

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  
 MAR 04 2011

Application No.: 11-0341  
 Date: 9/23/11  
 Zoning District: RRB, Class 2  
 Amount Paid: 75- 3/4/11 mg

INSTRUCTIONS: No permits will be issued until all fees are paid, Bayfield Co. Zoning Dept.  
 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 1/4 of 1/4 of Section 3 Township 43 North, Range 7 West, Town of Cable  
 East Lake Sub-division CSM #  
 Subdivision

Gov't Lot 3 Block Gov't Lot 3 Page 777 of Deeds Parcel I.D. 04-012-2-43-07-03-1 00-169-03000  
 Volume 863

Property Owner Dean A. Hambrecht Contractor self (Phone) \_\_\_\_\_

Address of Property 16905 Tahkodah Lake Rd Cable, WI 54821  
 Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 798-3697 (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
 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 Square Footage 154 sq ft  
 Basement: Yes  No  Number of Stories 1  
 Fair Market Value \$6,000 Sanitary: New Existing Privy City \_\_\_\_\_

USE: Type of Septic/Sanitary System Conu  
 \* Residence of Principal Structure (# of bedrooms) 7 1/2 = 7 3/4 (2)

\* Residence w/deck-porch (# of bedrooms) \_\_\_\_\_  
 Commercial Principal Building \_\_\_\_\_  
 Commercial Principal Building Addition (explain) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_ Porch sq. ft. \_\_\_\_\_  
 Commercial Accessory Building (explain) \_\_\_\_\_  
 Deck sq. ft. \_\_\_\_\_ Deck(2) sq. ft. \_\_\_\_\_  
 Commercial Accessory Building Addition (explain) \_\_\_\_\_

\* Residence w/attached garage (# of bedrooms) \_\_\_\_\_  
 Commercial Accessory Building Addition (explain) \_\_\_\_\_  
 Residence sq. ft. \_\_\_\_\_ Garage sq. ft. \_\_\_\_\_  
 Commercial Other (explain) \_\_\_\_\_

Residential Addition / Alteration (explain) 154 sq addition  
 Special/Conditional Use (explain) \_\_\_\_\_

Residential Accessory Building (explain) Mechanical room  
 External Improvements to Principal Building (explain) \_\_\_\_\_  
 Residential Accessory Building Addition (explain) Below addition  
 External Improvements to Accessory Building (explain) \_\_\_\_\_  
 Residential Other (explain) re-pave

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) Dean Hambrecht Date 3-3-11  
 Address to send permit 15255 Hambrecht Rd, Cable, WI 54821 ATTACH

\* 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 \_\_\_\_\_  
 Date 9/23/11 Permit Number 11-0341 Permit Denied (Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_  
 Inspection Record: Well Staked Non-conforming structure 50' from  
 OHM unexcused By M. Furtak Date of Inspection 8-25-11  
 Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_

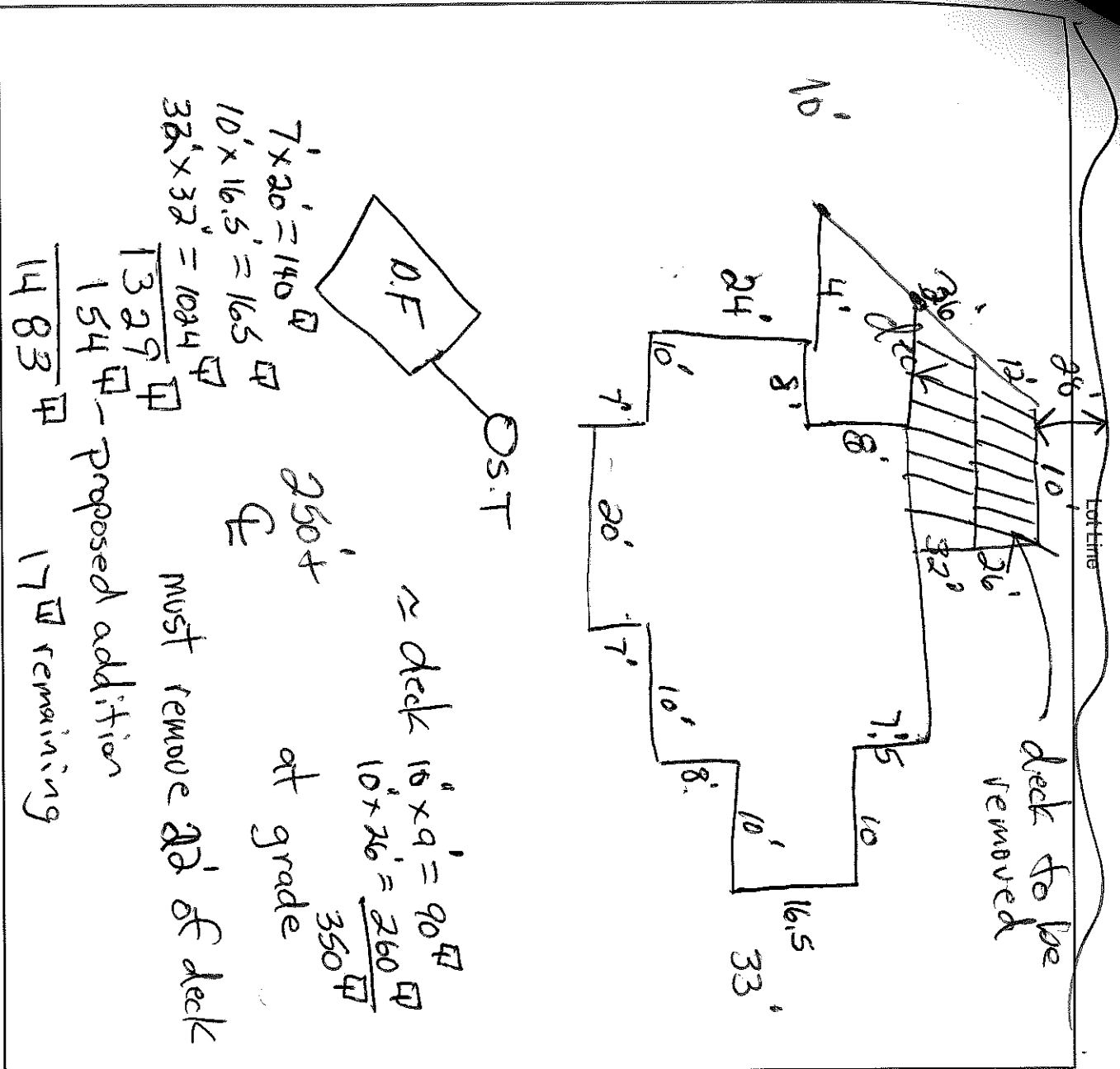
Condition: Deck must be removed prior to the start of construction.  
 see mitigation affidavit

Rec'd for Issuance Michael Stute 8-29-11  
 Inspector \_\_\_\_\_ Date of Approval \_\_\_\_\_

Sanitary?

Sub-standard lot of record. - Duane Hambrecht - Sanitary.

# Tahkedah Lake



Name of Frontage Road S. Tahkedah Lk. Rd.

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:
  - 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
  - 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

**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.

$$\begin{array}{r} 32 \\ 32 \\ \hline 960 \\ 1024 \end{array}$$