

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
 OCT 07 2008
 COUNTY CLERK'S OFFICE

Application No.: 08-0573
 Date: _____
 Zoning District: A6-1
 Amount Paid: \$125.00 PDS
10/7/08

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 _____

Use Tax Statement for Legal Description
 Legal Description SE 1/4 of SE 1/4 of Section 35 Township 47 North, Range 5 West, Town of Eileen
 Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 30

Volume 881 Page 857 of Deeds Parcel I.D. 04-020-2-47-05-35-4 04-000-20600
 Property Owner Scott Johnson Contractor Scott Johnson (Phone) 292-2458

Address of Property HIGHLAND RD. Ashland, WI 54806 Authorized Agent _____ (Phone) _____
 Telephone 715-182-2458 (Home) 715-182-2458 (Work) 292-2458
 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 130,000 Square Footage 2,240
 USE: Residence on Principal Structure (# of bedrooms) Storage garage
 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) Storage garage
 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 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 ordinance to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature) Scott Johnson Date 10-7-08
 Address to send permit 29335 Hagstrom Rd. Ashland wi 54806 ATTACH _____

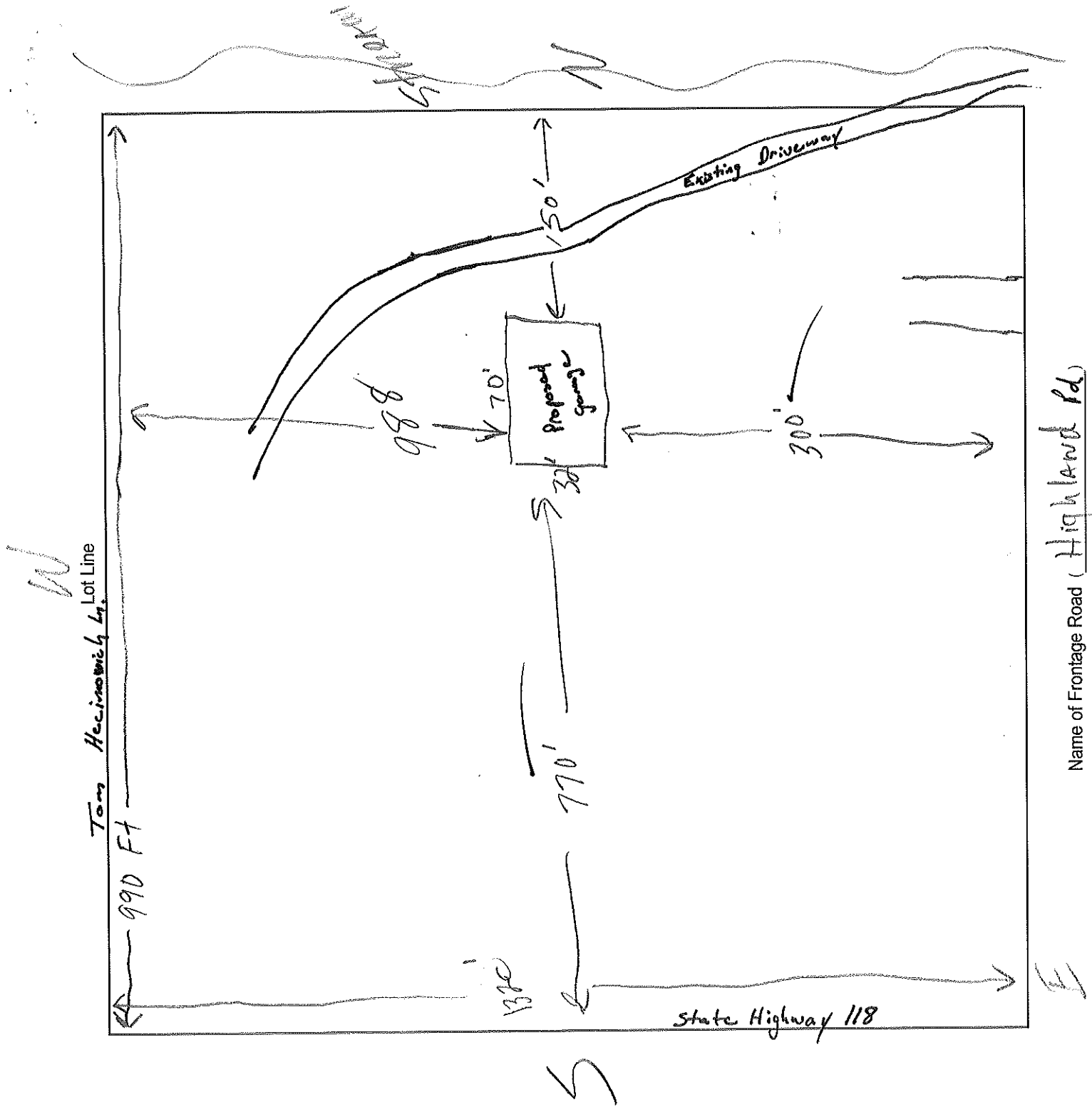
* See Notice on Back
 APPLICANT - PLEASE COMPLETE REVERSE SIDE
 (If you recently purchased the property Attach a Copy of Recorded Deed)

Permit Issued: _____ State Sanitary Number _____ Date _____
 Date 10/16/08 Permit Number 08-0573 Permit Denied (Date) _____
 Reason for Denial: _____

Inspection Record: Meets code requirements per owner's representation. Owner available at time of inspection reprimand.
located at proposed bldg. By Travis Tabinitzky Date of Inspection 10/13/2008
and approximate location of Abatis property line. Set stakes for 100ft setback to stream.
 Mitigation Plan Required: Yes No
 Condition: No human habitation. Not to be used for commercial purposes.
 Variance (B.O.A.) # _____

Signed Travis Tabinitzky Date of Approval 10/15/2008
 Rec'd for issuance Inspector _____

OCT 16 2008
 Secretarial Staff



Name of Frontage Road (Highland 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:

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

- | | |
|--|---|
| a. Building to all lot lines | i. Privy to building |
| b. Building to centerline of road | j. Privy to lake, river, stream or pond |
| c. Building to lake, river, stream or pond | k. Septic Tank and Drain field to closest lot line |
| d. Holding tank to closest lot line | l. Septic Tank and Drain field to building |
| e. Holding tank to building | m. Septic Tank and Drain field to well |
| f. Holding tank to well | n. Septic Tank, and Drain field to lake, river, stream or pond. |
| g. Holding tank to lake, river, stream or pond | o. Well to building |
| h. Privy to closest lot line | |

*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.