

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
NOV 17 2008
Bayfield Co. Zoning Dept.

Application No. 08-0627
Date: _____
Zoning District AG-1
Amount Paid: \$75.00 Cash
205 11/17/08

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 NE 1/4 of SE 33 1/4 of Section 33 Township 47 North, Range S West, Town of Eiken

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 40.45

Volume 578 Page 84 of Deeds Parcel I.D. 0201071-01

Property Owner Jim Junker Contractor Larson Construction (Phone) 272-2155
Plumber _____

Address of Property Ashland Wis. 54806 Authorized Agent _____ (Phone) _____

Telephone 715-746-2552 (Home) 970-209-8532 (Work)

Is your structure in a Shoreland Zone? Yes No If yes, _____

Structure: New Addition _____ Existing _____

Fair Market Value 22,000 Square Footage 40' x 12'

USE: 2,800

* 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. _____ Garage sq. ft. _____

Residential Addition / Alteration (explain) _____

Residential Accessory Building (explain) Pola Shed

Residential Accessory Building Addition (explain) _____

Residential Other (explain) _____

Owner or Authorized Agent (Signature) _____ Date 11-17-08

Address to send permit, Same as above. ATTACH _____

* See Notice on Back

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number _____ Date _____

Date 11/19/08 Permit Number 08-0627 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Meets code requirements for owner's representation. owner present at time of inspection verified south property line and proposed bldg. location was well-staked. By Travis Tubewitz Date of inspection 11/18/2008

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

Condition: No human habitation.

Signed Travis Tubewitz Inspector Date of Approval 11/18/2008

Rec'd for Issuance

NOV 19 2008

Secretarial Staff



0 0.02 0.04 mi

69' to E of Gilles Rd

60' to South Property line New Building

Query Results

Parcel Owner		Legal Description	
JAMES P & LAURA JUNKER 64295 GILLES RD ASHLAND WI 54806		NE SE 587	
Location		History	
Section 33, Town 47 N, Range 05 W		;578-84	
New PIN		Old PIN	
04-020-2-47-05-33-4 01-000-10000		020107101000	
Land Value		Total Acres	
0.00000	Improvement Value	40.45800	
	0.00000		