

SITE PLAN

LEROY TOWNSHIP, LAKE COUNTY, OHIO

for: SHANDLE

CLIENT	OWNER
ADDRESS	STREET
CITY	ZIP

EAGLE BROOK

SUBDIVISION	NAME	LOT	TRACT
17	VOL-PG. JENNINGS DR.	VOLUME	PAGE
SUBLOT NO.	STREET	PERM. PARCEL NO.	STREET

LEGEND

SANITARY MANHOLE

STORM MANHOLE

INLET OR CATCH BASIN

HYDRANT

EXISTING CONTOURS

PROPOSED CONTOURS

EXIST. ELEV. 100.0

100.0

PROP. ELEV. 100.0

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.

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			PLAN PREPARED BY:	
NO.	DATE	BY	BABCOCK · JONES & ASSOCIATES, INC.	
			PAINESVILLE, OHIO	
1			DRAWN BY	TR.
2			CHK'D.	H.J.
3			CREW CHIEF	W.B.
4			SCALE	1"=40'
5			DATE	3/16/98
			APP'D	H.J.
			PHONE NO.	216-357-1811
			DRAWING NO.	95-027-17

"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

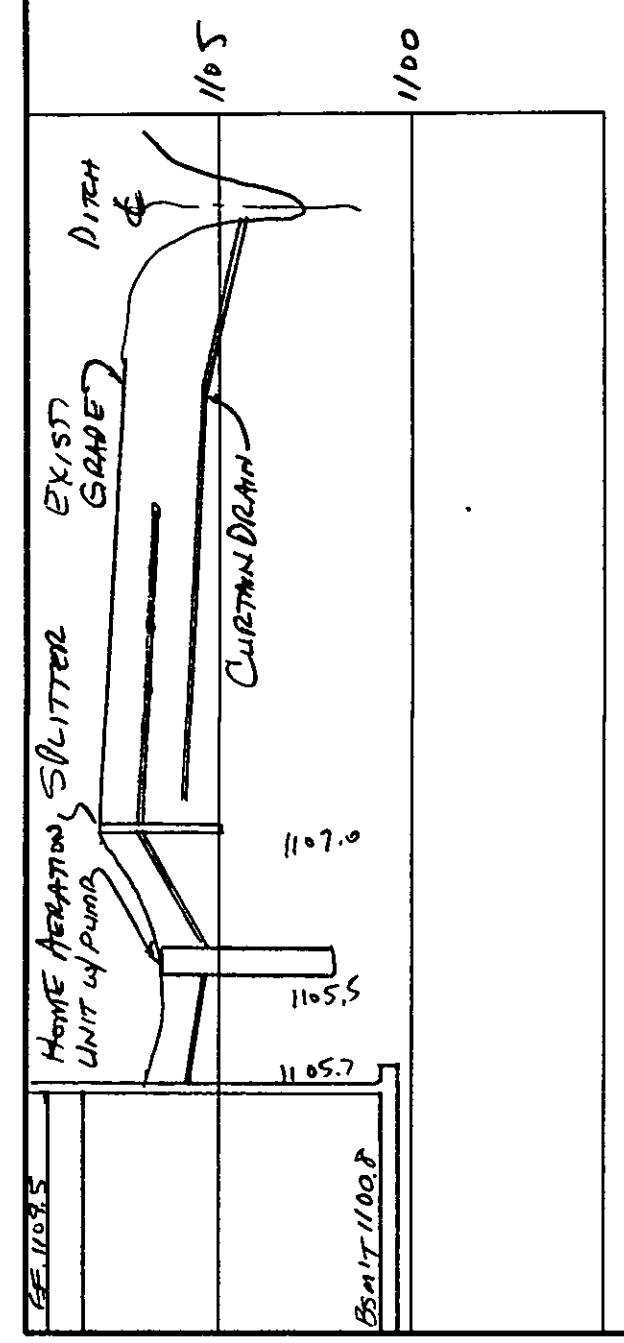
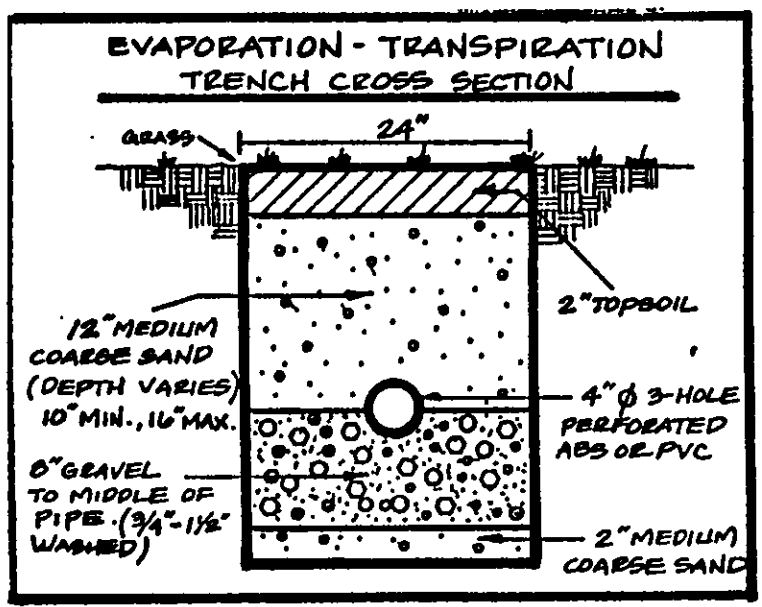
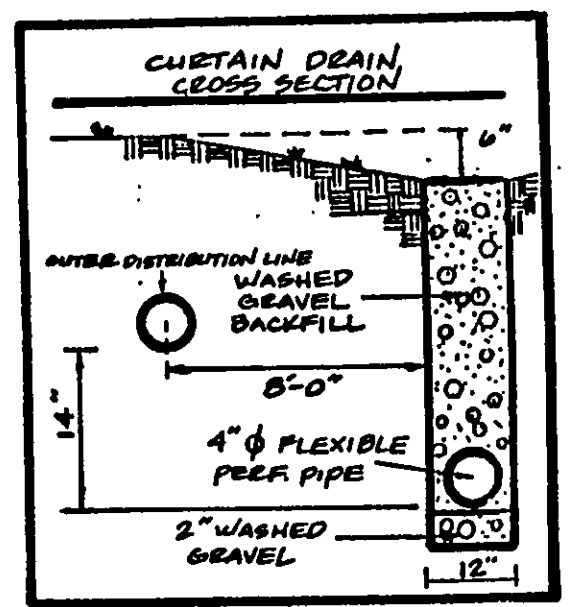
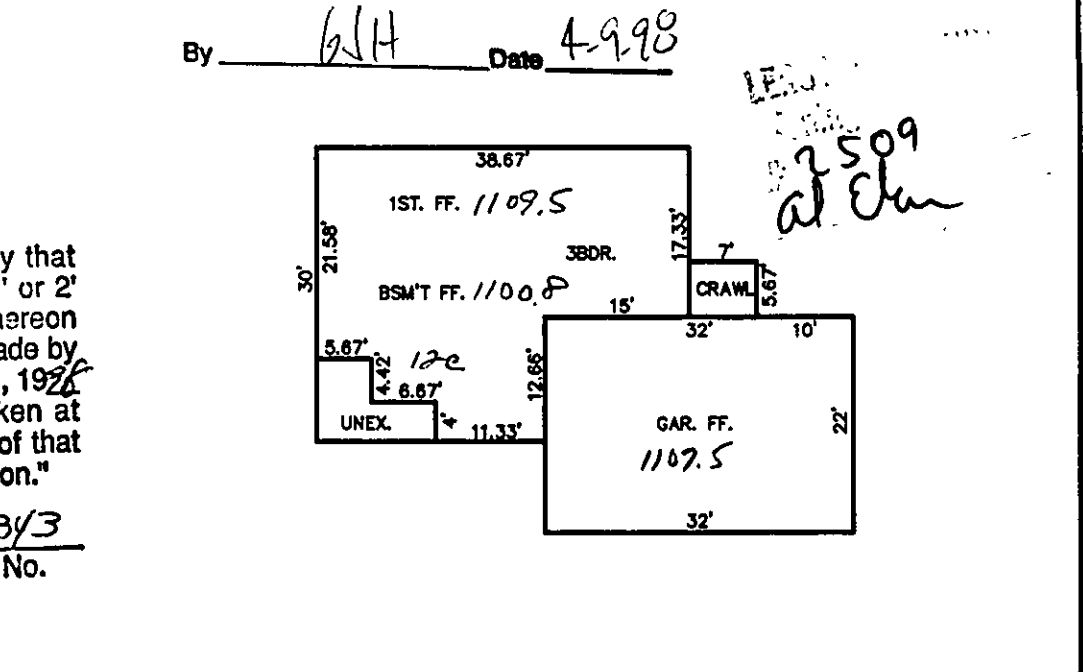
Grading Plan Approved as shown and/or noted

THOMAS P. GILLES, P.E.

Lake County Engineer

By: 6/14 Date: 4-9-98

REG. NO.



REVIEWED AND ACCEPTED

LAKE COUNTY GENERAL

HEALTH DISTRICT

Date: 3/24/98 BY: Daniel

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



"I, the undersigned, hereby certify that this topographic map, showing hereon represent an actual field survey made by me on the 13th day of March, 1998 and that the elevations were taken at appropriate intervals and that as of that date they existed as indicated hereon."

Name

Reg. No.

