

ENTERED

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
Conversion
RECEIVED
NOV 19 2010

Application No. 11-0015
Date: _____
Zoning District A-1/3
Amount Paid: \$125.11/19/10
\$175 1/31/11 TBA fee md
+ privacy attachd
\$450

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 PL of S 1/2
Legal Description S 1/2 1/4 of NE 1/4 of Section 8 Township 50 North, Range 7 West, Town of COSTER

Gov't Lot _____ Block _____ of Deeds _____ Subdivision 404-250-01-08-1-02-100-1000 CSM # _____ Acreage 4.4

Volume 04-014-2-50-07-08-103-000-40000 Parcel I.D. _____
Property Owner Ivan Welander, Jessica McBeauky-Jacobson Contractor N/A (Phone) _____

Address of Property 86495 Lenawee Rd. Plumber N/A
Herbster, WI 54844 Authorized Agent N/A (Phone) _____

Telephone 715 209 7419 (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
Fair Market Value 15,000 +/- Square Footage 840

USE:
 * Residence or Principal Structure (# of bedrooms) _____
Residence sq. ft. _____

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

Deck sq. ft. _____
 * Residence w/attached garage (# of bedrooms) _____
Residence sq. ft. _____ Garage sq. ft. _____

Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) _____

Residential Accessory Building Addition (explain) _____
 Residential Other (explain) Conversion of box to privacy

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) [Signature] Date 11/5/2010
Address to send permit 86495 Lenawee Rd, Herbster, WI 54844

* See Notice on Back
APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number Comp. Privacy Datched
Date 1/31/11 Permit Number 11-0015 Permit Denied (Date) _____
Reason for Denial: _____

Inspection Record: Structure Sanitary/Conditions as requested by owner & as per 11-0015 meet applicable code requirements & permit may be issued
Date of Inspection 11-19-10 Variance (B.O.A.) # _____

Mitigation Plan Required: Yes No
Condition: No funding with or without structure, any future on be installed with the structure until such time that a permit is obtained to state sod structure

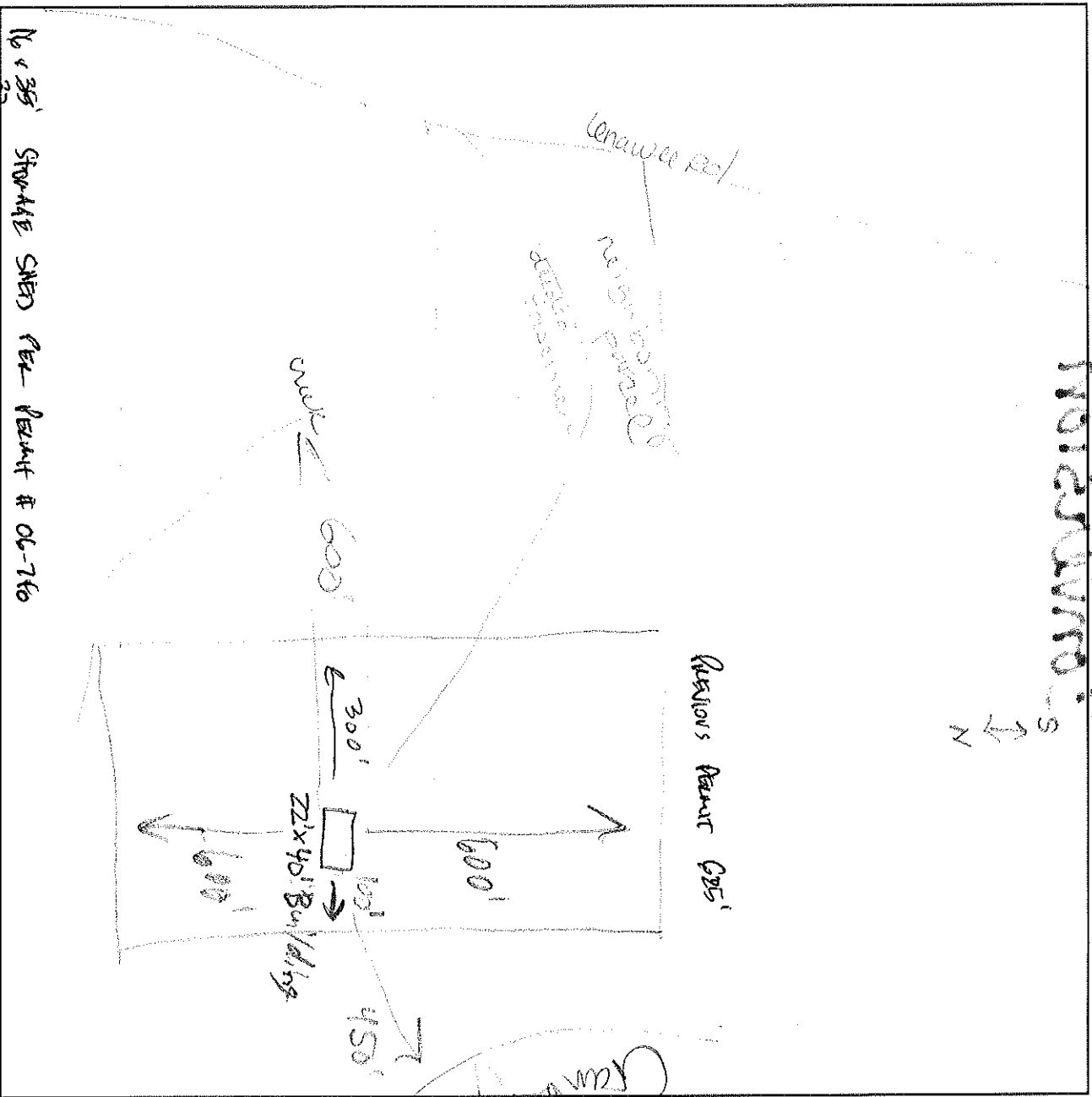
06-740
07-51
04-334

Signed [Signature] Inspector _____
Date of Approval 11-19-10

RECEIVED
JAN 14 2011

needed
TBA fee
- rec'd 1/13/11

Lot Line



Name of Frontage Road (Lenawee 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.