



APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County Zoning Department
P.O. Box 58
Washburn, WI 54891
(715) 373-6138

RECEIVED
AUG 19 2009
Bayfield Co. Zoning Dept.

Application No: 10-0010
Date: _____
Zoning District C
Amount Paid: →

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 NW 1/4 of NW 1/4 of Section 09 Township 50 North, Range 07 West, Town of Clover
Gov't Lot 2 Lot 3 Block _____ Subdivision Clover 1st Add'n Sub SM # Acreage 1.4 (Combined)
Volume 744 Page 237 of Deeds Parcel I.D. 04-014-2-50-07-9-200-152-3000 (\$2000)

Property Owner BRUCE F. & PATRICIA L. LINDSEEN Contractor _____ (Phone) _____
Address of Property 15765 SPRUCE TREE DRIVE Plumber _____
HERBSTER Authorized Agent _____ (Phone) _____

Telephone 715-774-3328 (Home) 774-3444 (Work)

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 X
Fair Market Value _____ Square Footage 1532
Basement: Yes _____ No X Number of Stories _____
Sanitary: New _____ Existing X Privy _____ City _____

USE: * Residence or Principal Structure (# of bedrooms) _____
 Mobile Home (manufactured date) _____

Residence sq. ft. _____
 * Residence w/deck-porch (# of bedrooms) _____
Commercial Principal Building _____

Residence sq. ft. _____ Porch sq. ft. _____
Deck sq. ft. _____
 * Residence w/attached garage (# of bedrooms) _____
Commercial Principal Building Addition (explain) _____

Residence sq. ft. _____ Garage sq. ft. _____
 Residential Addition / Alteration (explain) _____
Commercial Accessory Building (explain) _____

Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
Commercial Accessory Building Addition (explain) _____

Residential Other (explain) _____
 Commercial Other (explain) _____
 Special/Conditional Use (explain) Single Dwelling "SR"

External Improvements to Principal Building (explain) _____
 External Improvements to Accessory Building (explain) _____

External Improvements to Accessory Building (explain) _____
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

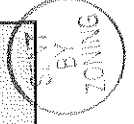
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) 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 or Authorized Agent (Signature) Bruce Lindseen Date 8/19/2009

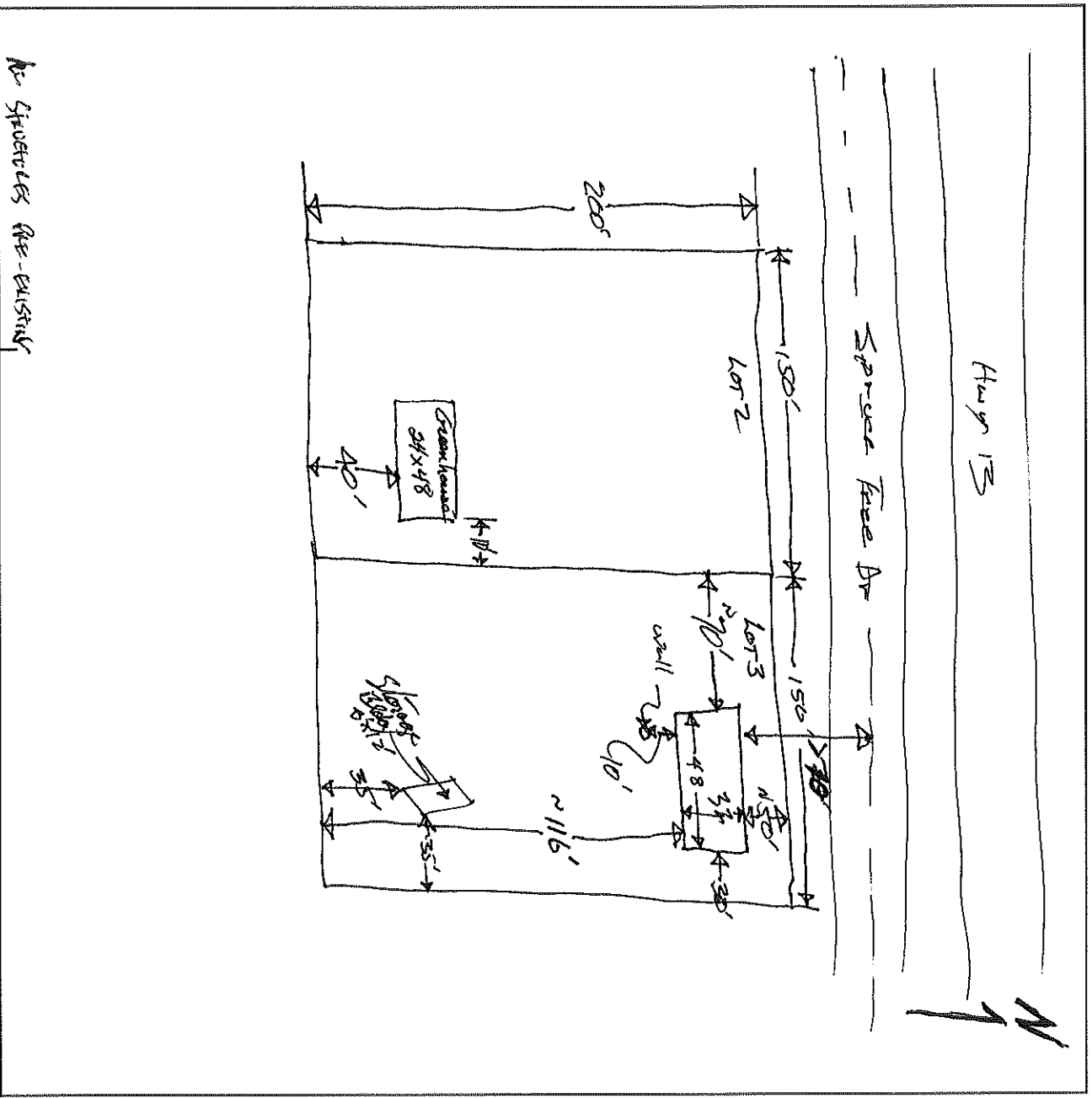
Address to send permit 15765 SPRUCE TREE DR PO Box 46 HERBSTER WI 54894 ATTACH _____
Copy of Tax Statement or Attach a Copy of Recorded Deed

* See Notice on Back APPLICANT --- PLEASE COMPLETE REVERSE SIDE

Permit issued: _____ State Sanitary Number _____ Date _____
Date 1/25/10 Permit Number 10-0010 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: Revising Structure to be used as fence, surrounding areas all of concrete
Area of Sanitary District By DR Date of Inspection 8-20-09
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: for conditions of this B.O.A.; Applies to current applicants/owners only; new owners would need to reapply.
Signed [Signature] Date of Approval 8-20-09
Rec'd for Issuance
JAN 25, 2010
Secretary Staff



Lot Line



No Structures Pre-Existing

Name of Frontage Road (SPRUCE TREE DR)

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. *NA*
5. Show the location of any lake, river, stream or pond if applicable. *NA*
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 *NA*
 - d. Holding tank to closest lot line *NA*
 - e. Holding tank to building *NA*
 - f. Holding tank to well *NA*
 - g. Holding tank to lake, river, stream or pond *NA*
 - h. Privy to closest lot line *NA*
 - i. Privy to building *NA*
 - j. Privy to lake, river, stream or pond *NA*
 - k. Septic Tank and Drain field to closest lot line *NA*
 - l. Septic Tank and Drain field to building *NA*
 - m. Septic Tank and Drain field to well *NA*
 - n. Septic Tank, and Drain field to lake, river, stream or pond *NA*
 - 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.

