

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
 JUL 02 2010

Application No: 10-0316
 Date: _____
 Zoning District: F-1 Class 1
 Amount Paid: \$175 7/9/10 mg

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
W 190 OF E 550 1/4 of Section 23 Township 51 North, Range 6 West, Town of BEW
 Gov't Lot 3 Lot _____ Block _____ Subdivision _____ Parcel I.D. 04-010-2-51-06-23-3 CSM # _____ Acreage 5.45 +/-

Volume _____ Page _____ of Deeds _____
 Property Owner Keith + Deborah K. Clayton
 Address of Property Between 23370 and 23430 Spirit Point Rd - Address applied for
 Authorized Agent Bill Sloan (Phone) 715 742-3490
 Contractor Bill Sloan (Phone) 715 742-3490
 Plumber _____

Telephone 651 341 8009 (Home) _____ (Work) _____
 Is your structure in a Shoreland Zone? Yes No If yes, _____
 Structure: NA New Addition Existing
 Fair Market Value _____ Square Footage 4800
 Type of Septic/Sanitary System _____
 Mobile Home (manufactured date) _____
 Commercial Principal Building _____
 Commercial Principal Building Addition (explain) _____
 Commercial Accessory Building (explain) _____
 Commercial Accessory Building Addition (explain) _____
 Commercial Other (explain) _____

Written Authorization Attached: Yes No
 Distance from Shoreline: greater than 75' 75' to 40' less than 40'
 Basement: Yes No Number of Stories 1 1/2
 Sanitary: New _____ Existing _____ Privy _____ City _____
 Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) _____
 Special/Conditional Use (explain) GRADING
 External Improvements to Principal Building (explain) _____
 External Improvements to Accessory Building (explain) _____

FAILURE TO OBTAIN A PERMIT OF 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] Deborah K. Clayton Date 6/24/10
 Address to send permit PO Box 209 Cornucopia, WI 54827
 Attach _____
 Copy of Tax Statement or _____
 Attach a Copy of Recorded Deed _____

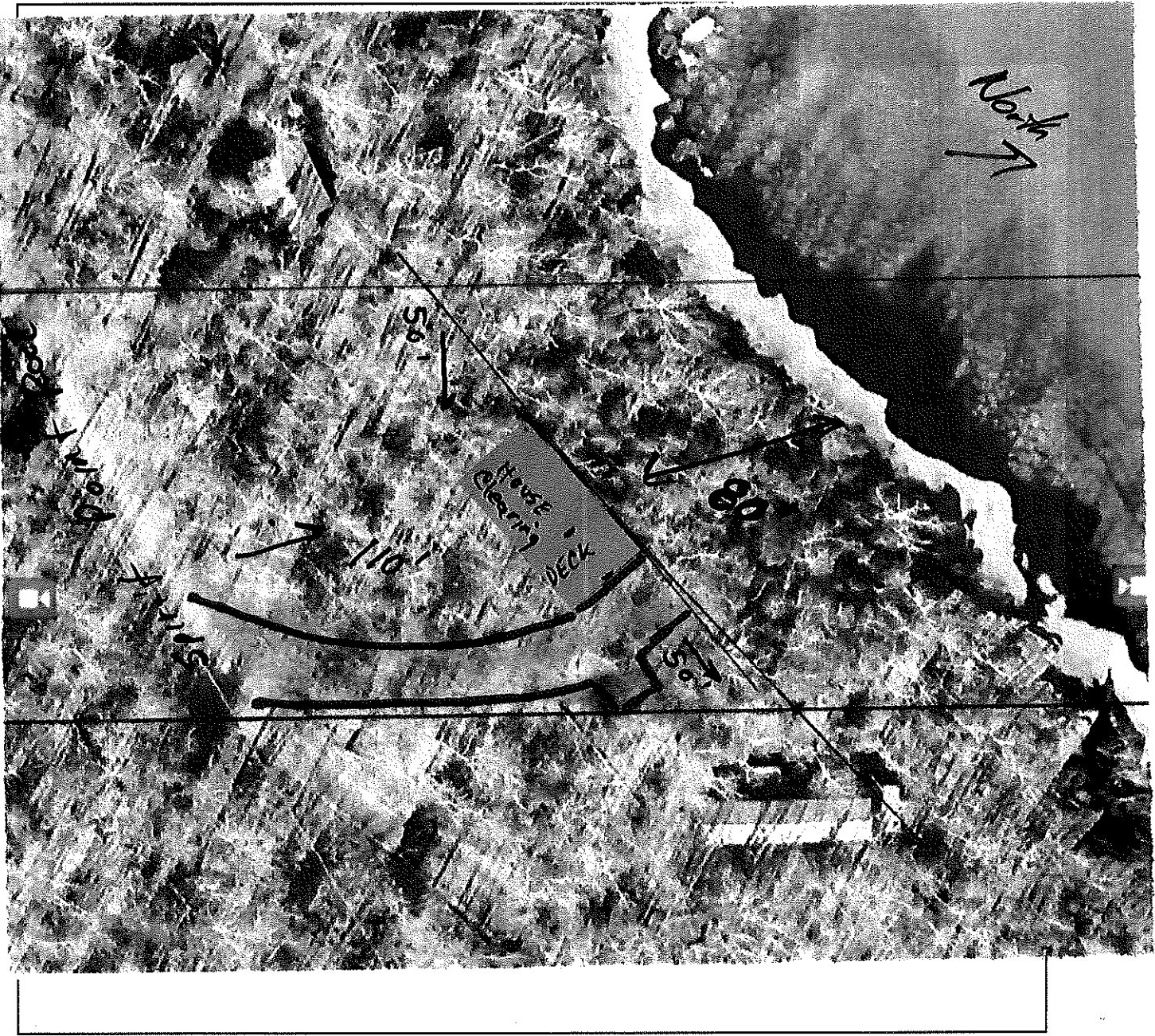
* See Notice on Back
 APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number _____ Date _____
 Date 8/18/10 Permit Number 10-0316 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: PROPOSED AREA OF SITE DISTURBANCES HAVE BEEN DRAINED
 By DOC Date of Inspection 7-16-10
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: NO LAND DISTURBANCES MAY OCCUR SO UNDOING OF THE HIGH WATER MARK OF THE LAKE
IT IS RECOMMENDED THAT THE AMOUNT OF EROSION SO BE MINIMIZED AND, THAT THE COMPLETION OF SITE REPARATION ACTIVITIES ALL EROSION SOUS BE SEEDED & MULCHED. SALT PELLET SHOULD BE INSTALLED DIVISIONS ARE REEVALUATED
 Signed [Signature] Inspector _____ Date of Approval 7-16-10

How For - DA

AUG 16, 2010

Secretarial Staff



Name of Frontage Road (Spirit Point Rd.)

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
 - 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

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.