

\$900

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

OCT 29 2010

Application No: 10-0463
 Date: _____
 Zoning District RRB, Class 2
 Amount Paid: \$900.00
11/3/10 mg

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 1 1/4 of 3 Township 43 North, Range 7 West, Town of Cable
 Gov't Lot 1 Lot 1 Block _____ Subdivision _____

Volume 1048 Page 444 of Deeds Parcel I.D. 04-0122-43-07-03-1 05-001-70000

Property Owner Tom + Barb Donohue Contractor Mike Hansen (Phone) 634-5036
 Address of Property 45775 Tahkodesh Lk. Rd. Plumber Rob LaBarre 699-0936 553-1432
Cable WI 54821 Authorized Agent Mike Hansen (Phone) _____
 Telephone 394-3725 (Home) (Work) _____

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

Structure: New Addition _____ Existing _____
 Fair Market Value \$ 300,000 Square Footage _____

USE: * Residence or Principal Structure (# of bedrooms) 2 4

Residence sq. ft. 1159F + 614F = 1773F

* Residence w/deck-porch (# of bedrooms) 2 4

Residence sq. ft. 1773F entry w/deck

Deck sq. ft. 108F

* Residence w/attached garage (# of bedrooms) 1 porch 193F

Residence sq. ft. _____ Garage sq. ft. _____

Residential Addition / Alteration (explain) _____

Residential Accessory Building (explain) _____

Residential Accessory Building Addition (explain) _____

Residential Other (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) [Signature] Date 10-29-10

Address to send permit 14097 W State Rd 77, Hayward, WI ATACH _____

* See Notice on Back 54843 Copy of Tax Statement or Attach a Copy of Recorded Deed

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number 10-1325 Date 11/10/10
 Date 11/10/10 Permit Number 10-0463 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Well staked. Meets all setbacks. Property lines per owner's agent's representations By M. Furtak Date of Inspection 10-29-10
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: _____
 Signed Michael Furtak 11-1-10 Date of Approval _____
 Inspector

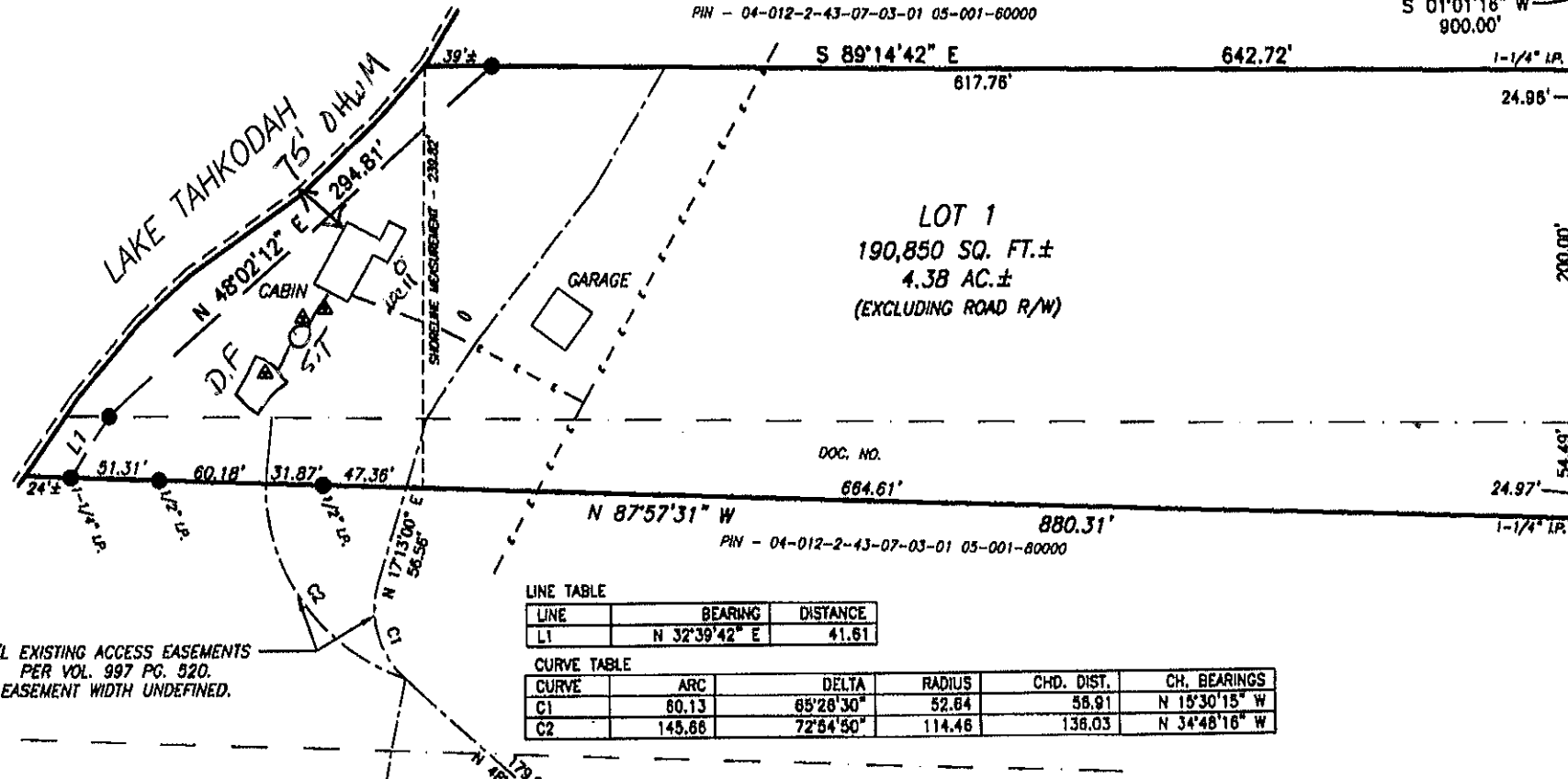
BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. _____
 PART OF GOV'T. LOT 1, SECTION 3, T. 43 N., R. 7 W.,
 IN THE TOWN OF CABLE, BAYFIELD COUNTY, WISCONSIN.

SEC. 3
 N 1/4 COR.
 ALUM. MON.

SEC. 34 T. 44 N. R. 7 W
 S 89°56'58" E
 SEC. 3 T. 43 N. R. 7 W

2659.95'
 S 01°01'16" W
 900.00'

PIN - 04-012-2-43-07-03-01 05-001-60000



LINE TABLE

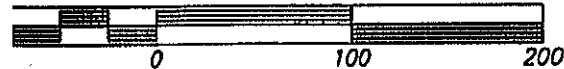
LINE	BEARING	DISTANCE
L1	N 32°39'42" E	41.61

CURVE TABLE

CURVE	ARC	DELTA	RADIUS	CHD. DIST.	CH. BEARINGS
C1	80.13	85°28'30"	52.64	58.91	N 15°30'15" W
C2	145.66	72°54'30"	114.46	138.03	N 34°48'16" W

ALL BEARINGS ARE REFERENCED TO
 THE NORTH LINE OF THE
 1/4 OF SEC. 3, ASSUMED
 TO BEAR S 89°56'58" E.

SCALE: ONE INCH = 100 FEET



ALL DIMENSIONS ARE OUTSIDE DIAMETER

NOTES:

- NO 1" IRON PIPE, UNLESS NOTED
- 1-1/4"(OD) X 18" IRON PIPE, WT. = 1.68#/FT.
- TIC VENT/CLEAN OUT

CLIENT: JEFFREY GIBBONS
 JOB NO. N10/129
 DRAFTED BY: JRN
 DATE: 9/15/2010

FILE: T43NR7W/SEC3
 FILE: N10_0129
 NB. HON B-20/PG. 151
 SHEET 1 OF 2 SHEETS

NELSON
SURVEYING
INCORPORATED

SURVEY BY: LARRY T. NELSON - RLS #1276

101 W. WA
 SUITE 207
 ASHLAND,
 (715) 682
 FAX: (715)

SURVEYING NORTHERN WISCONSIN SINCE 1864