

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
AUG 14 2009
Bayfield Co. Zoning Dept.

Application No: 09-0375
Date: _____
Zoning District: R-1
Amount Paid: 300 @ 17/109
9/1/09 \$50
Reconnect mg

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 NW 1/4 of Section 12 Township 47 North, Range 5 West, Town of Eileen

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 1.0

Volume 613 Page 198 of Deeds Parcel I.D. 04-020-2-47-05-12-2 01-000-30000

Property Owner John Nordell Contractor American Homes (Phone) (715) 835-0568
Address of Property 30310 Hwy 137 Plumber Ed Redinger 221939
Ashland Wisconsin 54806 Authorized Agent _____ (Phone) _____

Telephone 715-972-2662 (Home) _____ (Work) _____

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

Structure: New Addition Existing Basement: Yes No Number of Stories 1

Fair Market Value \$100,000 Square Footage 1008 City _____

USE: Residence or Principal Structure (# of bedrooms) 2 1072 Type of Septic/Sanitary System holding tank

Mobile Home (manufactured date) 9-26-07

Residence sq. ft. 1008 Commercial Principal Building _____

Residence w/deck-porch (# of bedrooms) 2 Commercial Principal Building Addition (explain) _____

Residence sq. ft. 1008 Porch sq. ft. _____ Commercial Accessory Building (explain) _____

Deck sq. ft. 67 Deck(2) sq. ft. _____ Commercial Accessory Building Addition (explain) _____

Residence w/attached garage (# of bedrooms) _____ Commercial Other (explain) _____

Residence sq. ft. _____ Garage sq. ft. _____ Residential Addition / Alteration (explain) _____

Residential Accessory Building (explain) _____ Special/Conditional Use (explain) _____

Residential Accessory Building Addition (explain) _____ External Improvements to Principal Building (explain) _____

Residential Other (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 (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) John Nordell Date 8/9/09

Address to send permit 30310 Hwy 137 Ashland WI 54806 ATTACH _____

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

Permit Issued: State Sanitary Number 220933 Date 6/21/1994

Date 9/1/09 Permit Number 09-0375 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: 50 foot R/W from centerline of Hwy 137. Meets code requirements per Owner's representation. Owner present at time of inspection & verified proposed structure location and By Travis Teburgeby Date of inspection 8/21/2009

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

Condition: _____

Signed Travis Teburgeby Date of Approval 8/21/2009

Inspector Rec'd for Issuance Needs # - reconnect Rec'd for Issuance

AUG 24, 2009

Secretarial Staff 9/11 7009

Secretarial Staff

