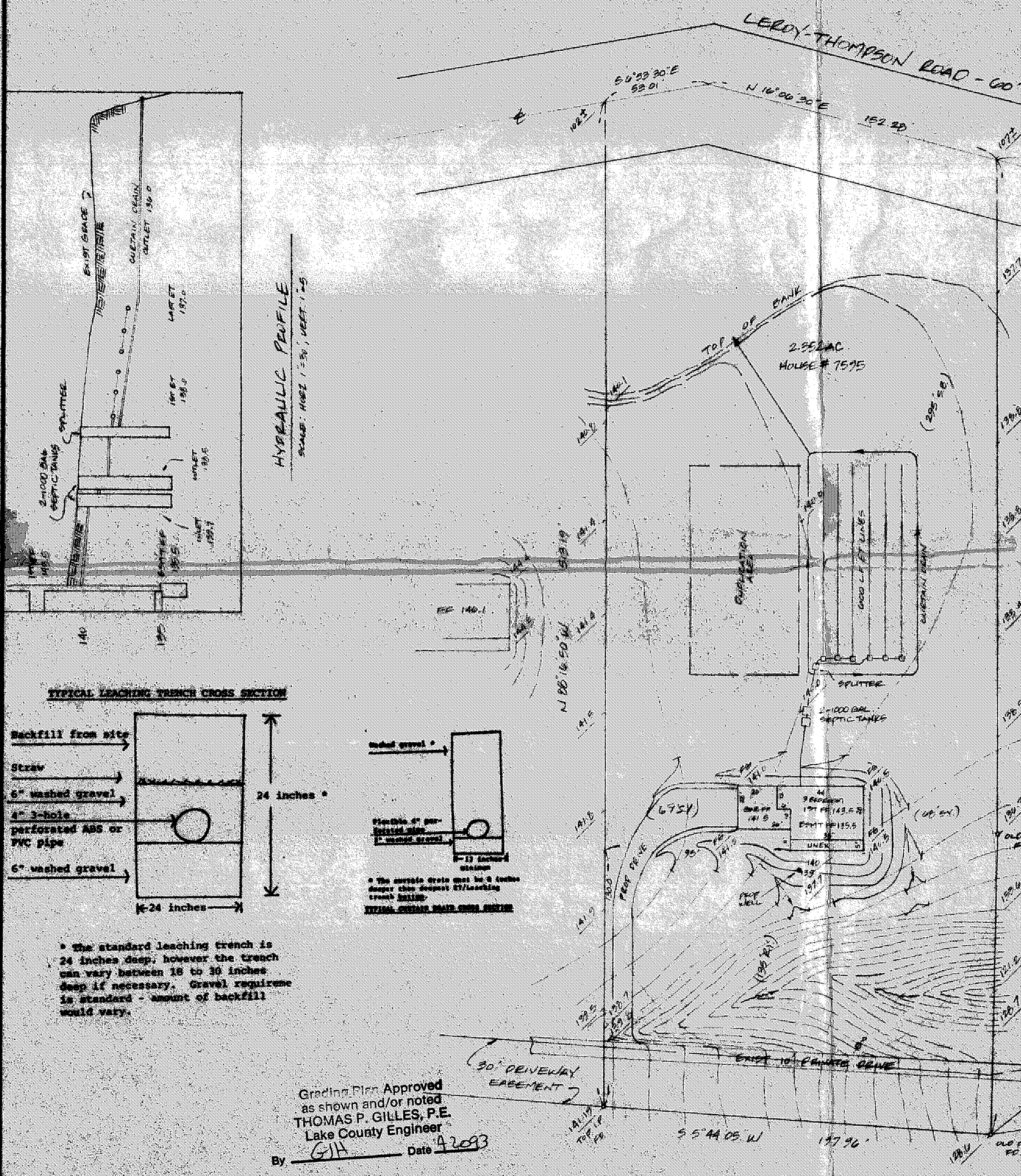

SITE PLAN

LEROY TWP., LAKE COUNTY, OHIO

for: MALKAMAKI BUILDERS

CLIENT OWNER

ADDRESS STREET CITY ZIP

SUBDIVISION	NAME	LOT 30	TRACT
VOL. - PG.		VOLUME 7A-B6-	PAGE LEROY THOMPSON
SUBLOT NO.	STREET	PERM. PARCEL NO.	STREET

LEGEND

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

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 FLR. 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 CURB
GAS LINE LOC. SIZE PRESSURE
SEPTIC TANK LOCATION & DUPLICATION AREA
WELL LOCATION
ISOLATION RADIUS FROM WELL

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

REVISIONS		
NO.	DATE	BY
1		
2		
3		
4		
5		

PLAN PREPARED BY:
BABCOCK • JONES & ASSOCIATES, INC.
PAINESVILLE, OHIO

DRAWN BY	SCALE 1" = 40	PHONE NO. 357-1811	
CHK'D.	DATE 3-22-93	DRAWING NO.	
CREW CHIEF WE	APP'D.	87-219-8	

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

"AS BUILT" CERTIFICATION

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.

LOW YIELD WATER FIXTURES REQUIRED ON ALL:
- Shower Head
- Toilet

A. To be brought to finished grade
1. Septic tank manhole covers
2. Splitter box cover
3. Distribution box cover

B. No footer drains or downspouts to be discharged into septic tanks
C. All waste water to be discharged into septic tanks

TEMP. BENCHMARK: TOP OF I.P. FD @ SOUTHEAST CORNER OF LOT, ELEV = 141.19

LEROY TOWNSHIP Zoning Approval # 2008 — Zoning Inspector

Reviewed and Accepted
LAKE COUNTY GENERAL HEALTH DISTRICT
Date April 2, 1993
JOEL LUCIA, R. S., M. P. H.
Health Commissioner
By ________

"I, the undersigned hereby certify that this topography indicated by 6", 1' or 2' contours, and elevations shown hereon represent an actual field survey made by me on the 15th day of March, 1993 and that the elevations were taken at appropriate intervals and that as of that date they existed as indicated hereon."

Name ________ Reg. No. #6343