

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Dept.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

RECEIVED
 FEB 04 2013

ENTERED
 Permit #: 13-0019
 Date: 2-25-13
 Amount Paid: \$752.413
 Refund:

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. Bayfield Co. Zoning Dept. HOW TO FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

TYPE OF PERMIT REQUESTED: LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: **THOMAS H. WOODBURY** Mailing Address: **12341 E. THUNDERHEAD RANCH RD. TUCSON, AZ. 85747** Telephone: **520-647-3777**

Address of Property: **87555 CTR. HWY C** City/State/Zip: **CORUDDOPIA, WI. 54827** Call Phone: **520-360-8704**

Contractor: **SRF** Contractor Phone: _____ Plumber: _____ Plumber Phone: _____

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: _____ Agent Mailing Address (include City/State/Zip): _____ Written Authorization Attached Yes No

PROJECT LOCATION: Legal Description: (Use Tax Statement) **SE 1/4, NE 1/4** PIN: (23 digits) **04 010 2 90 06 03 1 06 00 10 00** Recorded Document: (i.e. Property Ownership) _____ Page(s) _____

Gov't Lot _____ Lot(s) _____ CSM _____ Vol & Page _____ Lot(s) No. _____ Block(s) No. _____ Subdivision: _____

Section **3**, Township **50** N, Range **6** W Town of: **Beck** Lot Size _____ Acreage **76.41**

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If yes---continue Distance Structure is from Shoreline: _____ feet Is Property in Floodplain Zone? Yes No

Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue Distance Structure is from Shoreline: _____ feet Are Wetlands Present? Yes No

Value at Time of Completion <small>(include donated time & material)</small>	Project <small>(What are you applying for)</small>	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
\$10,000	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story		<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	
	<input type="checkbox"/> Relocate (existing Dwg)	<input type="checkbox"/> Basement			<input checked="" type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement			<input type="checkbox"/> Portable (w/service contract)	
		<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it) Length: _____ Width: _____ Height: _____

Proposed Construction: Length: **28' x 8'** Width: _____ Height: _____

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)		()	()
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)		()	()
<input type="checkbox"/> with Loft		()	()
<input type="checkbox"/> with a Porch		()	()
<input type="checkbox"/> with (2 nd) Porch		()	()
<input type="checkbox"/> with a Deck		()	()
<input type="checkbox"/> with (2 nd) Deck		()	()
<input type="checkbox"/> with Attached Garage		()	()
<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)		()	()
<input type="checkbox"/> Mobile Home (manufactured date)		(34 X 8)	272
<input checked="" type="checkbox"/> Addition/Alteration (specify) PORCH / PORCH		(10 X 10)	100
<input type="checkbox"/> Accessory Building (specify) _____		()	()
<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____		()	()
<input type="checkbox"/> Special Use: (explain) _____		()	()
<input type="checkbox"/> Conditional Use: (explain) _____		()	()
<input type="checkbox"/> 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(s): **THOMAS H. WOODBURY** Date: **1/28/13**

(If there are Multiple Owners listed on the deed All Owners must sign or letter(s) of authorization must accompany this application.)

Authorized Agent: _____ Date: _____

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application.)

Address to send permit: **12341 E. THUNDERHEAD RANCH RD, TUCSON AZ, 85747** Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

