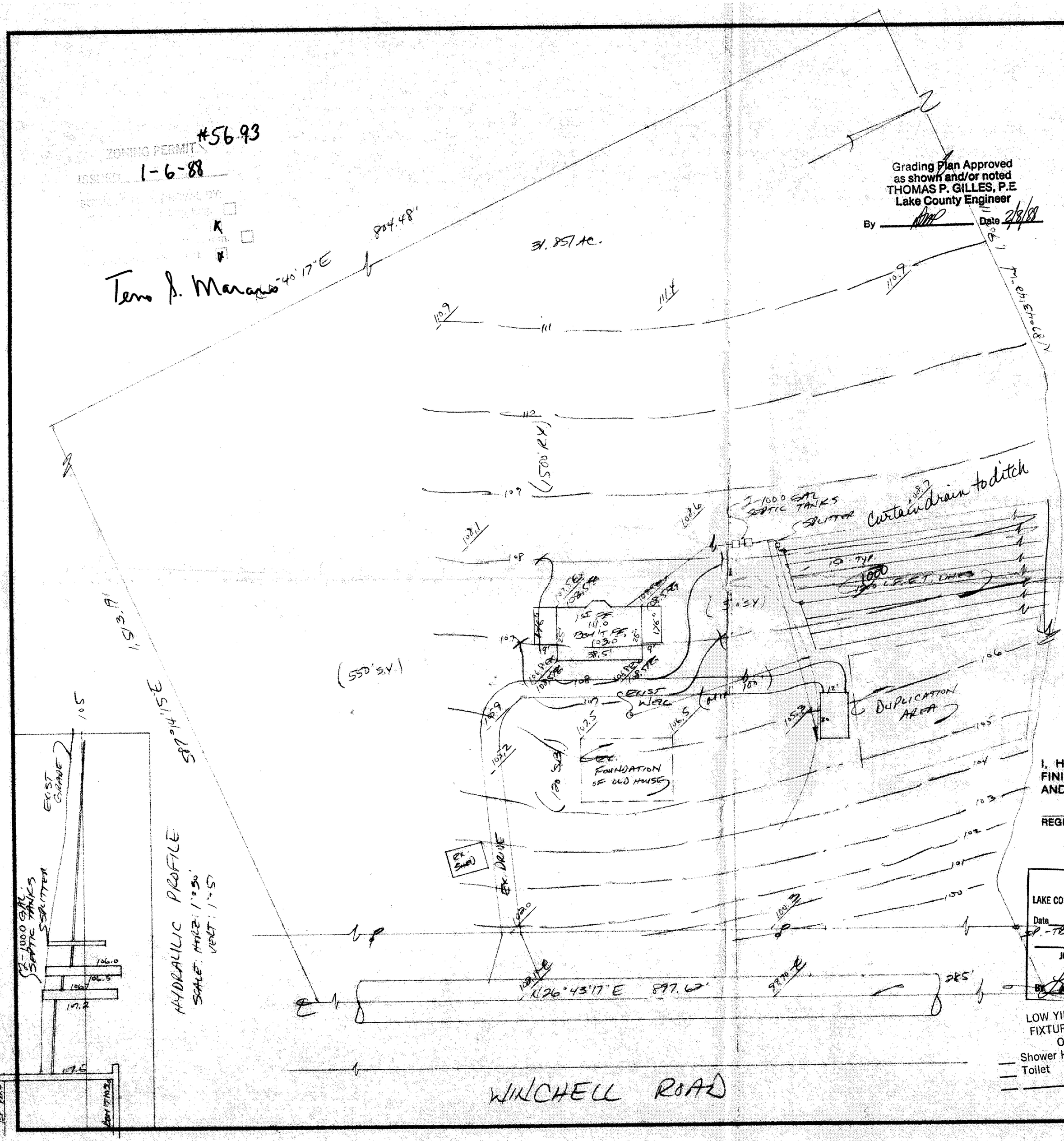
REGISTERED SURVEYOR — REG. NO.

T.BM. – TOP OF IRON PIN @ N.E. CORNER OF PROPERTY ELEV. = 100.00

Reviewed and Accepted
LAKE COUNTY GENERAL HEALTH DISTRICT
Date 11-20-87
JOEL LUCIA, R. S., M. P. H.
Health Commissioner
By _____

SEWAGE DISPOSAL PERMIT MUST BE OBTAINED BY A LAKE COUNTY LICENSED INSTALLER BEFORE INSTALLATION IS STARTED.

STATE OF OHIO — HARRY S. JONES, JR. S-6343 — REGISTERED SURVEYOR

LOW YIELD WATER FIXTURES REQUIRED ON ALL:
___ Shower Head
___ Toilet
___ _____

A. To be brought to finished grade
1. Septic tank manhole cover
2. Splitter box cover
3. Distribution box cover
4. Vent Pipes
B. No footer drains or downspouts to be discharged into septic tanks
C. All waste water to be discharged into septic tanks