

**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**  
 MAY 14 2008  
 Bayfield Co. Zoning Dept.

Application No.: 08-0208  
 Date: \_\_\_\_\_  
 Zoning District: F-1/1  
 Amount Paid: \$260.00 RDS  
S/15/08

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.

+ 50. San-Interceptor attached

LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER \_\_\_\_\_  
 Legal Description NE 1/4 of NE 1/4 of Section 04 Township 46N North, Range 8 West, Town of Delta  
 Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 1.68

Volume 548 Page 29 of Deeds Parcel I.D. # 016-1086-08-000 Use Tax Statement for Legal Description

Property Owner John and Beth OUIRI Contractor Roger Hoff (Phone) (715) 634-6286  
 Address of Property 9800 KNUTSON DRIVE Plumber Andy Rasmussen MP#220173  
Twin Bear Lake  
Iron River, WI

Telephone (715) 682-9233 (Home) 608-770-8239 (Work) \_\_\_\_\_  
 Authorized Agent: \_\_\_\_\_ (Phone) \_\_\_\_\_  
 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 Yes Addition \_\_\_\_\_ Existing \_\_\_\_\_ Basement: Yes \_\_\_\_\_ No X Number of Stories 2  
 Estimated Cost of Construction \$70,000.00 Square Footage 1008' Sanitary: New \_\_\_\_\_ Existing 0 Privy \_\_\_\_\_ City \_\_\_\_\_  
**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. \_\_\_\_\_ Deck(2) 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) garage with \_\_\_\_\_
- Residential Other (explain) \_\_\_\_\_
- Commercial Principal Building \_\_\_\_\_
- Commercial Principal Building Addition (explain) \_\_\_\_\_
- Commercial Accessory Building (explain) \_\_\_\_\_
- Commercial Accessory Building Addition (explain) \_\_\_\_\_
- Commercial Other (explain) \_\_\_\_\_
- Special/Conditional Use (explain) \_\_\_\_\_
- External Improvements to Principal 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): John Oujiri Date 5-13-2008  
 Address to send permit: John Oujiri ATTACH  
200 Maple Ridge Copy of Tax Statement  
Ashland, WI 54806 If you previously purchased the property Attach a Copy of Recorded Deed

\* See Notice on Back COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date Inteceptor attach'd  
 Date 06/05/08 Permit Number 08-0208 Permit Denied (Date) \_\_\_\_\_  
 Reason for Denial: \_\_\_\_\_  
 inspection Record: STRUCTURAL SEWERAGE/CONDITIONS AS REPRESENTED BY ORDER APPEAL TO  
MEET CODE REQUIREMENTS BY DDC Date of Inspection 5-28-08  
PERMIT MAY BE ISSUED BY CONDITIONS Variance (B.O.A.) # \_\_\_\_\_  
 Mitigation Plan Required: Yes  No  only part of the  
 Condition: THE PERMITTED STRUCTURE MAY NOT INCLUDE ALL THREE (3) OF THE FOLLOWING CONDITIONS TO  
BE CONSIDERED AN ACCESSORY STRUCTURE A) SLEEPING QUARTERS  
B) FOOD PREPARATION FACILITIES/KITCHEN Signed [Signature] Date of Approval 5-28-08  
BARBANS Inspector \_\_\_\_\_  
CONDITIONS - WILL REVISION Rec'd for Issuance \_\_\_\_\_

Dr. John Oujiri  
 # 47161  
 200 Maple Ridge  
 Ashland, WI 54806  
 (715) 682-9233

Scale: 1" = 40'

Twin Bear Lake

9800 Knutson Drive  
 NE, NE, S 4, T46N, R8W  
 Town of Delta  
 Bayfield Co., WI  
 Parcel # 016-1086-08-000

▲ BM = 100' e 8th. of  
 Horiz. Siding @ s.w.  
 Corner of Home  
 (.7' A.G.L.)

Elevations:

B1 = 91.0'  
 B2 = 92.3'  
 B3 = 95.0'

SYSTEM = 88.0'  
 ACT. S4S = 87.0'  
 Lake = 72.0'

