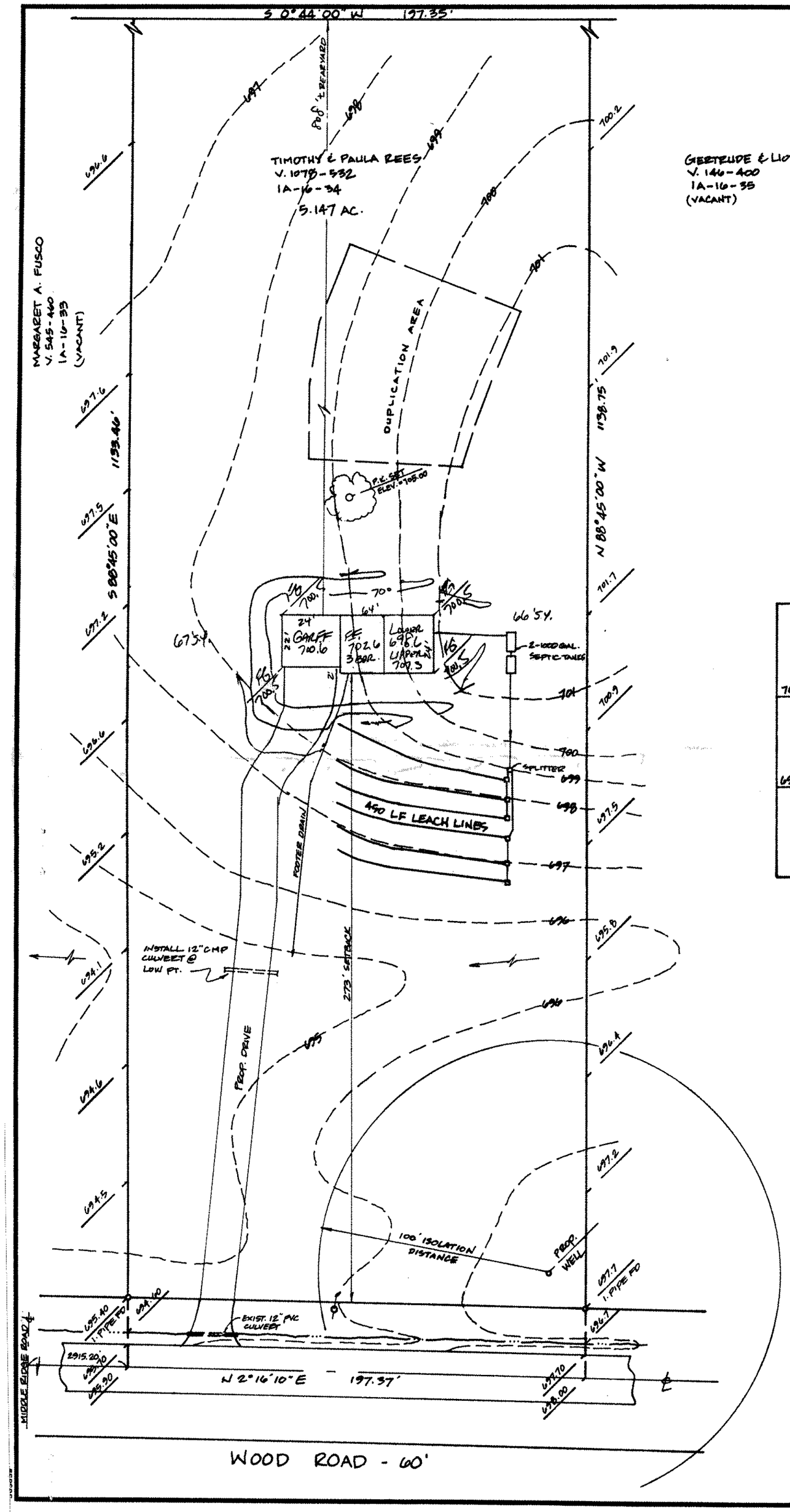
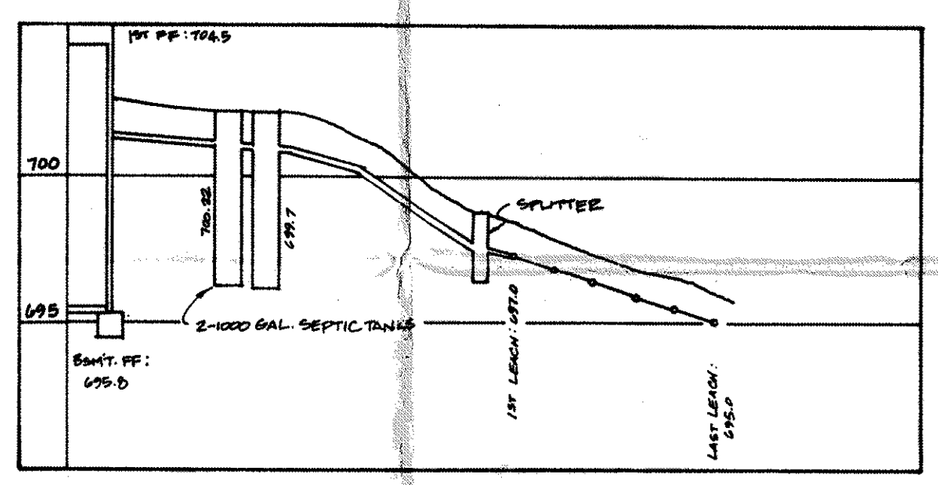
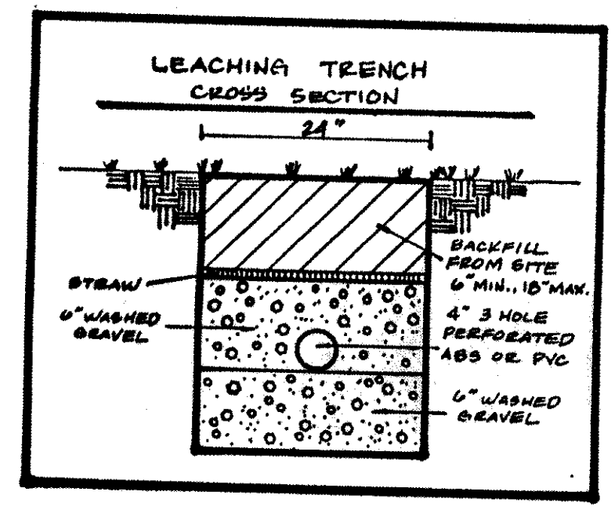



HYDRAULIC PROFILE




# SITE PLAN

MADISON TOWNSHIP, LAKE COUNTY, OHIO

**for:** TIM REES (CLIENT) ~~[illegible]~~ 466-9400 (OWNER)

3047 PRINCETON DR. MADISON OH
ADDRESS STREET CITY ZIP

| | |
|---|---|
| SUBDIVISION NAME | LOT 11 / TRACT 4 |
| VOL. – PG. | VOLUME 1078 / PAGE 532 |
| SUBLOT NO. STREET | PERM. PARCEL NO. 1A-16-34 / STREET WOOD RD. |

## LEGEND

SANITARY MANHOLE
STORM MANHOLE
INLET OR CATCH BASIN
HYDRANT
EXISTING CONTOURS
PROPOSED CONTOURS
EXIST. ELEV. 100.0 / PROP. ELEV. 100.0
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 | 5/9/96 | HT |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |

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

| | | |
|---|---|---|
| DRAWN BY | SCALE 1" = 40' | PHONE NO. 357-1811 |
| CHK'D. HT | DATE 7-24-95 | DRAWING NO. 95-203 |
| CREW CHIEF BB | APP'D. HT | |

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

## "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.

Reviewed and Accepted
LAKE COUNTY GENERAL HEALTH DISTRICT
Date 5-13-96
JOEL LUCIA, R. S., M. P. H.
Health Commissioner
BY J. Lindsay

BENCHMARK: P.K. SET IN 18" TREE APPROX. 350 FEET FROM EAST RIGHT OF WAY, WOOD RD.
ELEV.=705.00

[illegible] THOM[illegible], P.E.
Lake [illegible] Engineer
by GJP Date 5-23-96

"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 31st day of July, 1995 and that the elevations were taken at appropriate intervals and that as of that date they existed as indicated hereon."

Name Reg. No. #6343

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

APPROVED
MADISON TOWNSHIP ZONING
MAY 21 1996
PERMIT # 14695
ZONING INSPECTOR

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

APPROVED
MADISON TOWNSHIP ZONING
MAY 21 1996 AS REVISED
PERMIT # 14695
ZONING INSPECTOR