

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
 SEP 30 2011

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.

Application No: 11-0373
 Date: 10/10/11
 Zoning District: A-1
 Amount Paid: \$75.00 Cash
 RDS 9/30/11



LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER _____

Use Tax Statement for Legal Description

Legal Description SW NE 1/4 of SE NW 1/4 of Section 35 Township S1 North, Range 06 West, Town of Bell

Gov't Lot _____ Lot 1 Block _____ Subdivision _____ CSM # 1710 Acreage 4.56

Volume 10 Page 114 of Deeds Parcel I.D. 04-010-2-51-06-35-1 03-000-50000

Property Owner EVAN HESTERIN & SARA SWEETS-LEW Contractor SALE (Phone) 715-209-0137

Address of Property 68660 LAKEVIEW DR Plumber _____ (Phone) _____

Telephone 715-209-0137 (Home) 715-209-7785 (Work) SARIE Written Authorization Attached: Yes No

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 _____ Number of Stories 1
 Fair Market Value \$10,000 Square Footage 432
 Sanitary: New _____ Existing Privy _____ City _____
 Type of Septic/Sanitary System Holding Tank

USE: * Residence or Principal Structure (# of bedrooms) _____
 * Residence w/deck-porch (# of bedrooms) _____
 * Residence w/attached garage (# of bedrooms) _____
 * 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) _____

Residence sq. ft. _____ Porch sq. ft. _____
 Residence sq. ft. _____ Deck(2) sq. ft. _____
 Deck sq. ft. _____ Garage sq. ft. _____
 Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) Storage/porch (18x24)
 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) [Signature] Date 9/28/11

Address to send permit 20 Box 41 Ashland WI 54806

* See Notice on Back
 APPLICANT — PLEASE COMPLETE REVERSE SIDE
 Copy of Tax Statement or (If you recently purchased the property Attach a Copy of Recorded Deed)

Permit issued: State Sanitary Number _____ Date _____

Permit Number 11-0373 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Regularly done - As Represented By Owners Showed Areas to Meet All Code/Regulations
 Requirements By DR Date of Inspection 10-9-11

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

Condition: _____

Signed [Signature] Date of Approval _____
 Inspected for Issuance Date of Approval _____

Final Review Starts
 Attached
 See no. 10, 11, 12, 13 for view
 Secretarial Staff

