

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

RECEIVED  
AUG 04 2008  
Bayfield County Zoning Dept.

Application No: 09-0015  
Date: \_\_\_\_\_  
Zoning District: \_\_\_\_\_  
Amount Paid: \$300.00 PDS  
8/4/08

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.

LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER \_\_\_\_\_  
Legal Description SE 1/4 of SE 1/4 of Section 3 Township 46 North, Range 08 West, Town of Delta  
Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 0.63  
Volume 813 Page 824 of 718 Deeds Parcel I.D. # 04-016-2-46-08-03-4 Use Tax Statement for Legal Description \_\_\_\_\_

Property Owner Martin O'Sullivan & Karin Amundson Contractor \_\_\_\_\_ (Phone) \_\_\_\_\_  
Address of Property 10980 Eagle Lake Road Plumber \_\_\_\_\_  
Iron River, WI 54847 Authorized Agent C&S Design & Engineering (Phone) 715-682-0330

Telephone 715-372-5140 (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 2

Estimated Cost of Construction \$100,000.00 Square Footage 2,208 Sanitary: New  Existing  Privy  City \_\_\_\_\_  
USE: (Addition to existing system.)

- \* 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) 2nd floor added
- 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 the 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 7/15/08  
Address to send permit C&S Design & Engineering, Inc. 603 Lake Shore Drive West P.O. Box 634 Ashland WI 54806 Copy of Tax Statement ATTACH  
Attach a Copy of Recorded Deed

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

Permit issued: \_\_\_\_\_ State Sanitary Number (04) 06-1185 Date \_\_\_\_\_  
Date 1/16/09 Permit Number 09-0015 Permit Denied (Date) \_\_\_\_\_

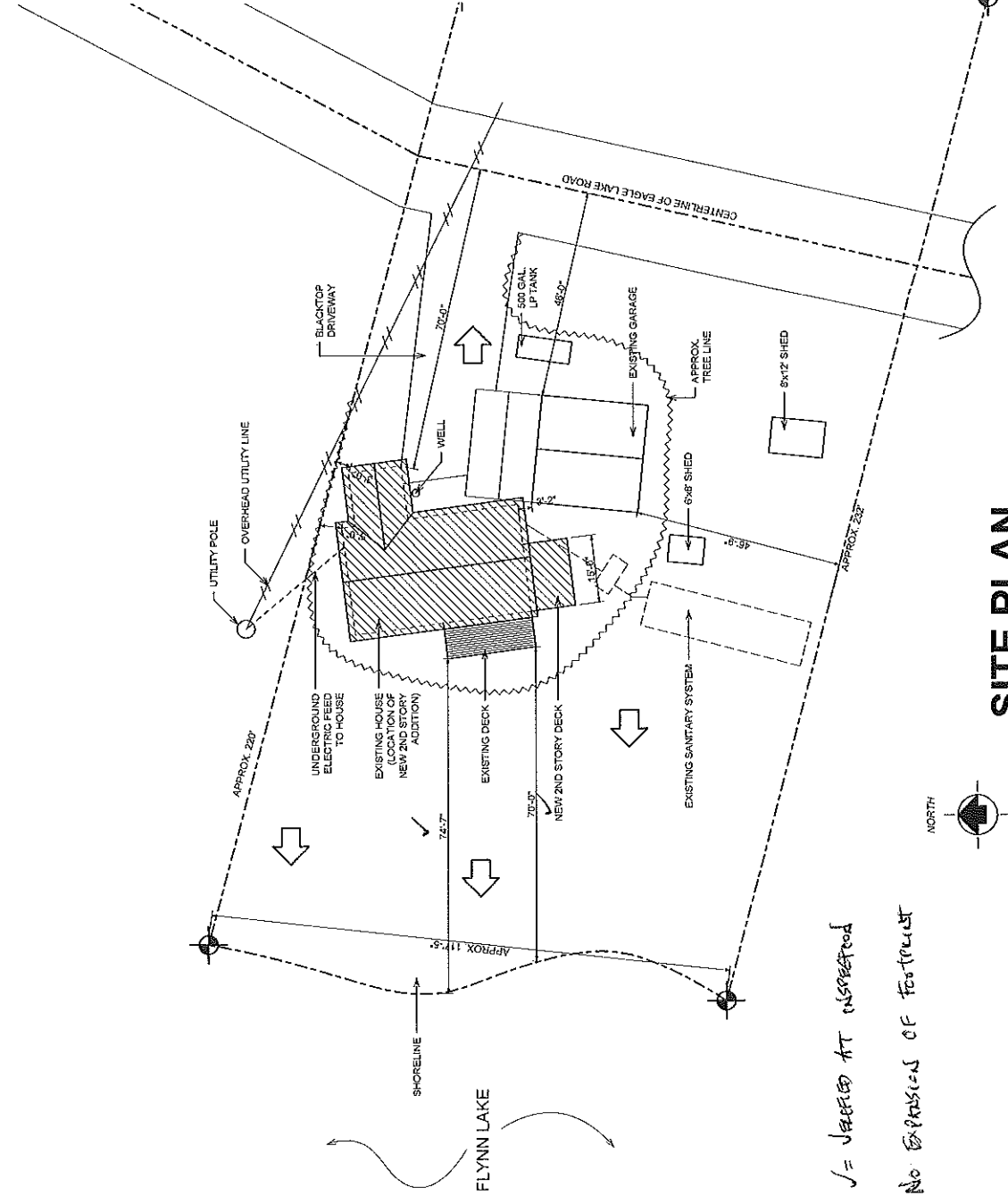
Reason for Denial: ADDITIONS, 100  
Inspection Record: NO EXPANSION OF FOOTPRINT, SECOND STORY, DOES NOT EXCEED 2500 SQ FT OR 22' IN HEIGHT. PERMIT MAY BE ISSUED BY DC Date of Inspection 8-21-08  
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_

Condition: THE TERMS & CONDITIONS OF THE AGREEMENT TO STOP WATER & MITIGATION MUST BE IMPLEMENTED WITHIN ONE (1) YEAR OF THE DATE OF ISSUANCE OF THIS PERMIT AND THE BONDING DROPS TO THE PROPERTY OWNERS.  
Signed [Signature] Date of Approval 8-21-08  
Inspector \_\_\_\_\_  
RECORD FOR ISSUANCE

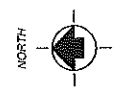
MITIGATION CTR / AFFORD IT

JAN 16 2009

Secretarial Staff



✓ = JACKETED AT MISFEED POINT  
 NO EXPANSION OF FOOTPRINT



**SITE PLAN**  
 SCALE: 1" = 30'-0"