

**APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN**

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

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 _____

Use Tax Statement for Legal Description
Legal Description SW 1/4 of SE 13 Township 49 North, Range 5 West, Town of Bay View

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 5
Volume 978 Page 223 of Deeds Parcel I.D. 008-1052-01000

Property Owner Peter J Zimdars Contractor Self (Phone) ibid
Address of Property Mattson Rd Fire # has Plumber none
been applied for Washburn, WI 54891 Authorized Agent _____ (Phone) _____

Telephone (51) 307-0696 (Home) _____ (Work) _____
Is your structure in a Shoreland Zone? Yes No If yes, _____
Written Authorization Attached: Yes No

Structure: New Addition _____ Existing _____
Fair Market Value 1000 Square Footage 320
Basement: Yes _____ No Number of Stories 1

USE: * Residence or Principal Structure (# of bedrooms) Storage (16' x 20') City _____
Residence sq. ft. _____
 * Mobile Home (manufactured date) _____

* Residence w/ deck-porch (# of bedrooms) _____
Residence sq. ft. _____ Porch sq. ft. _____
 Commercial Principal Building _____
 Commercial Principal Building Addition (explain) _____

Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (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 _____
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) [Signature] Date Sept 5 '08
Address to send permit 601 W. Laurel St Stillwater, MN 55082

* See Notice on Back
APPLICANT - PLEASE COMPLETE REVERSE SIDE
Copy of Tax Statement or Attach a Copy of Recorded Deed

Permit Issued: _____ State Sanitary Number _____ Date _____
Date 10/9/08 Permit Number 08-05574 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Meets code requirements per owner's representation. Owner present at time of inspection. Property has been surveyed by Travis Tubowitz. Date of inspection 10/07/2008 and report was submitted by Northern Environmental Inc. (Attached) flags found.

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

Signed Travis Tubowitz Date of Approval 10/08/2008
Inspector _____

Rec'd for Issuance _____
OCT 17 2008
Secretary Staff

Application No: 08-05574
Date: _____
Zoning District AG-1
Amount Paid: \$125.00 FDS
10/8/08

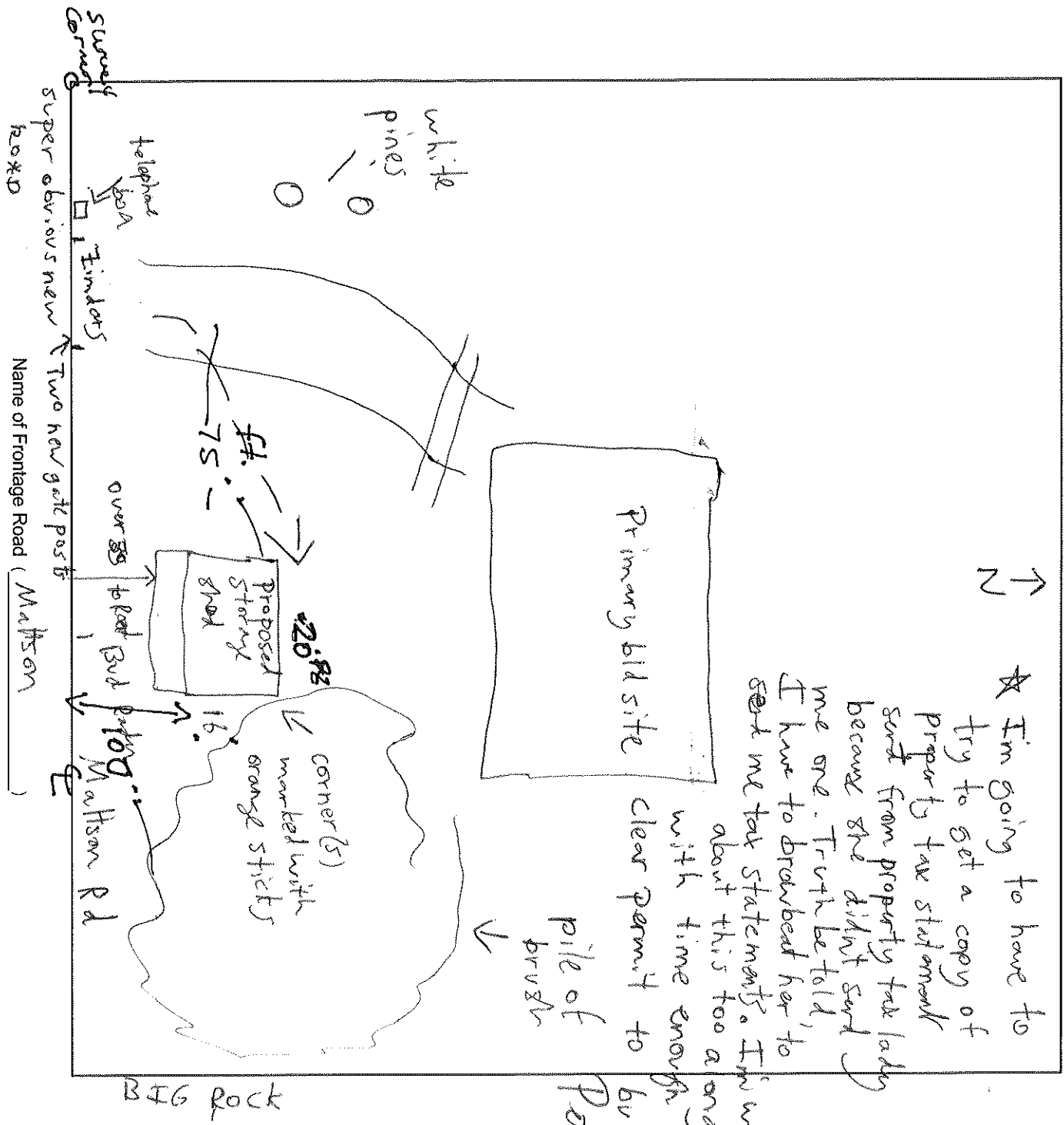
SEP 11 2008
Bayfield County Zoning Dept.
SEP 29 2008
BEEN ISSUED TO APPLICANT
Bayfield County Zoning Dept.

ENTERED

Lot Line



★ I'm going to have to try to get a copy of property tax statements sent from property tax lady because she didn't send me one. Truth be told, I have to browbeat her to get me tax statements. I'm worried about this too a long with time enough to clear permit to build pile of brush Peter



IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY. FOLLOW
STEPS 1-8 (a-o) COMPLETELY.

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the location, size and dimensions of the structure. 12x16 ft x approx 12 ft peak
3. Show the location, size and dimensions of attached deck(s), porch(s) or garage.
4. Show the location of the well, holding tank, septic tank and drain field. *not applicable*
5. Show the location of any lake, river, stream or pond if applicable.
6. Show the location of other existing structures.
7. Show the location of any wetlands or slopes over 20 percent.
8. Show dimensions in feet on the following:
 - a. Building to all lot lines
 - b. Building to centerline of road
 - c. Building to lake, river, stream or pond
 - d. Holding tank to closest lot line
 - e. Holding tank to building
 - f. Holding tank to well
 - g. Holding tank to lake, river, stream or pond
 - h. Privy to closest lot line
 - i. Privy to building
 - j. Privy to lake, river, stream or pond
 - k. Septic Tank and Drain field to closest lot line
 - l. Septic Tank and Drain field to building
 - m. Septic Tank and Drain field to well
 - n. Septic Tank, and Drain field to lake, river, stream or pond.
 - o. Well to building

*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits.

Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.

APPLICATION FOR SIGN

Bayfield County Zoning Department
P.O. Box 58
117 East Sixth Street
Washburn, WI 54891
Phone - (715) 373-6138

R E C E I V E D
OCT 07 2008

Bayfield Co. Zoning Dept.

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

Office Use:
Application No. 08-0558
Date _____
Fee Paid \$50.00
10/6/08

Applicant Lake Superior Storage LLC **Contractor** TRUDEAN CONSTRUCTION
Address PO Box 1187 **Authorized Agent** Tom Tubau-Guener
Bayfield, WI 54814 **Agent's Telephone** 715-779-3344
Telephone 715-779-3344 **Written Authorization Attached:** Yes No ()

Accurate Legal Description involved in this request: AG-1
SE 1/4 of SW 1/4 of Section 28 Township 49 N. Range 4 W. Town of Bayview **Zoning District:**
Gov't Lot 1 **Block** 1 **Subdivision** CSM # 1561
Volume 981 **Page** 232 **of Deeds** Parcel I.D. # 04-008-2-49-04-28-3 04-00-12002
ACREAGE 8.21

Additional Legal Description: _____ **ATTACH Copy of Tax Statement**
Sign: On-premise Off-premise **Sign:** New Replacement
2.5' x 19.5' = 48.75 sq ft 24.5' = 61.25'
Size of Sign: _____ **Feet by Feet** 2.5' x 10.5' = 26.25 sq ft **Height of Sign:** 26' **Feet from grade to top of Sign**
13.5' = 33.75' (ON THE BUILDING)
I, _____ total 95 sq. ft. **owner of the above described property, do hereby give**
my authorization for _____ **to erect and maintain a sign on my property.**

Signed _____ **Date** _____ **Property Owner** _____
FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
APPLICANT - PLEASE COMPLETE REVERSE SIDE

For Office Use Only
Permit issued: _____ **Permit Number** 08-0558 **Permit Denied (Date)** _____
Date 10/10/08
Reason for Denial: _____
Inspection Record: Meets code requirements per owner's representation, Karl K. and I measured length of letters (sign) determined By Travis Tybirtsky Date of Inspection 10/09/2008
Sign area to be 95 sq. ft.
Variance (B.O.A.) # _____
Condition _____
Signed Travis Tybirtsky **Date of Approval** 10/09/2008
Inspector _____ **Date of Approval** _____
OCT 10 2008

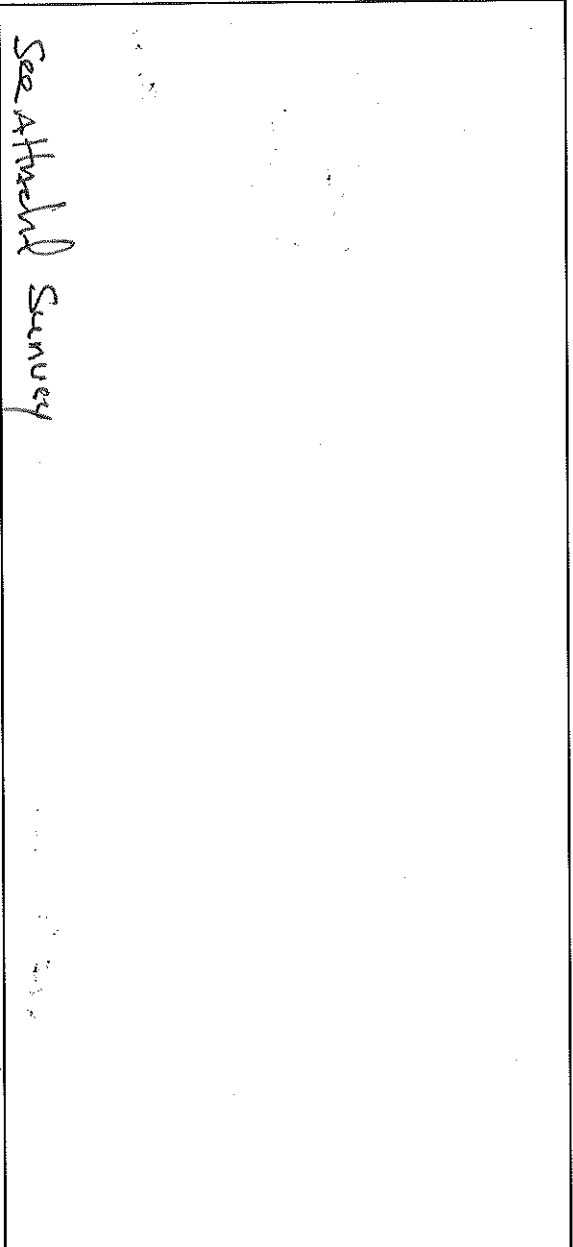
1. Name and use frontage road as a guideline, and indicate North (N) on plot plan

2. Show the sign location

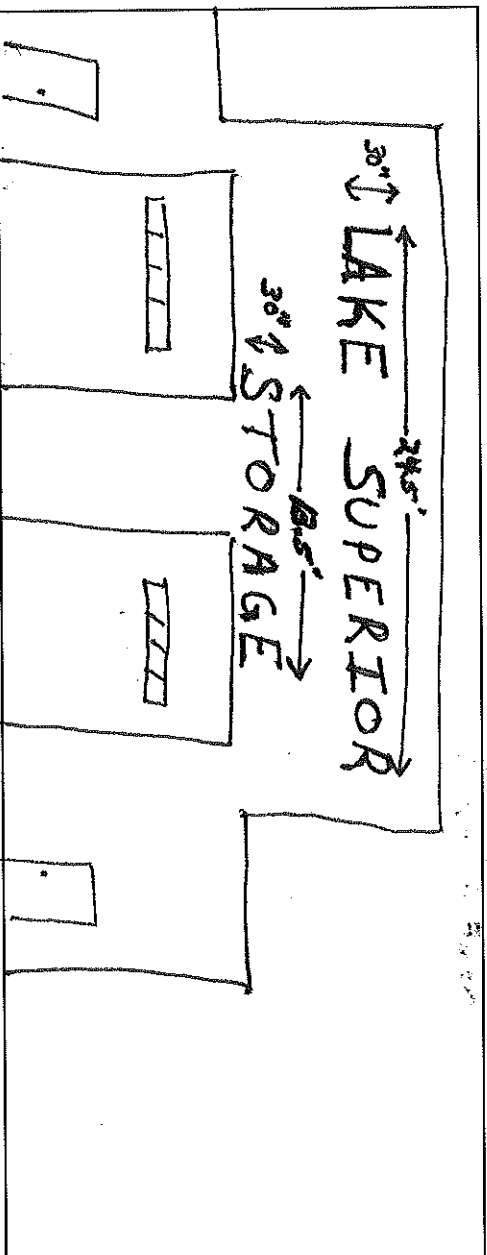
IMPORTANT
Detailed Plot Plan is Necessary

3. Show dimensions in feet on the following:

- a. Sign from centerline of road(s).
- b. Sign from right-of-way line
- c. Sign from property lines
- d. Sign from lake, river, stream or pond
- e. Sign from other signs



Name Frontage Road (Hwy 13)
 NOTICE: The local town, village, city, state or federal agencies may also require permits.
 Sign Plan
 (Fill in Information Desired on Sign)



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.

I, the undersigned, attest that the information contained herein is accurate and true.

[Handwritten Signature]

Applicant's/ Agent's Signature
 Paul Bax 1187 Bayfield SWNY

Date 12/7/05

Address to Mail Permit to