

ENTERED

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County Zoning Department
P.O. Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED
APR 17 2008

Application No.: 08-0137
Date: _____
Zoning District: R-RB/Class 1
Amount Paid: \$75.00 4/17/2008
F.T.T.

INSTRUCTIONS: No permits will be issued until all fees are paid. Bayfield Co. Zoning Dept. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.

LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER _____
Legal Description: _____ 1/4 of Section 22 Township 49 North, Range 4 West, Town of Bayview
Gov't Lot 1 Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 2.54

Volume 959 Page 271 of Deeds Parcel I.D. # 008-1028-04 Use Tax Statement for Legal Description

Property Owner RON & Grace Hutchinson Contractor Fritz Wildbush 209 1034
Address of Property 78210 Singer Rd. Plumber _____

Washburn, WI 54891
Telephone 269-420-3956 (Home) _____ (Work) _____
Authorized Agent Fritz Wildbush (Phone) 209-1034

Is your structure in a Shoreland Zone? Yes No If yes, _____
Written Authorization Attached: Yes No

Structure: New _____ Addition Existing _____
Basement: Yes _____ No Number of Stories 1
Estimated Cost of Construction \$5,000 Square Footage 222 Sanitary: New _____ Existing Holding Tank
USE: _____ Privy _____ City _____

- * Residence or Principal Structure (# of bedrooms) _____
Residence sq. ft. _____
- * Residence w/deck-porch (# of bedrooms) _____
Residence sq. ft. _____ Porch sq. ft. _____
- Deck sq. ft. _____ Deck(2) sq. ft. _____
- * Residence w/attached garage (# of bedrooms) _____
Residence sq. ft. _____ Garage sq. ft. _____
- Residential Addition / Alteration (explain) Extension of roof overhang
- Residential Accessory Building (explain) _____
- Residential Accessory Building Addition (explain) _____
- Residential Other (explain) _____
- Mobile Home (manufactured date) _____
- Commercial Principal Building _____
- Commercial Principal Building Addition (explain) _____
- Commercial Accessory Building (explain) _____
- Commercial Accessory Building Addition (explain) _____
- Commercial Other (explain) _____
- Special/Conditional Use (explain) _____
- External Improvements to Principal Building (explain) _____
- External Improvements to Accessory Building (explain) _____

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature) Fritz Wildbush Date 17 April 08

Address to send permit 1047 10th Ave. W. Washburn, WI 54891 ATTACH
Copy of Tax Statement

* See Notice on Back
If you previously purchased the property Attach a Copy of Recorded Deed

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit issued: _____ State Sanitary Number 07-1865 Date 10/02/2007
Date 5/16/08 Permit Number 08-0137 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Meets code requirements per owner's representation. Contractor present at time of inspection. Verified proposed roof addition. By Traivis Tulevitsky Date of Inspection 4/30/2008

Mitigation Plan Required: Yes No Variance (B.O.A.) # _____

Condition: _____

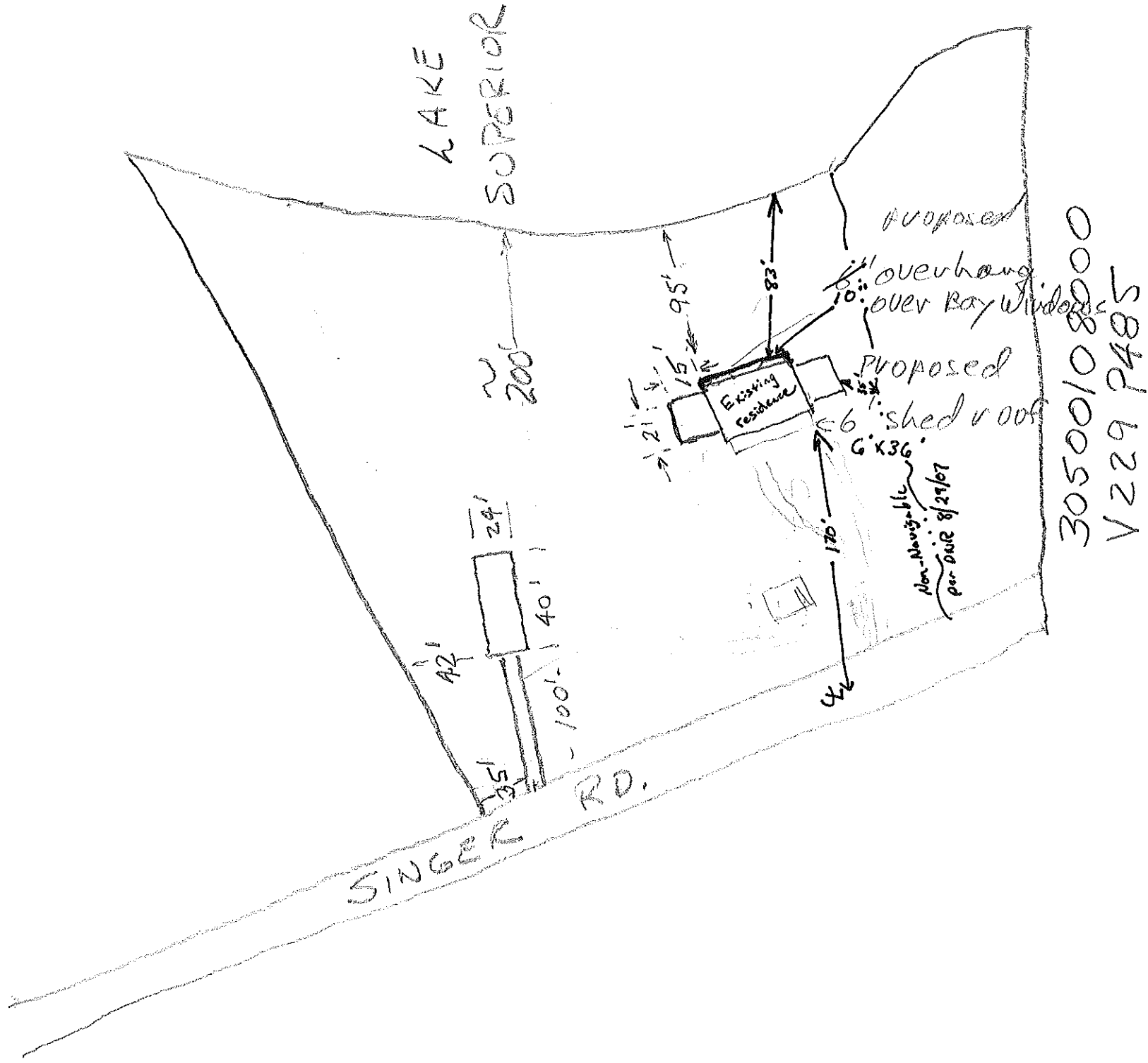
Signed Traivis Tulevitsky 4/30/2008
Rec'd for Inspection _____ Date of Approval _____

MAY 15 2008

Secretarial Staff

78210 SINGEE RD. N
RONALD & GRACE HUTCHINSON ↑
PH. 373-0109

Town of BAYVIEW



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 P.O. Box 58
 Washburn, WI 54891
 (715) 373-6138

**APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN**

RECEIVED
 APR 17 2008
 Bayfield Co. Zoning Dept.

RECEIVED

Application No: 08-0136
 Date: _____
 Zoning District R-RB/Class 1
 Amount Paid: \$175.00/4/17/2008
T.T.

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.

LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER Class A
 Legal Description: _____ 1/4 of Section 22 Township 49 North, Range Y West, Town of Bayview
 Gov't Lot 1 Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 2.54
 Volume 957 Page 271 of Deeds Parcel I.D. # 008-1028-04 Use Tax Statement for Legal Description
 Property Owner Ron Hutchinson Contractor Fritz Wildbush (Phone) 209-1034
 Address of Property 78210 Singer Rd. Plumber _____

Authorized Agent Fritz Wildbush (Phone) 209-1034
 Telephone 269-420-3956 (Home) _____ (Work) _____
 Is your structure in a Shoreland Zone? Yes No If yes, _____
 Structure: New _____ Addition _____ Existing _____ Basement: Yes _____ No
 Estimated Cost of Construction _____ Square Footage 2,280 Sanitary: New _____ Existing Privy _____ City _____
 USE: * Residence or Principal Structure (# of bedrooms) _____

- Residence sq. ft. _____
- * Residence w/deck-porch (# of bedrooms) _____
- Residence sq. ft. _____ Porch sq. ft. _____
- Deck sq. ft. _____ Deck(2) sq. ft. _____
- * Residence w/attached garage (# of bedrooms) _____
- Residence sq. ft. _____ Garage sq. ft. _____
- Residential Addition / Alteration (explain) _____
- Residential Accessory Building (explain) _____
- Residential Accessory Building Addition (explain) _____
- Residential Other (explain) Shoreland Grading
- Mobile Home (manufactured date) _____
- Commercial Principal Building _____
- Commercial Principal Building Addition (explain) _____
- Commercial Accessory Building (explain) _____
- Commercial Accessory Building Addition (explain) _____
- Commercial Other (explain) _____
- Special/Conditional Use (explain) _____
- External Improvements to Principal Building (explain) _____
- External Improvements to Accessory Building (explain) _____

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

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Owner or Authorized Agent (Signature) Fritz Wildbush Date 17 April 08
 Address to send permit 1047 10th Ave. W. Washburn, WI 54891 Copy of Tax Statement ATTACH
 If you previously purchased the property Attach a Copy of Recorded Deed

* See Notice on Back APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit issued: _____ State Sanitary Number _____ Date _____
 Date 5/16/08 Permit Number 08-0136 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Excavating & landscaping area on road side of house to direct storm water away from structure, excavated material will be used on lake side. By Travis Telawig Date of inspection 4/30/2008 of residence for at-grade parts. Excavating, grading & fill will be located outside of buffer zone.
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____

Condition: Properly install silt fence down slope of disturbed/excavated area.
 Signed Travis Telawig Inspector Date of Approval 5/14/2008
 Rec'd for issuance

P. 6

SITE LAYOUT UTILITIES POWER & PHONE

