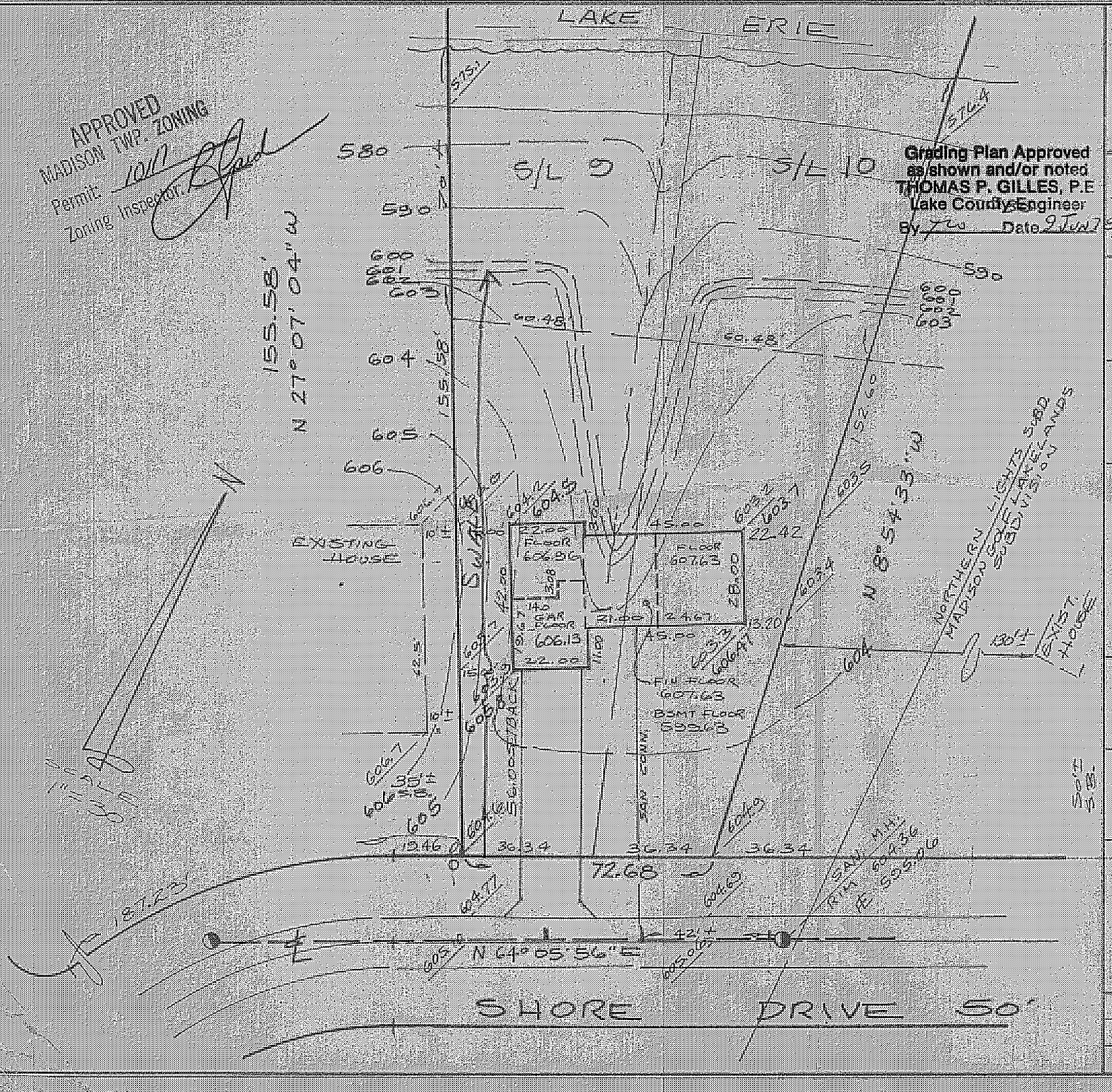

APPROVED
MADISON TWP. ZONING
Permit: 1011
Zoning Inspector: [signature]

Grading Plan Approved
as shown and/or noted
THOMAS P. GILLES, P.E
Lake County Engineer
By [signature] Date 9 JUN 78

SITE PLAN

for DOUGLAS JONES
CLIENT OWNER

6043 EAST VALLEYVIEW CT., MENTOR, O
ADDRESS STREET CITY

9-10 NORTHERN LIGHTS G-80
SUBLOT NO. SUBDIVISION NAME VOL. PAGE

MADISON TWP OHIO
LOT, TRACT

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.

LEGEND

SANITARY MANHOLE
PROPOSED CONTOURS
EXIST. ELEV. 100.0
100.0 PROP. ELEV.
WATER VALVE (GAS)
DIRECTION OF SURFACE DRAINAGE

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. IN. 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

DESIGN CERTIFICATION

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

[signature] PS # 5244
NAME SURVEYOR REGISTRATION NO.

"AS BUILT" CERTIFICATION

I HEREBY CERTIFY THAT THE CIRCLED GRADES ARE EXISTING GRADES OBTAINED ON THE SITE ON _____ 19____ AND ARE CORRECT TO THE BEST OF MY ACKNOWLEDGMENT AND BELIEF.

LAND DESIGN consultants, inc.
9613 JACKSON STREET MENTOR OHIO 44060
TELEPHONE (216) 951-6872 or 354-6646

1			DRAWN BY [initials]	SCALE 1" = 30'	DRAWING NO:
2			CHK'D.	DATE 4/22/78	214
3			CREW CHIEF WRH	APP'D.	