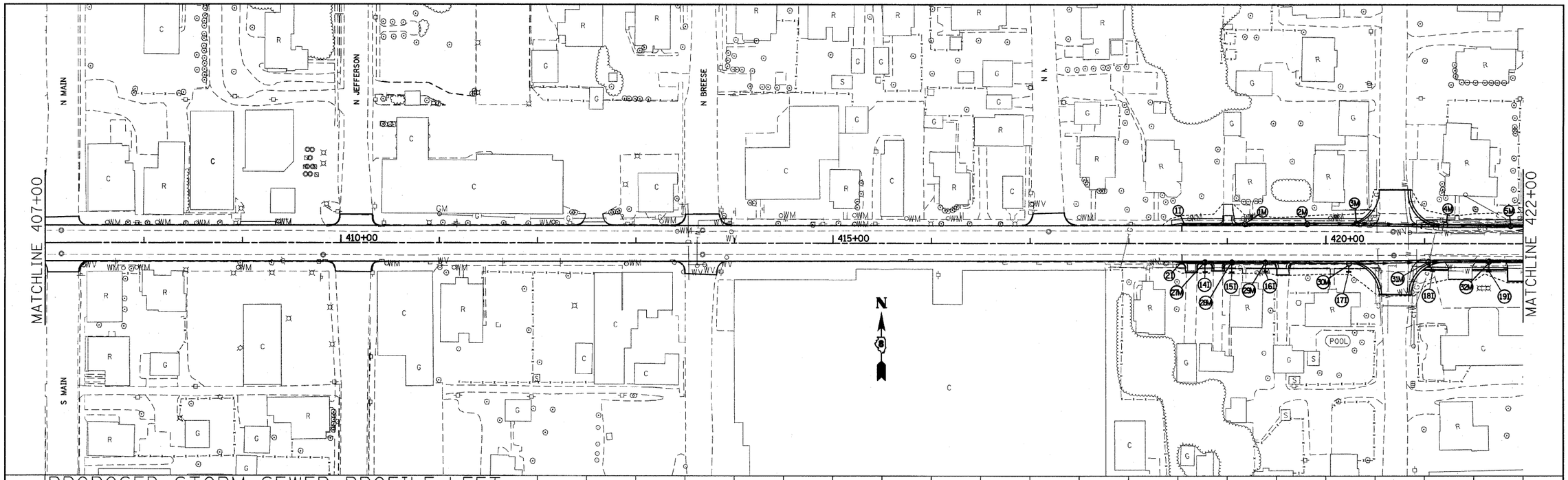
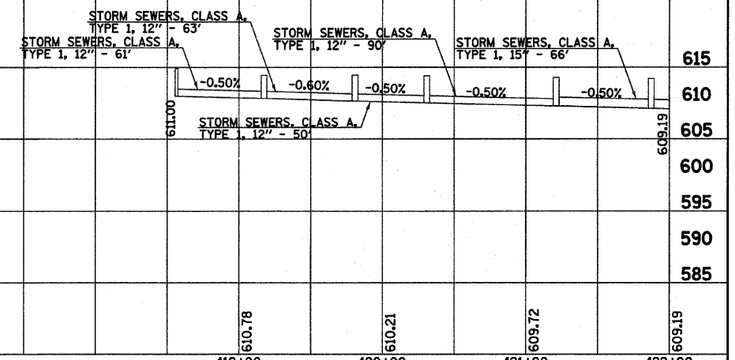
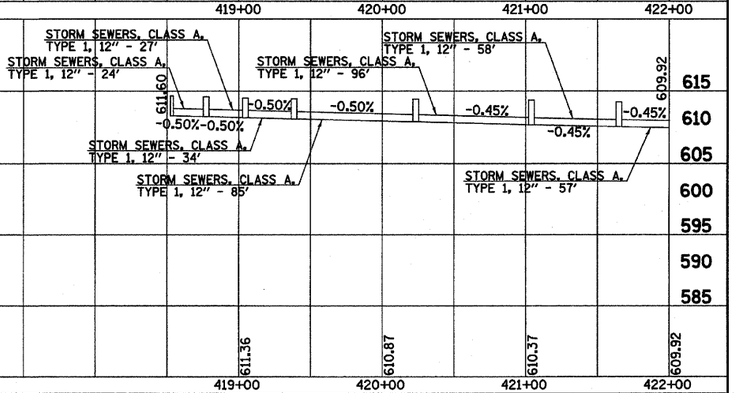
PLAN	DATE
SURVEYED	
PLOTTED	
ALIGNMENT CHECKED	
RT. OF WAY CHECKED	
CADD FILE NAME	
NOTE BOOK	
NO.	



PROPOSED STORM SEWER PROFILE-LEFT



PROPOSED STORM SEWER PROFILE-RIGHT



PROFILE	DATE
SURVEYED	
PLOTTED	
CROSS SECTIONS CHECKED	
BAL. NOTED	
STRUCTURE NOTATIONS CHKD	
NOTE BOOK	
NO.	

FILE NAME = $FILEL$	USER NAME = $USER$	DESIGNED - ___	REVISED - ___
		CHECKED - ___	REVISED - ___
	PLOT SCALE = $SCALE$	DRAWN - ___	REVISED - ___
	PLOT DATE = $DATE$	CHECKED - _____	REVISED - ___

STATE OF ILLINOIS
DEPARTMENT OF TRANSPORTATION

STORM SEWER SHEETS

SCALE: _____ | SHEET NO. __ OF ___ SHEETS | STA. _____ TO STA. _____

F.A.P. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.
809	(133,134)RS-5,135RS-6	ST. CLAIR	762	110
		CONTRACT NO. 76A47		
FED. ROAD DIST. NO. _	ILLINOIS	FED. AID PROJECT		