

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

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN
 RECEIVED
 MAR 07 2013
 Bayfield Co. Zoning Dept.
 HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

ENTERED Permit #: 13-0044
 Date: 4-10-13
 Amount Paid: \$1000
 Refund: 03-7-13

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.

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

Owner's Name: ANN & PETE BROWNLIE
 Address of Property: C ROMANS PT RD
 City/State/Zip: /WI/54844

Contractor: SELF
 Authorized Agent: (Person Signing Application on behalf of Owner(s))

Mailing Address: 10061 MANNING AVEN
 City/State/Zip: STILLWATER, MN /55082

Contractor Phone: 651-271-2076
 Agent Phone: ED WROBLEWSKI
 Plumber: ED WROBLEWSKI
 Agent Mailing Address (include City/State/Zip):

Telephone: 612-804-2078
 Cell Phone: SAME
 Plumber Phone: 715-373-5808
 Written Authorization Attached: Yes No

PROJECT LOCATION: 1/4, 1/4
 Legal Description: (Use Tax Statement) 04 010-2-51-08-24.4 05.002.7 1000
 Gov't Lot: 1
 Lot(s): 1547
 CSM: 1547
 Vol & Page: 1547
 Lot(s) No.:
 Block(s) No.:
 Subdivisions:
 Recorded Document: (i.e. Property Ownership)
 Volume:
 Page(s):
 Section 24, Township 51 N, Range 6 W
 Town of: BEL

Lot Size: ONE
 Acreage: 0.74

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?
 Is Property/Land within 1000 feet of Lake, Pond or Flowage
 If yes---continue -->

Distance Structure is from Shoreline: 200
 Distance Structure is from Shoreline: 120
 feet

Is Property in Floodplain Zone?
 Yes No

Are Wetlands Present?
 Yes No

Value at Time of Completion * include donated time & material	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$1200,000	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/>	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant to it) Length: 60 Width: 22 Height: 28
 Proposed Construction: Length: 60 Width: 22 Height: 28

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	60 X 22	1766
	<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 a Deck	()	()
	<input type="checkbox"/> with (2 nd) Deck	()	()
	<input type="checkbox"/> with Attached Garage	()	()
	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	()	()
	<input type="checkbox"/> Mobile Home (manufactured date)	()	()
	<input type="checkbox"/> Addition/Alteration (specify)	()	()
	<input type="checkbox"/> Accessory Building (specify)	()	()
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	()	()
<input type="checkbox"/> Municipal Use			
<input type="checkbox"/> Rec'd for Issuance			
APR 12 2013			
<input type="checkbox"/> Special Use: (explain)			
<input type="checkbox"/> Conditional Use: (explain)			
<input type="checkbox"/> Secretarial Staff			

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.

Owners: Dan & Sandra St. Hill
 (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: 3/11/13
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: 10061 MANNING AVEN STILLWATER MN 55082
 Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed



EAST ROMANS POINT ROAD

66

RIGHT-OF-WAY 66'

N 09°48'54" E
51.47'

N 00°45'00" E
100.10'

N 86°45'00" E

N 86°45'00" E

165.41'

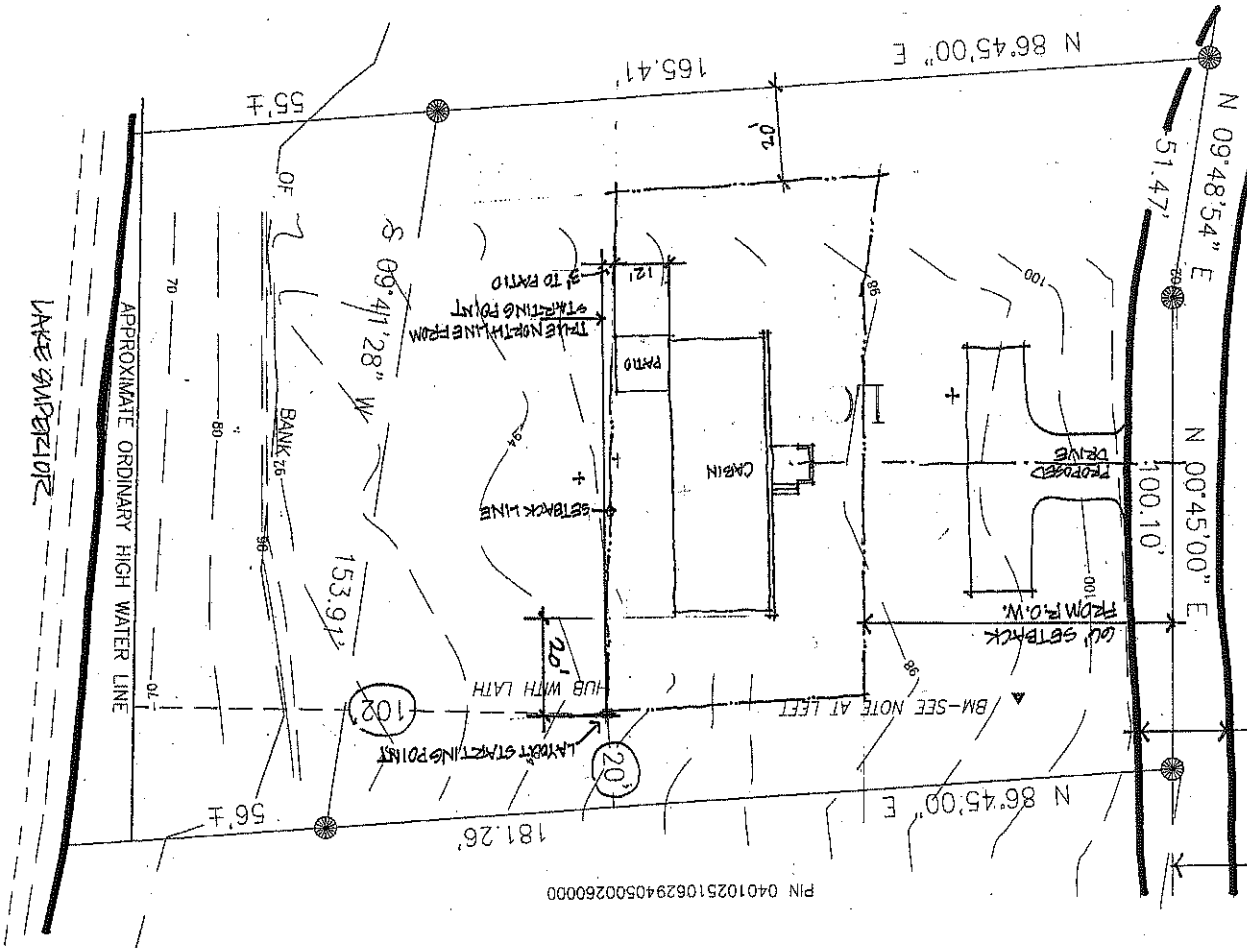
181.26'

55.1'

56.1'

S 09°41'28" W
153.91'

APPROXIMATE ORDINARY HIGH WATER LINE
LAKE SUPERIOR



BM-SEE NOTE AT LEFT

20' L. & R. SETTING POINTS

HUB WITH LATH

SETBACK LINE

60' SETBACK FROM P.O.W.

REAR DRIV

CABIN

POND

THIS POINT IS 9' TO PART D STARTING POINT

BANK 26'

PIN 04010251062940500260000