

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 29 2010

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 Cable Business Center

Legal Description 1/4 of Lot 4 Block 15 Subdivision 18 Township 43 North, Range 7 West, Town of Cable Acreage _____

Gov't Lot Page 941 of Deeds Parcel I.D. 04-012-2-43-07-18-2 00-116-10800

Property Owner McKinney Revocable Trust Contractor Roger Oswardson (Phone) 634-8771

Address of Property 43050 US Hwy 63 Cable WI 54821

Plumber _____ (Phone) _____

Telephone 749-3645 (Home) _____ (Work) _____

Authorized Agent _____ (Phone) _____

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 _____
 Fair Market Value \$2,000 Square Footage 100 ft²
 USE: _____

Basement: Yes No Number of Stories _____
 Sanitary: New Existing _____ Privy _____ City _____

Type of Septic/Sanitary System _____
 Mobile Home (manufactured date) _____

Commercial Principal Building _____

Commercial Principal Building Addition (explain) Covered entryway

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) _____

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) *Roger Oswardson* Date 7-29-10

Address to send permit Same as above PO Box 358 Cable (If you recently purchased the property 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 8/10/10 Permit Number 10-0290 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Meets all set backs. Property lines per owner representations, By M. Fuitak Date of Inspection 7-29-10

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

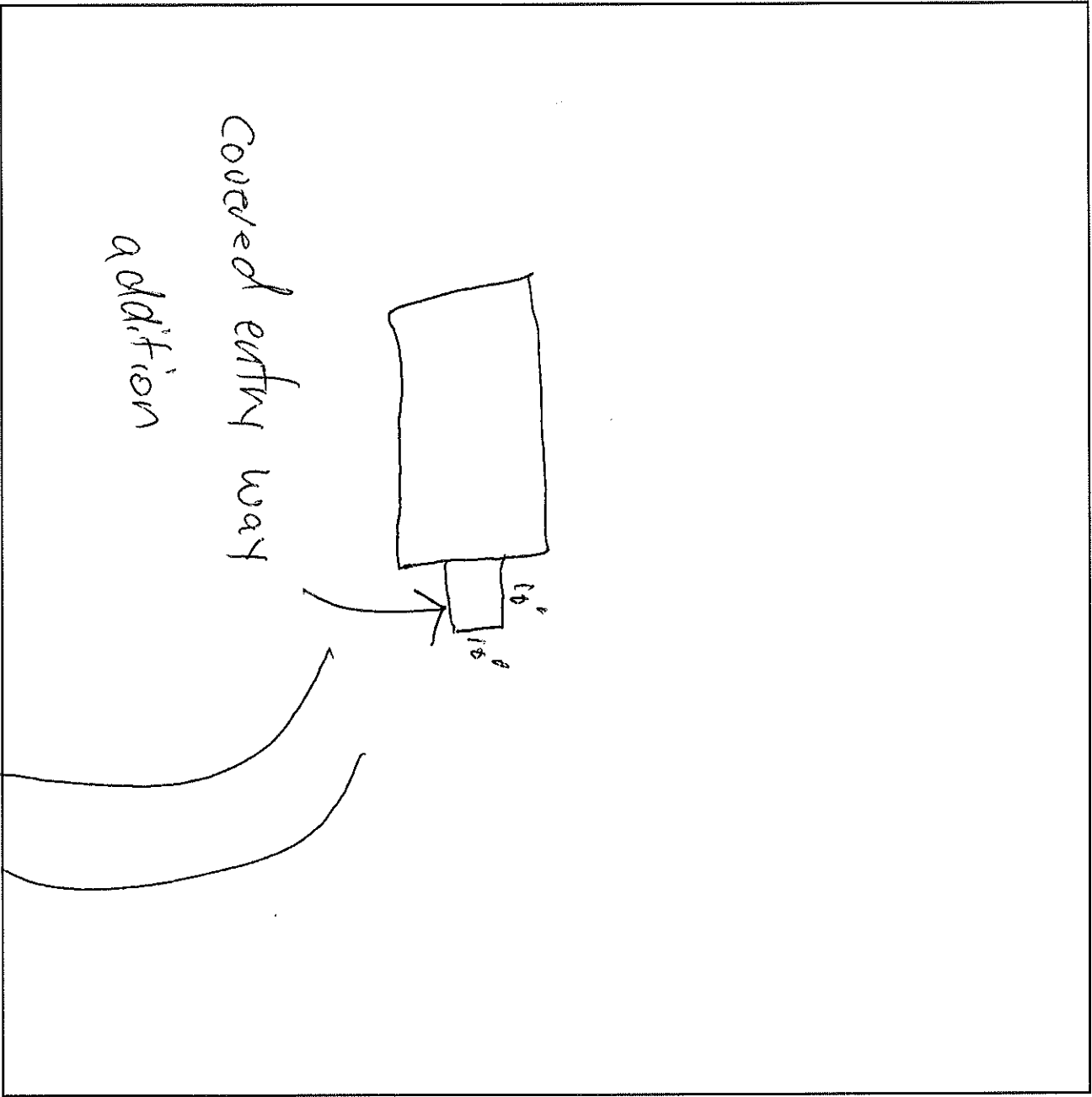
Condition: No expansion of structures footprint.

Signed Michael Fuitak 7/30/10 Date of Approval

Rec'd for Issuance

AUG 10, 2010

Secretarial Staff



Name of Frontage Road (US Hwy 63)

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:

<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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
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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.