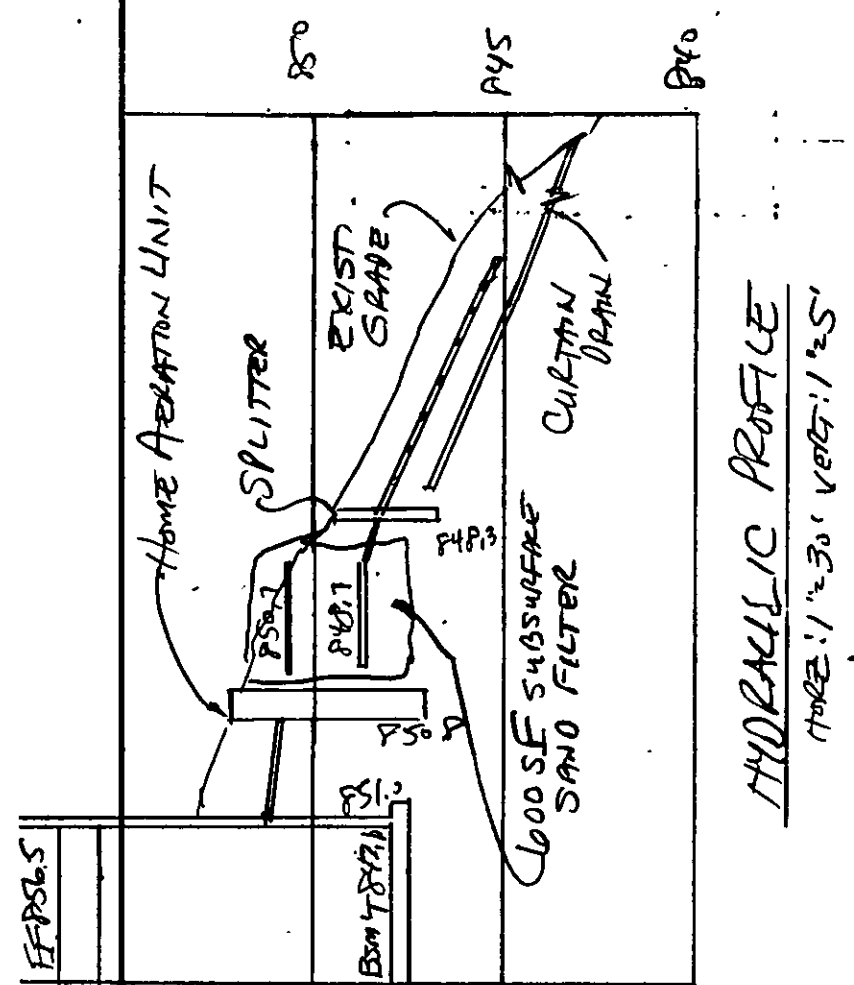


REVIEWED AND ACCEPTED
LAKE COUNTY GENERAL
HEALTH DISTRICT

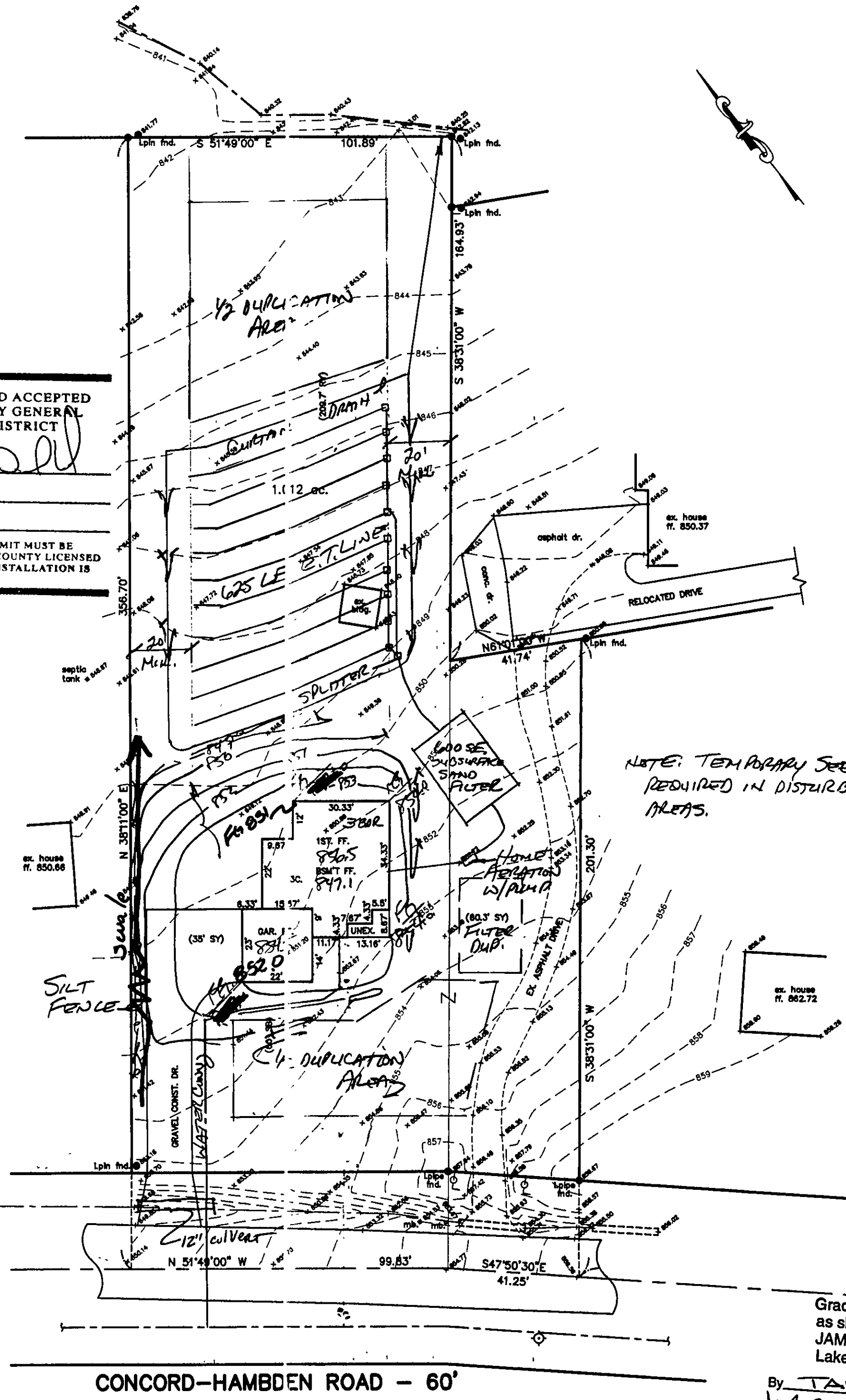
Date 7-11-01 By [Signature]

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



"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 Nov, 1999 and that the elevations were taken at appropriate intervals and that as of that date they existed as indicated hereon."

Name [Signature] Reg. No. 6343



SITE PLAN

CONCORD TOWNSHIP, LAKE COUNTY, OHIO

for: ED SULLIVAN

CLIENT: _____ OWNER: _____

ADDRESS: _____ STREET: _____ CITY: _____ ZIP: _____

ROBEY'S SUB. SUBMISSION: 1-96 NAME: _____ TRACT: _____ STREET: _____

10 VOL-PG. CONCORD-HAMBDEN LOT: _____ STREET: _____ VOL-PG. PERM. PARCEL NO.:

LEGEND

SANITARY MANHOLE: EXIST. ELEV. 100.0 PROP. ELEV. 100.0

STORM MANHOLE: AS BUILT ELEVATION

INLET OR CATCH BASIN:

HYDRANT:

EXISTING CONTOURS:

PROPOSED CONTOURS:

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 [Signature] 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. _____

PAVT TYPE GRADE CURBS _____

GAS LINE LOC. SIZE PRESSURE _____

SEPTIC TANK LOCATION & DUPPLICATION AREA _____

WELL LOCATION _____

ISOLATION RADIUS FROM WELL _____

REVISIONS

NO.	DATE	BY
1	6/27/01	TR
2	7/10/01	HJ
3		
4		
5		

PLAN PREPARED BY: **BABCOCK · JONES & ASSOCIATES, INC.**

PAINESVILLE, OHIO

DRAWN BY: T.R. SCALE 1"=30' PHONE NO. 440-357-1811

CHK'D. H.J. DATE 11/30/99 DRAWING NO. 99-291-10

CREW CHIEF W.B. APP'D H.J.

"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

TBM-USGS MON. #DL34 ELEV.=856.00

USGS BENCHMARK

WILLIAMS ROAD

200.00'

Grading Plan Approved as shown and/or noted JAMES R. GILLS, P.E. Lake County Engineer

By TAM Date 7-16-01

1. A RETURN OF WAY PERMIT MAY BE REQUIRED FROM ODOT FOR WORK WITHIN R/W.

2. LOWER FG. AND SWALE AS SHOWN.

3. ROOF DRAINS SHALL DISCHARGE TO SPLASH BLOCKS.

