

PERMIT 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
 JUN 01 2011
 Bayfield Co. Zoning Dept.

Application No.: 11-0219
 Date: 7-12-11
 Zoning District: R40 CLASS 2
 Amount Paid: \$125.00 PDS
6/11/11

\$ 125.00

ENTERED

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 UNCLASSIFIED

Legal Description 1/4 of NW 1/4 of Section 18 Township 46 North, Range 2 West Town of Deann

Govt Lot Lot Block Subdivision CSM # 1286 Acreage 25.86

Volume Page of Deeds Parcel I.D. # 016 1034 07 Use Tax Statement for Legal Description

Property Owner Arnold & Marlene Einspanner Contractor SELF (Phone) 215-372-4259

Address of Property Iron River WI 54847 Plumber Authorized Agent (Phone)

Telephone 215-372-4299 (Home) 215-372-4299 (Work) 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 Addition Existing Basement: Yes No Number of Stories 1

Estimated Cost of Construction \$10,000 Square Footage >200 Sanitary: New Existing Privy City USE:

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

Residence sq. ft. Commercial Principal Building

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

Residence sq. ft. Porch sq. ft. Commercial Accessory Building Addition (explain)

Deck sq. ft. Deck(2) sq. ft. Commercial Accessory Building (explain) Commercial Accessory Building Addition (explain) 100 sq ft of deck

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) External Improvements to Accessory Building (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) [Signature] Marlene Einspanner 6-1-11

Address to send permit Don Lums 13865 Service Dr Iron River WI 54847 ATTACH

* See Notice on Back

APPLICANT — PLEASE COMPLETE REVERSE SIDE

If you previously purchased the property Attach a Copy of Recorded Deed

Permit Issued: State Sanitary Number Compost Toilet

Date 7-12-11 Permit Number 11-0219 Permit Denied (Date)

Reason for Denial:

Inspection Record: Structure - SEWERAGE/CONDITIONS AS REPRESENTED BY OWNER - NEEDS TO BE CORRECTED & TO REMAIN AS BY STATE OF WISCONSIN.

Date of Inspection 6-21-11 Variance (B.O.A.) #

Mitigation Plan Required: Yes No

Condition: No further work - No Combed fixtures needed and structure unless good

Structure is sealed by a suitable & approved on-site waste disposal system.

Structure must be at least 40 feet from any the boundary of any adjacent lot or avenue or water.

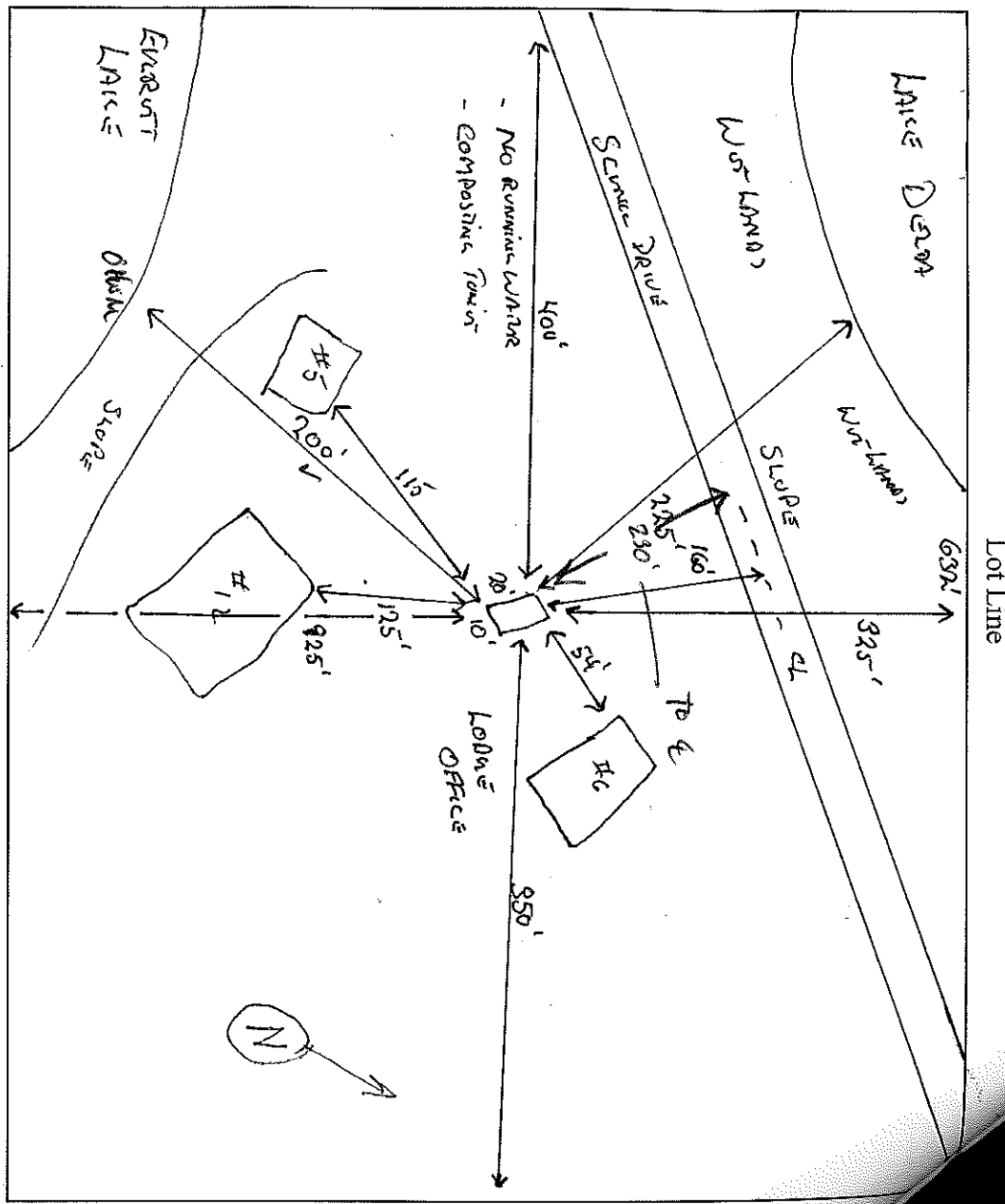
Signed [Signature] Spect for Issuance 6-27-11

Inspected Date of Approval

Add! Structure requires Supervisor of Sewer Dept. approval

Secretary Staff / WAS Dept. approved

As Sect. K.R.



the proposed road, side area features Name of Frontage Road (Scenic Drive)

**IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-7 COMPLETELY**

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location and size of the building.
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. 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. Septic tank to closest lot line
 - e. Septic tank to building
 - f. Septic tank to well
 - g. Septic 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. Drain field to closest lot line
 - l. Drain field to building
 - m. Drain field to well
 - n. Drain field to lake, river, stream or pond
 - o. Well to building