

**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**  
 APR 26 2011

Bayfield Co. Zoning Dept.

**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.

Application No.: 11-0113  
 Date: 5-13-11  
 Zoning District: C1-  
 Amount Paid: \$125.00 PDS  
4/25/11

**ENTERED**

LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER \_\_\_\_\_  
 Use Tax Statement for Legal Description

Legal Description NEW 1/4 of AFD 1/4 of Section 9 Township T50N North, Range R72W West, Town of CLOVER  
 Govt Lot 8 Lot 8 Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # 1387 Acreage .77

Volume \_\_\_\_\_ Page \_\_\_\_\_ of Deeds Parcel ID. 04-014-2-50-07-09-200-152-5000  
 Property Owner JIM & GAIL REHR Contractor SELF (Phone) 715-774-3699

Address of Property HERBSTER WI 54844 Plumber NA  
 Authorized Agent JAMES J REHR (Phone) 715-774-3699

Telephone 715-774-3699 (Home) 3414 (Work) \_\_\_\_\_  
 Written Authorization Attached: Yes  No

Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_  
 Structure: New \_\_\_\_\_ Addition  Existing \_\_\_\_\_ Number of Stories 1  
 Fair Market Value \$2000.00 Square Footage 288 Sanitary: New \_\_\_\_\_ Existing \_\_\_\_\_ Privy  City

USE: \_\_\_\_\_  
 \* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_ Type of Septic/Sanitary System CITY  
 \* Residence w/attached garage (# of bedrooms) \_\_\_\_\_ Mobile Home (manufactured date) \_\_\_\_\_  
 Residence sq. ft. \_\_\_\_\_ Commercial Principal Building \_\_\_\_\_

\* Residence w/deck-porch (# of bedrooms) \_\_\_\_\_ Commercial Principal Building Addition (explain) STORAGE  
 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) \_\_\_\_\_  
 Residential Accessory Building (explain) \_\_\_\_\_  
 Residential Accessory Building Addition (explain) \_\_\_\_\_  
 Residential Other (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) JAMES J REHR Date 4-15-2011  
 Address to send permit PO Box 15 HERBSTER WI 54844

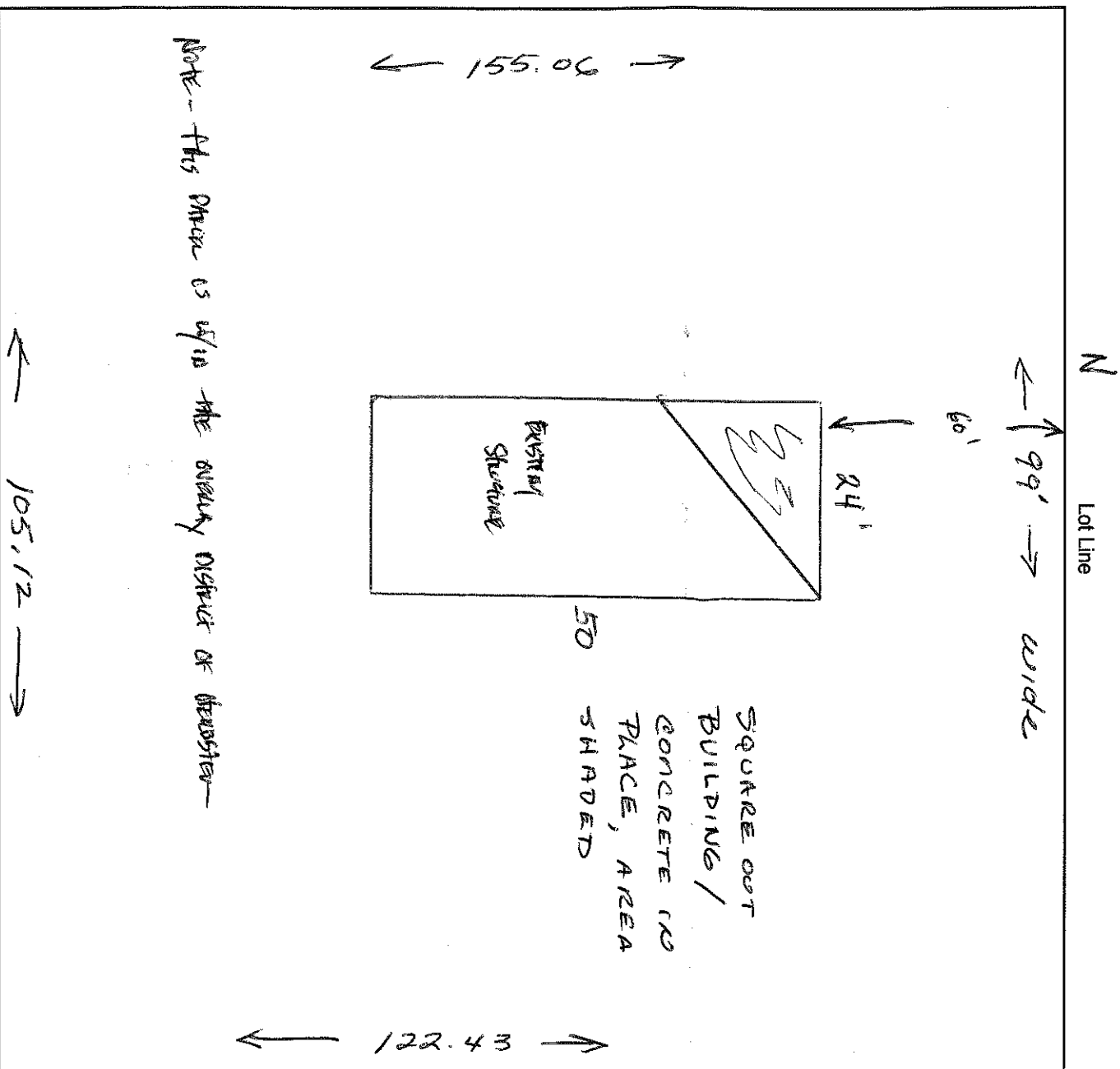
\* See Notice on Back  
 APPLICANT — PLEASE COMPLETE REVERSE SIDE  
 Copy of Tax Statement or  
 (If you recently purchased the property  
 Attach a Copy of Recorded Deed)

Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_  
 Date 5-13-11 Permit Number 11-0113 Permit Denied (Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_  
 Inspection Record: Sanitary system completely disallowed as sewer later by public appears to need code permit's  
slid. Permit why the issue. By OPC Date of Inspection 4-25-11

Mitigation Plan Required: Yes  No   
 Condition: \_\_\_\_\_ Variance (B.O.A.) # \_\_\_\_\_

Signed [Signature] Date of Approval 4/28/11  
 Inspector \_\_\_\_\_



NOTE - THIS DRAWING IS USED AS A GUIDELINE ONLY. THE OWNER MUST OBTAIN A PERMIT FROM THE TOWN ENGINEER BEFORE CONSTRUCTION.

Name of Frontage Road (SPROUCE 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.
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.