

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County Zoning Department  
P.O. Box 58  
Washburn, WI 54891  
(715) 373-6138

Application No.: 10-0094  
Date: \_\_\_\_\_  
Zoning District: F-1 CLASS 3  
Amount Paid: 75 / 4/26/10 / mg

RECEIVED  
APR 20 2010

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: \_\_\_\_\_

Legal Description: N1/2 Sec 13 T46 R13 S8 1/4 of Section 13 Township 46 North, Range 8 West, Town of Delta

Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 9.34

Volume \_\_\_\_\_ Page \_\_\_\_\_ of Deeds \_\_\_\_\_ Parcel I.D. of 016-2-46-08-13-3 01-600-40000

Property Owner Wayne Engstrom Contractor Self (Phone) \_\_\_\_\_

Address of Property 66355 W. Delta Rd. Plumber \_\_\_\_\_

Iron River, WI 54847 Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 715-372-8944 (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 7,000 Square Footage 576 Sanitary: New  Existing  Privy  City \_\_\_\_\_

USE: \_\_\_\_\_ Type of Septic/Sanitary System On Vessels

\* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_

\* Residence w/deck-porch (# of bedrooms) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_ Porch sq. ft. \_\_\_\_\_

\* Residence w/attached garage (# of bedrooms) \_\_\_\_\_

Residence 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) Storage

Residential Accessory Building Addition (explain) \_\_\_\_\_

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) \_\_\_\_\_

Owner or Authorized Agent (Signature) Leanne M. Engstrom Date 4/20/10

Address to send permit 61355 W. Delta Rd., Iron River, WI 54847 ATTACH \_\_\_\_\_

\* See Notice on Back

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_

Date 4-27-10 Permit Number 10-0094 Permit Denied (Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Inspection Record: Structure meets all conditions as represented by owner - appears to be code compliant

E.W. Permit may be issued. By Doc Date of Inspection 4-23-10

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

Condition: \_\_\_\_\_

Signed \_\_\_\_\_ Inspector \_\_\_\_\_

Secretary of Approval \_\_\_\_\_

APR 19 2010

Rec'd for Issuance

Building to center of Road 178 ft  
 Building to lake 358 ft  
 Septic tank to lot line 123 ft  
 Drain Field to lot line 93 ft  
 Drain Field to well 70 ft  
 well to New Building 241 ft  
 Building to lot line 54 ft  
 Woodshed to N lot line 54 ft  
 To E lot line 177 ft  
 14' to the new building

