

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 27 2010

Application No.: 10-0127
 Date: _____
 Zoning District: F-1
 Amount Paid: \$950 fees
\$175 class A
4/29/10 mg
 Class A

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 NE 1/4 of SE 1/4 of Section 04 Township 49 North, Range 05 West, Town of Bayview
 Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 40
 Volume 1036 Page 792 of Deeds Parcel I.D. 008-1047-10-000 04.008.2.49.05.04.901.000.10000

Property Owner Stephen R. Kreusev Contractor _____ (Phone) _____
 Address of Property "Applied for Forest Road 102" Plumber to be determined

Authorized Agent Jill Lorenz (Phone) 373.5908

Telephone 373.1019 (Home) 373.0128 (Work)

Is your structure in a Shoreland Zone? Yes No If yes.

Structure: New Addition _____ Existing _____
 Fair Market Value \$15,000 Square Footage 730

* Residence or Principal Structure (# of bedrooms) 1

Residence sq. ft. 670

* Residence w/deck-porch (# of bedrooms) 1 bedroom

Residence sq. ft. 640 Porch sq. ft. _____

Deck sq. ft. 60 Deck(2) sq. ft. 80

* 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) _____

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) Jill Lorenz Date 04.26.2010

Address to send permit 320 Superior, Washburn, WI 54891

ATTACH
 Copy of Tax Statement or

(If you recently purchased the property Attach a Copy of Recorded Deed)

* See Notice on Back

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number 10-255 Date 5/12/2010

Date 5/12/10 Permit Number 10-0127 Permit Denied (Date) _____

Reason for Denial: _____

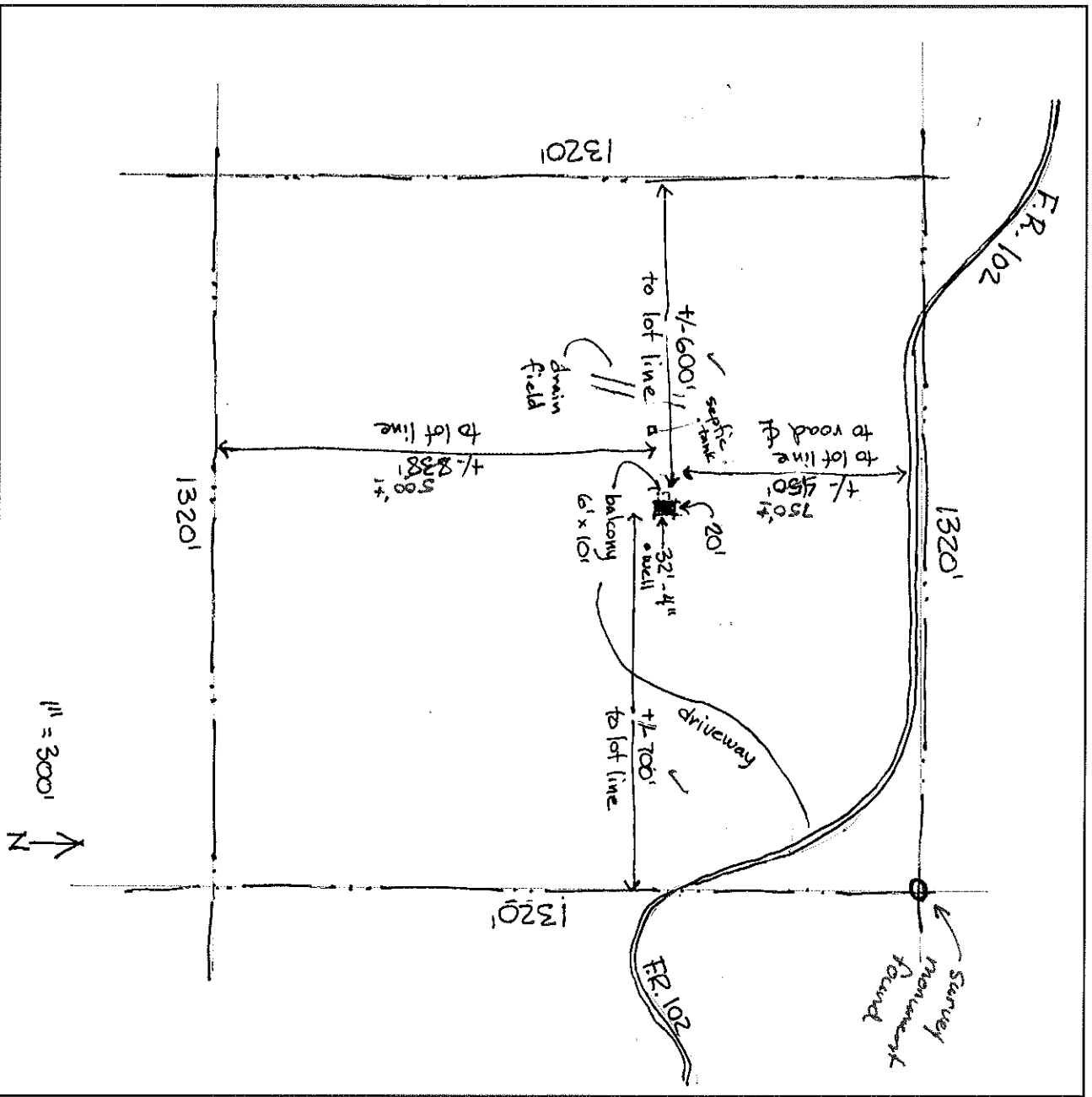
Inspection Record: Meets code requirements per agent's representation. Proposed site will staked, northeast corner of 90 found. North line appears to be 200' North of F.R. 102.
 By Travis Tulowitky Date of Inspection 5/11/2010

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

Condition: _____

Signed Travis Tulowitky Date of Approval 5/12/2010
 Inspector

Lot Line



Name of Frontage Road (Forest Road 102)

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.
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.
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 100' min
 - l. Septic Tank and Drain field to building 20' min
 - m. Septic Tank and Drain field to well 50' min
 - n. Septic Tank, and Drain field to lake, river, stream or pond.
 - o. Well to building 10' min

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

*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.