SITE PLAN

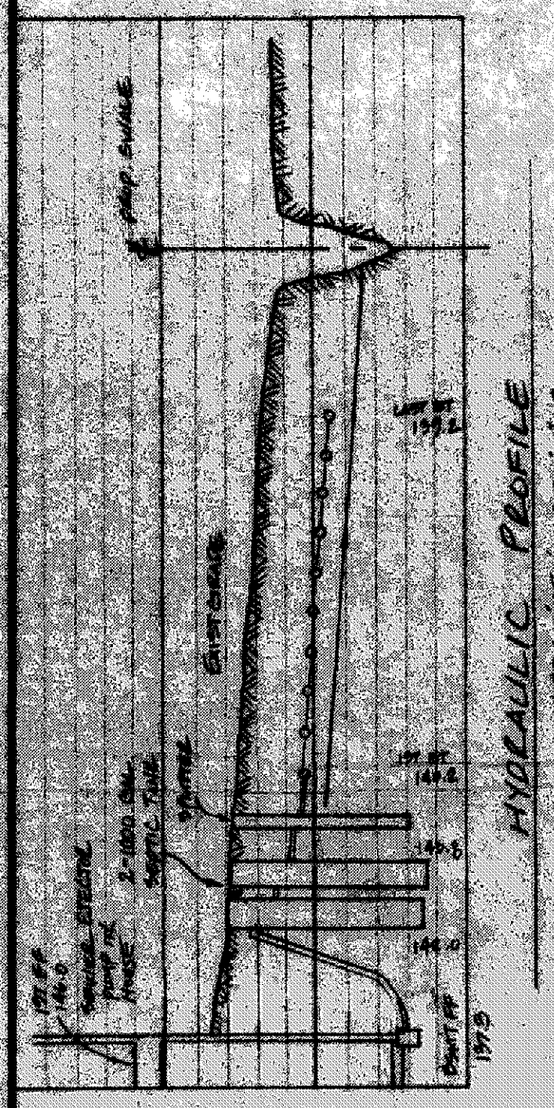
LEROY TWP. ; LAKE COUNTY, OHIO

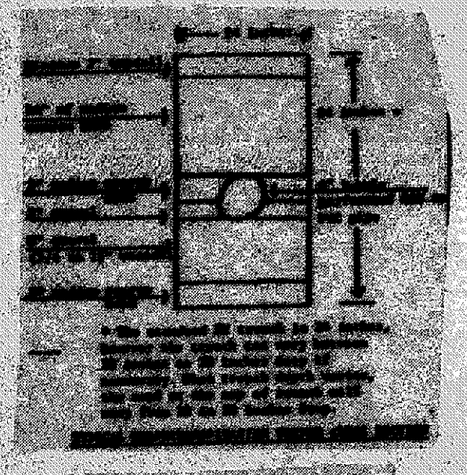
for: JIM OZINGA
CLIENT OWNER

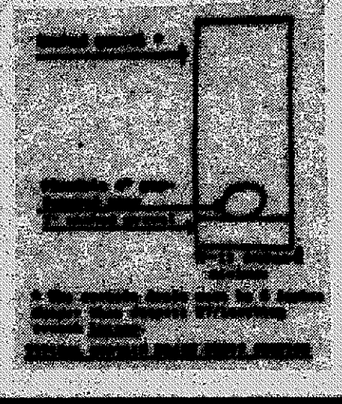
ADDRESS STREET CITY ZIP

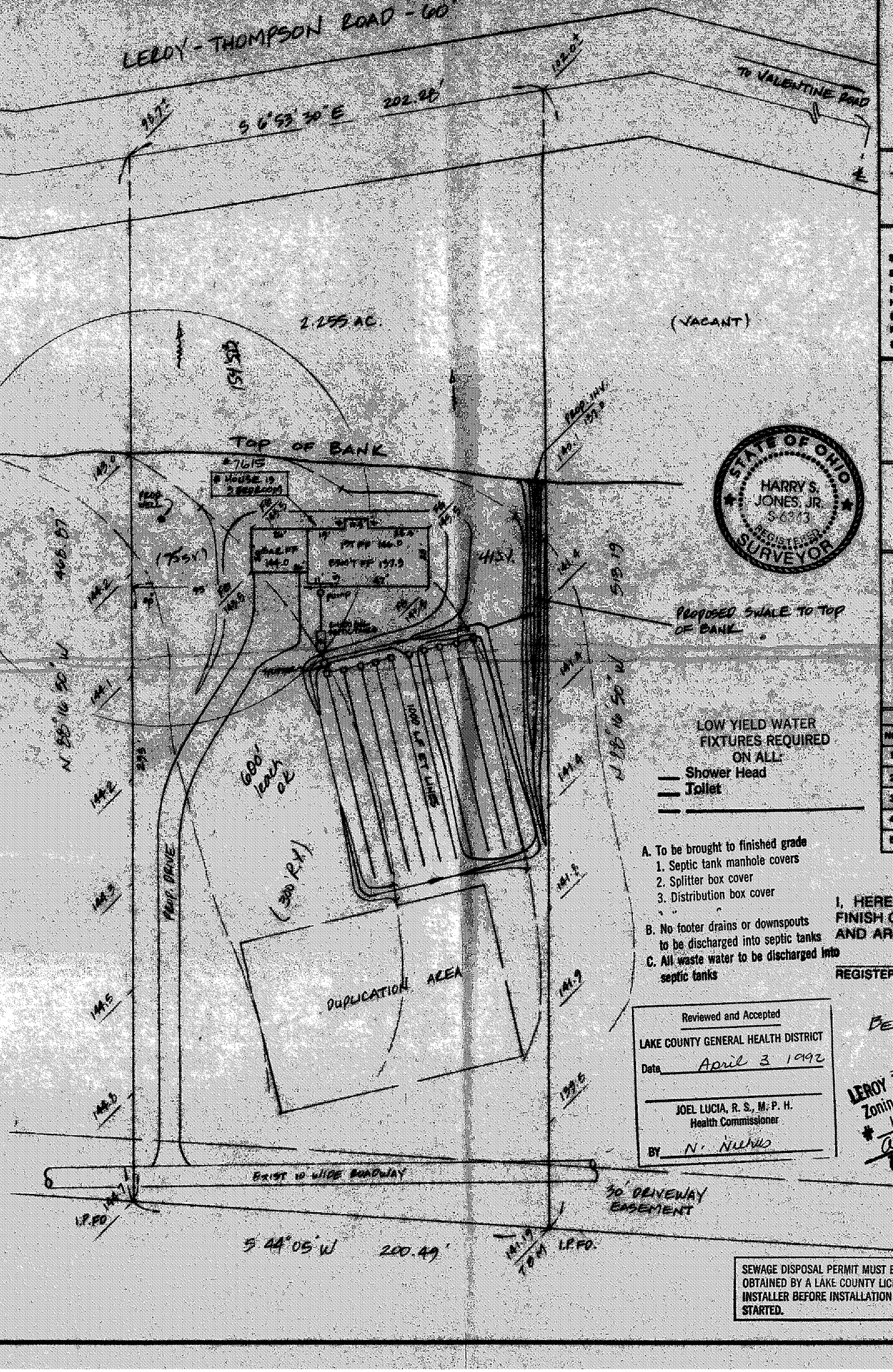
SUBDIVISION NAME
VOL. - PG.
SUBLOT NO. STREET

LOT 38 TRACT
VOLUME 14-38 PAGE LEROY-THOMPSON RD.
PERM. PARCEL NO. STREET









LEGEND

SANITARY MANHOLE		WATER VALVE (GAS)	
STORM MANHOLE		WATER METER (GAS)	
INLET OR CATCH BASIN		AS BUILT ELEVATION	1000
HYDRANT		INDICATES DIRECTION OF SURFACE DRAINAGE	
EXISTING CONTOURS			
PROPOSED CONTOURS			
EXIST. ELEV. 139.0	PROP. ELEV. 139.0		

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.

CHECK LIST

- NO. OF BEDROOMS
- DWELLING
- SEATING
- TIE TO NEAREST STREET
- SUBLOT NO. PARCEL NO.
- SURROUNDING OWNERS
- BLDG. DIMENSIONS FIN. GR.
- BLDG. TIES F.I.N. 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.
- FAVT TYPE GRADE CURB
- GAS LINE LOC. SIZE PRESSURE
- SEPTIC TANK LOCATION & DUPLICATION AREA
- WELL LOCATION
- ISOLATION RADIUS FROM WELL

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 4-1-92	DRAWING NO. 87-279-9
CREW CHIEF	W.B.	APP'D.	

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

Reviewed and Accepted
LAKE COUNTY GENERAL HEALTH DISTRICT
Date April 3 1992
JOEL LUCIA, R. S., M. P. H.
Health Commissioner
BY N. Nichols

"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.

BENCHMARK: TOP I.P. NORTHEAST CORNER OF PARCEL ELEV. = 141.19

LEROY TOWNSHIP Zoning Approved 1920

"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 25th day of March, 19 92 and that the elevations were taken at appropriate intervals and that as of that date they existed as indicated hereon."

Name

6343
Reg. No.

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