

\$270.00

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
OCT 17 2013

Bayfield Co. Zoning Dept.

Application No: 13-0390
Date: 10-30-13
Zoning District: R-1 Class 2
Amount Paid: \$270 10-18-13

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 _____ 1/4 of _____ 1/4 of Section 34 Township 44 North, Range 7 West, Town of Drummond
Gov't Lot 2 Lot 2 Block _____ Subdivision _____ CSM # 000 750 Acreage 2.889.

Volume 1004 Page 30 of Deeds Parcel ID. 04-018-2-44-02-344 05-001-05000
Property Owner Gregory & Eric Munson Contractor Jenkins Const. Inc (Phone) 715-789-3807

Address of Property 16775 Pioneer Dr Plumber A. Rosmusen & Sons
Drummond, WI 548

Telephone 651-699-8701 (Home) 651-334-8387 (Work) Authorized Agent James H Jenkins (Phone) 715-789-3807
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
Fair Market Value \$70,000.00 Square Footage 1056
Basement: Yes _____ No Number of Stories 1
Sanitary: New Existing Privy _____ City _____

USE:
 Residence or Principal Structure (# of bedrooms) garage 22'x24'-528 Type of Septic/Sanitary System Drain Field, Sweeps
 Residence w/deck-porch (# of bedrooms) Bathroom 6'x10' = 60 sq ft
Residence sq. ft. _____ Deck sq. ft. _____
Residence sq. ft. _____ Bathhouse = 468 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) _____
 Commercial Principal Building Addition (explain) _____
- Residential Accessory Building (explain) garage + Bank house
 Commercial Accessory Building (explain) _____
- Residential Accessory Building Addition (explain) _____
 Commercial Accessory Building Addition (explain) _____
- Residential Other (explain) _____
 Commercial Other (explain) _____
- External Improvements to Principal Building (explain) _____
- External Improvements to Accessory Building (explain) _____
- Special/Conditional Use (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) James H Jenkins Date 10/16/13
Address to send permit Po Box 374, Cable, WI 54821

ATTACH Copy of Tax Statement of _____
* See Notice on Back (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT - PLEASE COMPLETE REVERSE SIDE

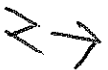
Permit Issued: _____ State Sanitary Number 13-1215 Date 10-22-13
Date 10-30-13 Permit Number 13-0390 Permit Denied (Date) _____

Reason for Denial: _____
Inspection Record: Well staked Meet all standards.
By M. Fuchs Date of Inspection 10-24-13

Mitigation Plan Required: Yes No
Condition: Bank house undrained dwelling space may not exceed 500 sq ft
Variance (B.O.A.) # _____

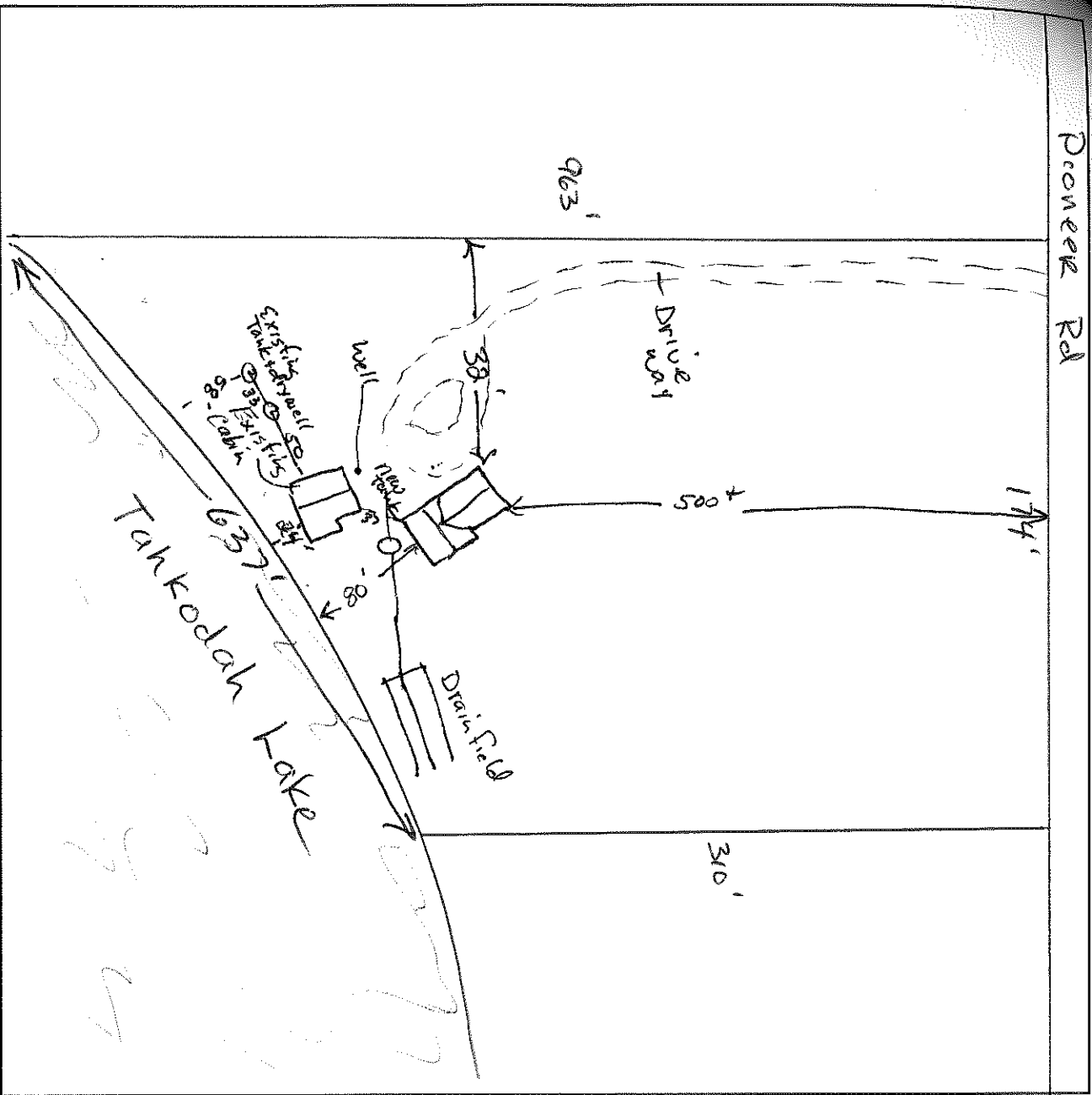
Signed Michael Fuchs Date of Approval 10-29-13
Inspector

2 systems on property



Lot Line

Pioneer Rd



Name of Frontage Road (Pioneer Rd)

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

IMPORTANT

**DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-8 (a-o) COMPLETELY.**

*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits.

Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.