

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
MAY 23 2011

Bayfield Co. Zoning Dept.

Application No.: 11-0143
Date: 6-1-11
Zoning District: R-1/CMS
Amount Paid: \$100.00 205
5/24/11

ENTERED

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 SW 1/4 of Section 22:23 Township 51 North, Range 6 West, Town of Bell

Gov't Lot _____ Lot 1 Block _____ Subdivision _____ CSM # _____ Acreage 4.34

Volume 624 Page 191 of Deeds Parcel I.D. 04010251062246500103000

Property Owner STEVEN & RUTH HEATH Contractor TERRY MITCHELL (Phone) 715 682-5808

Address of Property 90845 Birch Hill Rd Plumber _____

_____ CORNICEPIA, WI. Authorized Agent _____ (Phone) _____

Telephone 715-742-3407 (Home) 763-473-0818 (Work)

Is your structure in a Shoreland Zone? Yes No If Yes, _____

Distance from Shoreline: greater than 75' 75' to 40' less than 40'

Structure: New _____ Addition _____ Existing _____ Basement: Yes _____ No Number of Stories N/A

Fair Market Value \$8,000 Square Footage 196' Sanitary: New _____ Existing Privy _____ City _____

USE: Residential or Principal Structure (# of bedrooms) _____ Type of Septic/Sanitary System A.F.S.

Residence or Principal Structure (# of bedrooms) _____ Mobile Home (manufactured date) _____

Residence sq. ft. _____ Commercial Principal Building _____

Residence w/deck-porch (# of bedrooms) _____ Commercial Principal Building Addition (explain) _____

Residence sq. ft. _____ Porch sq. ft. _____ Commercial Accessory Building (explain) _____

Deck sq. ft. _____ Deck(2) sq. ft. _____ Commercial Accessory Building Addition (explain) _____

Residence sq. ft. _____ Garage sq. ft. _____ Commercial Other (explain) _____

Residential Addition / Alteration (explain) _____ Special/Conditional Use (explain) _____

Residential Accessory Building (explain) _____ External Improvements to Principal Building (explain) _____

Residential Accessory Building Addition (explain) _____ External Improvements to Accessory Building (explain) _____

Residential Other (explain) MAKE ACCESS (STAIRS)

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) _____ Date 5-20-11
Address to send permit 18100 City Rd & Remouth, MN 55447 ATTACH
APPLICANT - PLEASE COMPLETE REVERSE SIDE
Copy of Tax Statement or
Attach a Copy of Recorded Deed

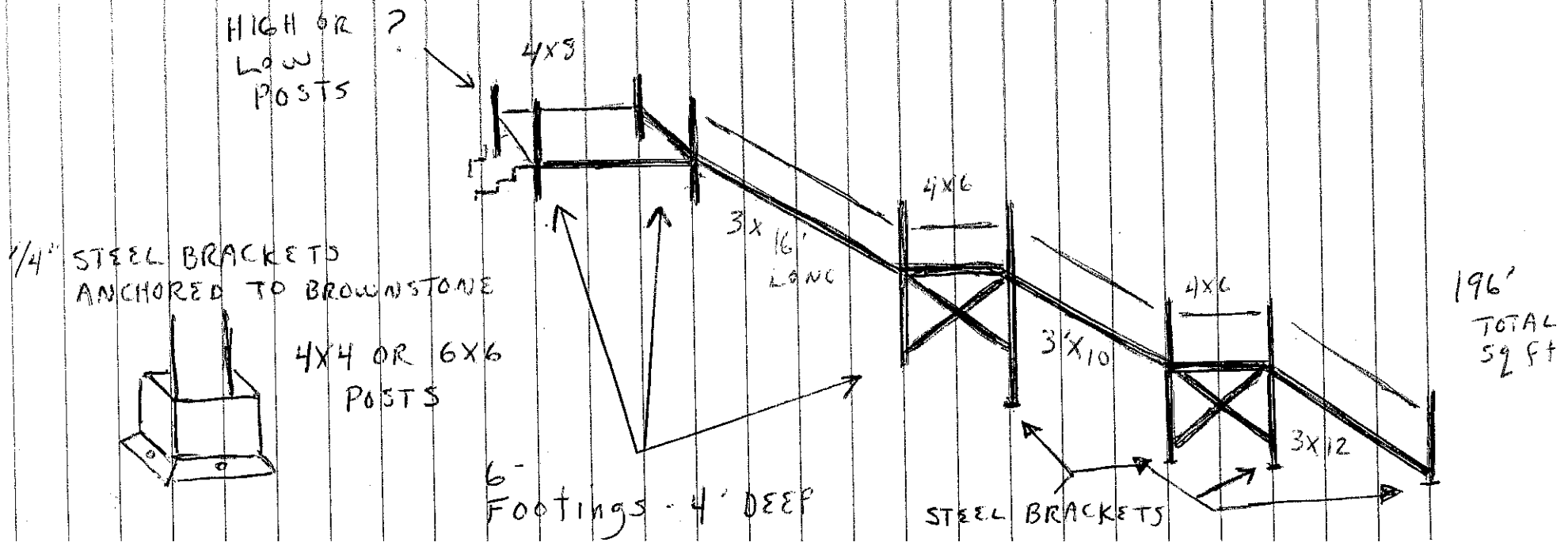
Permit Issued: _____ State Sanitary Number _____ Date _____
Date 6-1-11 Permit Number 11-0143 Permit Denied (Date) _____
Reason for Denial: _____

Inspection Record: APPROX 1/2 MI. DOE TO THREAT OF SLOPE/BUFF A GRADUALLY SLOPING IS IDENTIFY FOR
NO ACCESS CONSIDER
DATE 5-26-11
DATE OF INSPECTION 5-26-11
MITIGATION PLAN REQUIRED: YES NO VARIANCE (B.O.A.) # _____
CONDITION: LANDINGS ANY NOT EXCEED 40 FEET SQUARE.

Signed _____ Date of Approval 6-26-11
Inspector _____

RUTH & STEVE HEATH
 90245 BIRCH HILL RD
 CORNICOPIA, WI.
 715-742-3407
 MLPS. 763-473-0878

TONY MITCHELL
 P.O. BOX 23
 ASHLAND, WI. 54806
 CELL 715-292-3785
 HOME 715-682-5908





0 0.01 0.02 mi

Query Results

Parcel Owner		Legal Description	
STEVEN R AND RUTH ANN HEATH 18100 COUNTY RD 6 PLYMOUTH MN 55447		PAR IN LOT 1 SEC 22 & SW SW SEC 23 IN V.624 P.191 (PAR #12,#13 & S 1/2 PAR #14) SUBJ TO EASE IN V.778 P.350 380B	
Location		History	
Section 22, Town 51 N, Range 06 W		364-297;624-191;778E350	
New PIN		Old PIN	
04-010-2-51-06-22-4 05-001-03000		010104801000	
Land Value		Total Acres	
217600.00000		4.39100	
Improvement Value			
208300.00000			