

CONCORD TOWNSHIP, LAKE COUNTY, OHIO

for: DAN RUFO OWNER  
6605 DEVONSHIRE CT. MENTOR  
ADDRESS STREET CITY ZIP

KNIGHTS RIDGE SUB.	LOT
SUBDIVISION V-32	VOLUME
VOL. 70	PAGE
1000 EY RD	STREET
STREET	
SUBLOT NO. 5	PETAL. PARCEL NO.

WATER VALVE (GAS)	
WATER METER (GAS)	
AS BUILT ELEVATION	
MANHOLE	
SANITARY MANHOLE	
STORM MANHOLE	
INLET ON CATCH BASIN	
HYDRANT	

DISTRICT CONTROL LINE

INDICATED

PROPOSED CONTOURS  
ELEV. 1000  
ELEV. 1000  
PROP. ELEV.  
INDUCES  
DIRECTION OF  
SURFACE DRAINAGE

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

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

[illegible][illegible]

REVISIONS			PLAN PREPARED BY:		
NO.	DATE	BY	BABCOCK • JONES & ASSOCIATES, INC. PAINEVILLE OHIO		
1	2/1/79	HS			
2					
3					
4					
5					
6					

DRAWN BY			SCALE		
JD			1" = 40'		
CHKD.			DATE		
HS			6-5-80		
CREW			APPD.		
CHIEF			C.C.		

PHONE NO.	
357-1811	DRAWING NO.
	90-097-05

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.

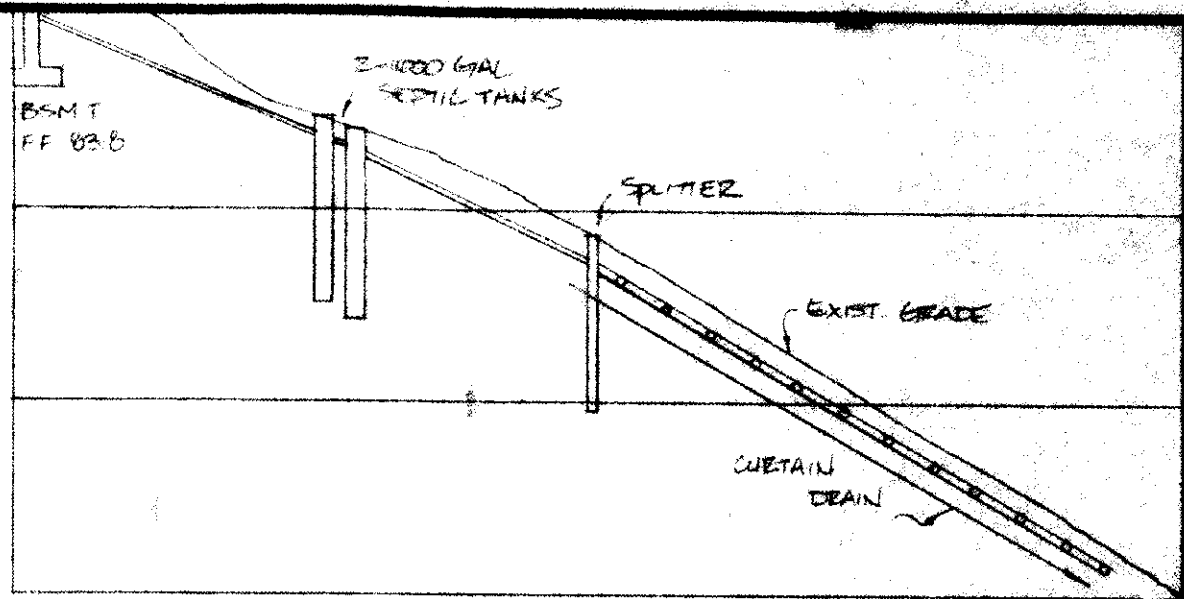
REGISTERED SURVEYOR

REG. NO.

TRAIL TOP OF PIN END SOUTHWEST CORNER  
OF LOT ECE = 100.00

"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 17<sup>th</sup> day of July, 19 20 and that the elevations were taken at appropriate intervals and that as of that date they existed as indicated hereon."

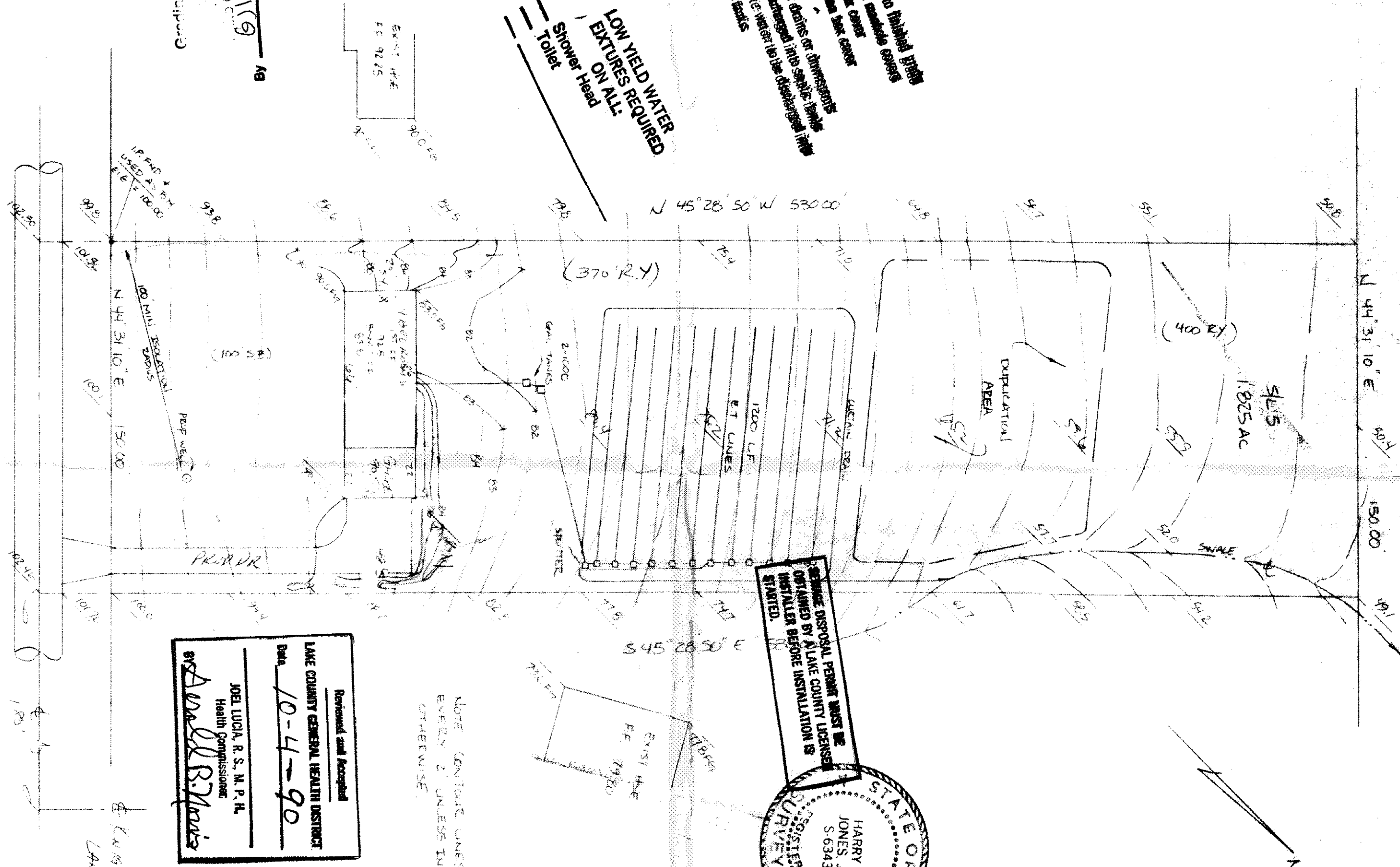
## Reg. No.



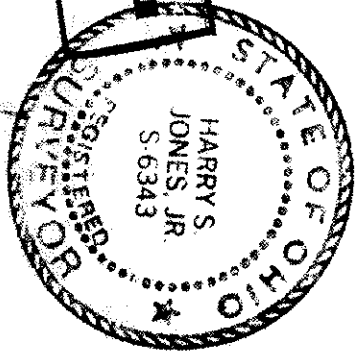
SCALE: HORIZ.  $\Rightarrow 1" = 30'$   
VERT.  $\Rightarrow 1" = 5'$

1. Specific tax credit
2. Surtax tax credit
3. Deduction tax credit
4. No action taken on company's behalf
5. No action taken on the company's behalf
6. No action taken on the company's behalf

**LOW YIELD WATER  
EXTURES REQUIRED  
ON ALL:  
Shower Head  
Toilet**



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



NOTE: CONTACT LINES ARE  
EVERY 2' UNLESS INDICATED  
OTHERWISE

Revised and Accepted \_\_\_\_\_  
 LAKE COUNTY GENERAL HEALTH DISTRICT  
 Date 10-4-90  
 JOEL LUCIA, R. S., M. P., H.  
 Health Commissioner  
 vs. Donald B. Morris

Grading Plan Approved  
by and/or noted  
by J. GILLES, P.E.  
Orange County Engineer  
6/17 Date 10/11/00

CERTIFICATION: THE UNDERSIGNED  
HEREBY CERTIFIES THAT HE HAS MADE  
AN ACCURATE SURVEY OF THE PREMISES.