SITE PLAN

LEROY TOWNSHIP, LAKE COUNTY, OHIO

for: JIM WEST
CLIENT OWNER

ADDRESS STREET CITY ZIP

LEROY CENTER SUB. (SUBDIVISION NAME)	LOT 41	TRACT 358
PT S/L 21 (SUBLOT NO.)	VOL. 6-87 PG. (STREET) PAINE RD.	VOLUME 7A-13A-23 (PERM. PARCEL NO.)
		PAGE PAINE 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
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 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
BALLONT. LOT. SIZE PRESSURE
SEPTIC TANK LOCATION & DUPLICATION AREA
WELL LOCATION
ISOLATION RADIUS FROM WELL

REVISIONS		
NO.	DATE	BY
1	10/1/90	HT
2		
3		
4		
5		

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

DRAWN BY HT	SCALE 1" = 30'	PHONE NO. 357-1811
CHK'D. HT	DATE 9/27/90	DRAWING NO.
CREW CHIEF LJS	APP'D. HT	90-231

"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.

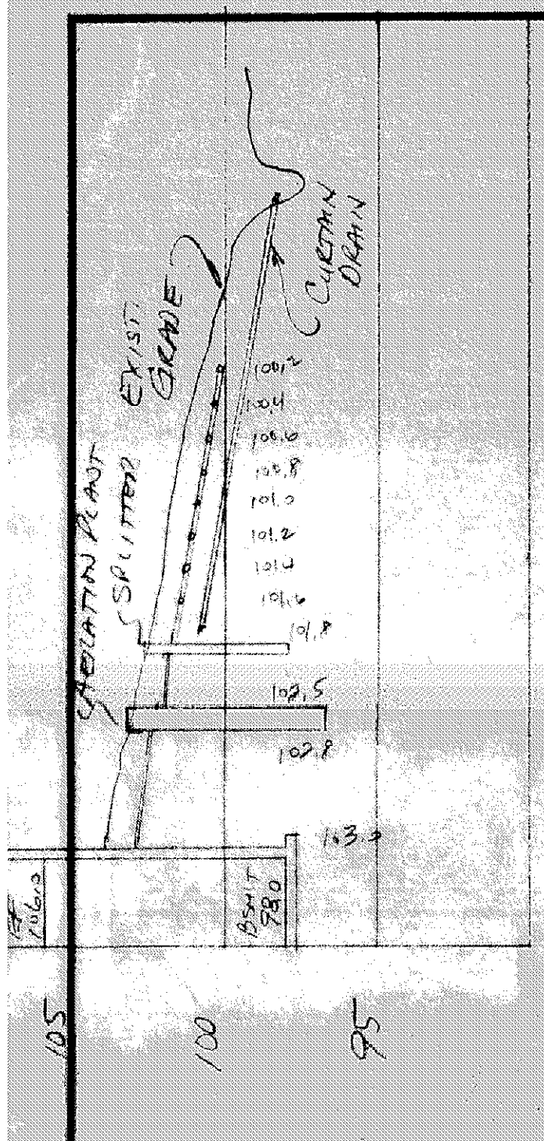
TBM – TOP OF IRON PIN @ S.E. COR. OF THIS PARCEL ELEV. = 100.00

"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 27th day of SEPT. 19 90 and that the elevations were taken at appropriate intervals and that as of that date they existed as indicated hereon."

Name

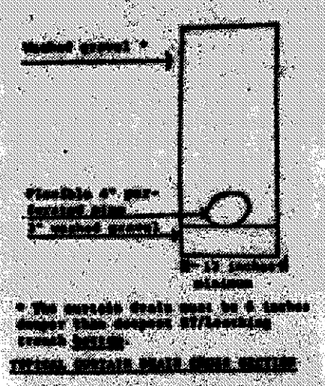
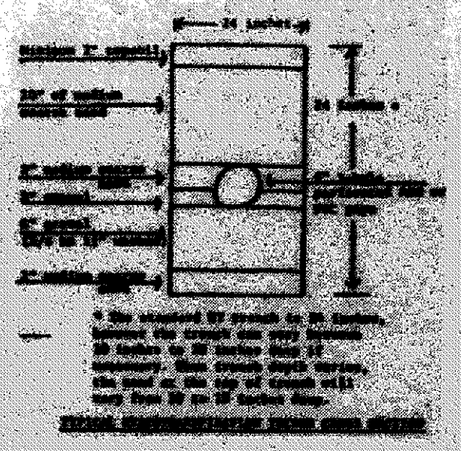
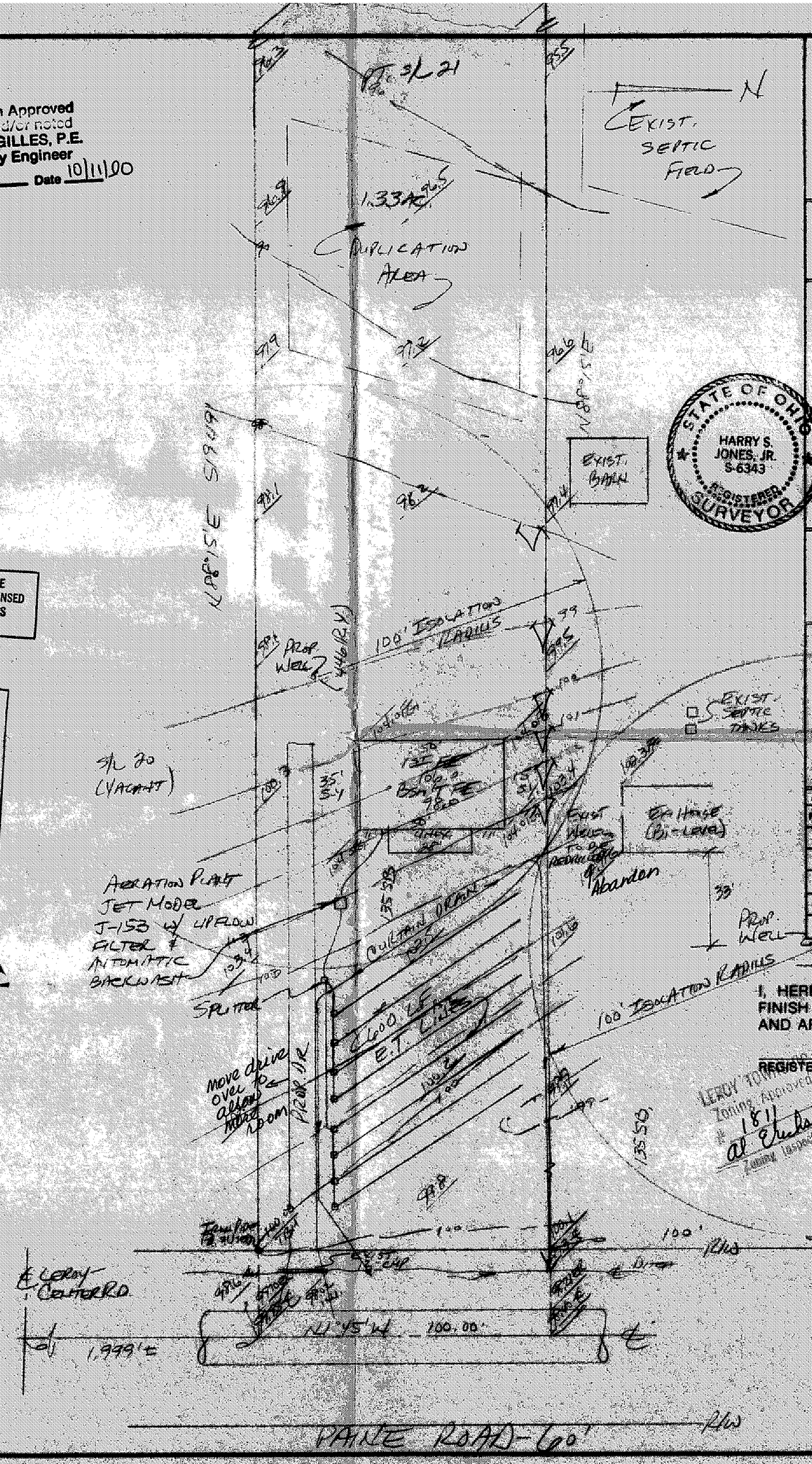
#6343
Reg. No.

Grading Plan Approved
as shown and/or noted
THOMAS P. GILLES, P.E.
Lake County Engineer
By GJH Date 10/11/90



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

Reviewed and Accepted
LAKE COUNTY GENERAL HEALTH DISTRICT
Date 10-2-90
JOEL LUCIA, R. S., M. P. H.
Health Commissioner
BY Nancy Nichols

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