

ENTERED

\$ 100

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

RECEIVED
JUL 25 2008
Bayfield Co. Zoning Dept.

Application No. 08-0384
Date: _____
Zoning District R-2 Class 3
Amount Paid: \$100.00 PDS
7/25/08

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 _____
PART OF Legal Description SE 1/4 of NW 1/4 of Section 36 Township 44 North, Range 8 West, Town of DRUMMOND
Gov't Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 8.25
Volume 635 Page 255 of Deeds Parcel I.D. # 018 1117 08 Use Tax Statement for Legal Description

Property Owner ROGER H. DREHER Contractor SELF (Phone) _____
Address of Property 46560 TRI LAKES ROAD Plumber N/A
DRUMMOND 54832 Authorized Agent _____ (Phone) _____
Telephone (715) 798-3851 (Home) N/A (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 _____
Estimated Cost of Construction \$ 300 Square Footage 360 Sanitary: New Existing Privy City _____
USE: 4 x 30' = 120' + 4 x 60' = 240' Conv

- * 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) _____
- Residential Other (explain) walkway/stairway to lake 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 (we) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (we) responsible for the detail and accuracy of all information I (we) am (we) 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 (we) 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 7/24/08
Address to send permit 46560 TRI LAKES RD, DRUMMOND 54832 ATTACH _____
Copy of Tax Statement _____
Attach a Copy of Recorded Deed _____

* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number _____ Date _____
Date 8-6-08 Permit Number 08-0387 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: Meet to all setbacks. Property lines per owners representations. By M. Furtak Date of Inspection 8-1-08 Variance (B.O.A.) # _____
Mitigation Plan Required: Yes No
Condition: Must use best management practices to prevent erosion and/or siltation of the lake/wetlands.
Signed Michael Furtak 8-4-08
Inspector REC Date of Approval _____
AUG 06 2008
Secretarial Staff

