



## SITE PLAN

LEROY TOWNSHIP, LAKE COUNTY, OHIO

for: Kelly Kinder Dye

CLIENT OWNER

ADDRESS STREET CITY ZIP

SUBDIVISION	NAME	LOT	TRACT
VOL. - PG.		9	3
SUBLOT NO.	STREET	VOLUME	PAGE
		74-34-3	BABCOCK RD.
		PERM. PARCEL NO.	STREET

### LEGEND

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

### CHECK LIST

NO. OF BEDROOMS	WATER MAIN SIZE, LOCATION
DIMENSIONS	SAN. SEWER SIZE % GR. LOC.
BEARINGS	SAN. MH. CAST. ELEV. INV. ELEV.
TIE TO NEAREST STREET	SAN. CONN. SIZE, LOC. DEPTH
SUBLOT NO. PARCEL NO.	STORM SEWER SIZE % GR. LOC.
SURROUNDING OWNERS	STORM MH. CAST. ELEV. INV. ELEV.
BLDG. DIMENSIONS FIN. GR.	PAV'T TYPE GRADE CURBS
BLDG. TIES FL'R. GRADES	GAS LINE LOC. SIZE PRESSURE
APRON TYPE WIDTH THICKNESS	SEPTIC TANK LOCATION & DUPLICATION AREA
SIDEWALK TYPE WIDTH THICKNESS	WELL LOCATION
CULVERT TYPE DIA., LENGTH	ISOLATION RADIUS FROM WELL
ROCK OUTCROPPINGS	

REVISIONS			PLAN PREPARED BY:		
NO.	DATE	BY	BABCOCK • JONES & ASSOCIATES, INC.		
1			PAINESVILLE, OHIO		
2					
3			DRAWN BY	SCALE	PHONE NO.
4			CHK'D.	DATE	357-1811
5			CREW CHIEF	APP'D.	DRAWING NO.
					96-166

### "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.

A. To be brought to this point TOP OF IRON PIN @ S.E. CORNER OF THIS PROPERTY ELEV. = 100.00

B. No footer drains or downspouts to be discharged into septic tanks

C. All waste water to be discharged into septic tanks

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

LOW YIELD WATER FIXTURES REQUIRED ON ALL:

Shower Head

Toilet

Reviewed and Accepted

LAKE COUNTY GENERAL HEALTH DISTRICT

Date 7-2-96

JOEL LUCIA, R. S., M. P. H.

Health Commissioner

BY J. Lucia

By 6114 Date 9-30-96

"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 13th day of June, 1996 and that the elevations were taken at appropriate intervals and that as of that date they existed as indicated hereon."

Name 6114 Reg. No. 6343