

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
AUG 19 2011

Application No.: 11-0317
Date: 9/7/11
Zoning District: A-1(-)
Amount Paid: \$75
8/29/11
Kaut



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 SW 1/4 of SW 1/4 of Section 9 Township 50 North, Range 7 West, Town of Clover

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage _____

Volume _____ Page _____ of Deeds Parcel I.D. 04-014-2-SD-07-09-3 03-000-00000

Property Owner Judith & Richard Carrier Contractor Joe Hokanson (Phone) 715-562-0099

Address of Property 8621D Kenauwe Rd Plumber Ed Wroblewski

Herbster WI Authorized Agent Joe Hokanson (Phone) ↑

Telephone 512-388-0551 (Home) _____ (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 _____ Basement: Yes _____ No _____ Number of Stories 1

Fair Market Value \$15,000 Addition Square Footage 54 SF Sanitary: New _____ Existing _____ Privy _____ City _____

USE: Residence or Principal Structure (# of bedrooms) _____ Type of Septic/Sanitary System H.T.

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

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

Residence sq. ft. _____ Porch sq. ft. _____ Commercial Principal Building Addition (explain) _____

Deck sq. ft. _____ Deck(2) sq. ft. _____ Commercial Accessory Building (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) _____ Special/Conditional Use (explain) _____

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

Residential Accessory Building Addition (explain) 9'x6' bathroom 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) Joseph M. Hokanson Date 8-16-11

Address to send permit 86225 Bark River Rd Herbster WI 54899 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 9/7/11 Permit Number 11-0317 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Personnel Resistant. Added Water on Agent's Representative's Apartment to be Setback

Carroll's - requires rolls of paper 25 8-24-11 Date of Inspection 8-24-11

Mitigation Plan Required: Yes No Variance (B.O.A.) # _____

Condition: 1

Notes

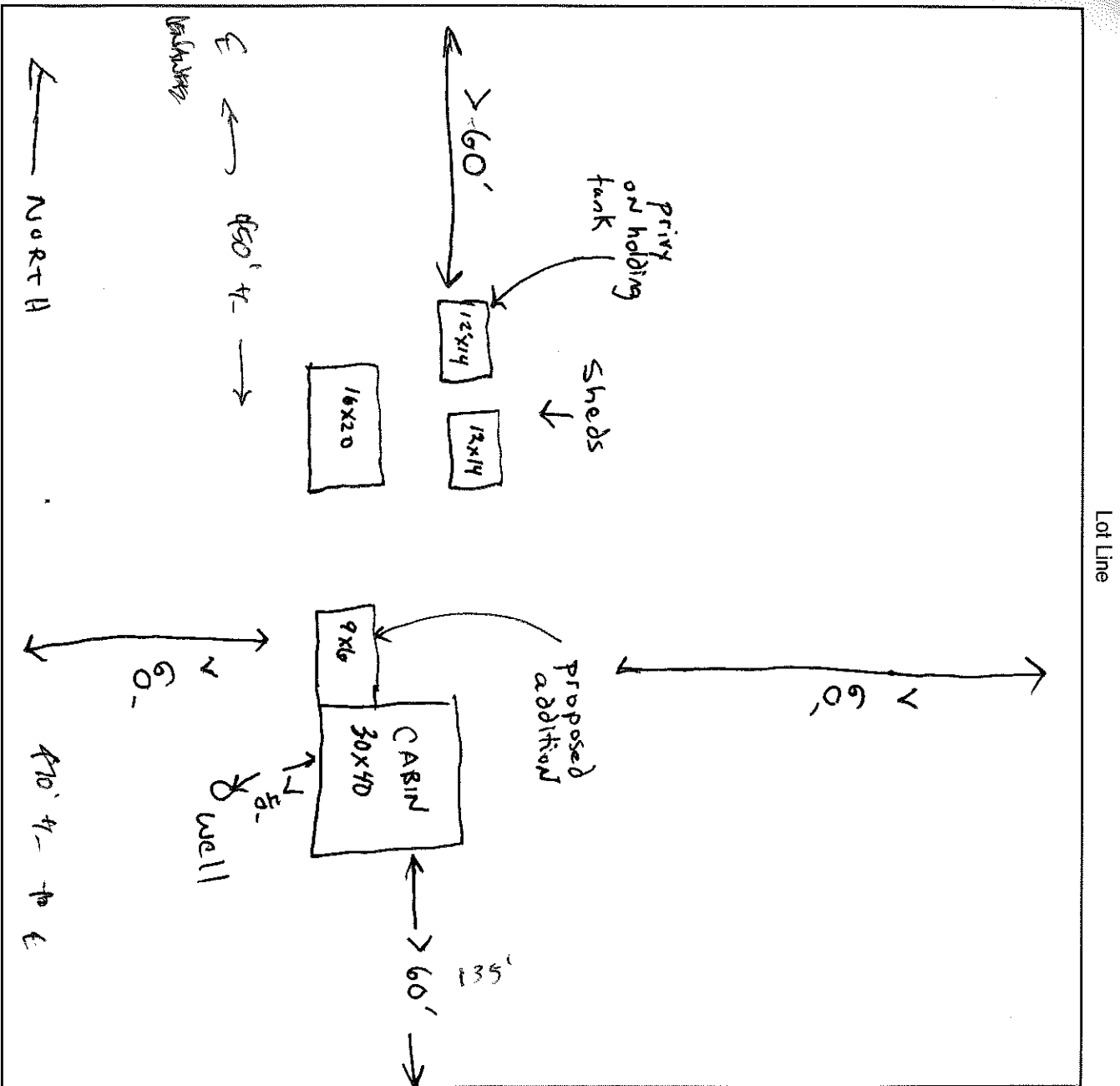
File Agent as status of system

Always verify instructions

Signed [Signature] Inspector Road for Issuance Date of Approval 9/29/11

SEP 7 2011

Secretarial Staff



Notes - Proposed Addition and Well Permits
 No Evidence of a Road

Name of Frontage Road (Lenewee 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.