

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**

DEC 22 2009

Application No.: 09-0582  
 Date: \_\_\_\_\_  
 Zoning District AG-1/Class 3  
 Amount Paid: \$75  
12/23/09 / 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 13 Township 47 North, Range 5 West, Town of Eileen

Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 3.5

Volume 860 Page 287 of Deeds Parcel I.D. 04-020-2-47-05-13-201-000-0000

Property Owner MARK & KELLY KELLICK Contractor self (Phone) \_\_\_\_\_

Address of Property 30475 Carlson Rd Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 682 1000 (Home) 682 9770 (Work) \_\_\_\_\_

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 \$ < 25,000 Square Footage 520 sq ft

USE:  \* 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) Horse Shelter

Residential Accessory Building Addition (explain) \_\_\_\_\_

Residential Other (explain) \_\_\_\_\_

Mobile Home (manufactured date) \_\_\_\_\_

Commercial Principal Building \_\_\_\_\_

Commercial Principal Building Addition (explain) \_\_\_\_\_

Commercial Accessory Building (explain) \_\_\_\_\_

Commercial Accessory Building Addition (explain) \_\_\_\_\_

Commercial Other (explain) \_\_\_\_\_

Special/Conditional Use (explain) \_\_\_\_\_

External Improvements to Principal Building (explain) \_\_\_\_\_

External Improvements to Accessory Building (explain) \_\_\_\_\_

FAILURE TO OBTAIN A PERMIT OF 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) Mark Kellick Date 12/22/09

Address to send permit 30475 Carlson Rd, Ashland WI 54806 ATTACH

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

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_

Date 12/23/09 Permit Number 09-0582 Permit Denied (Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Inspection Record: Meets code requirements per owner's representative. Owner present at time of inspection, proposed structure is 3200 sq. ft. to all property lines. Structure to be located after base of pasture. By Travis Tabungly Date of inspection 12/22/2009

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

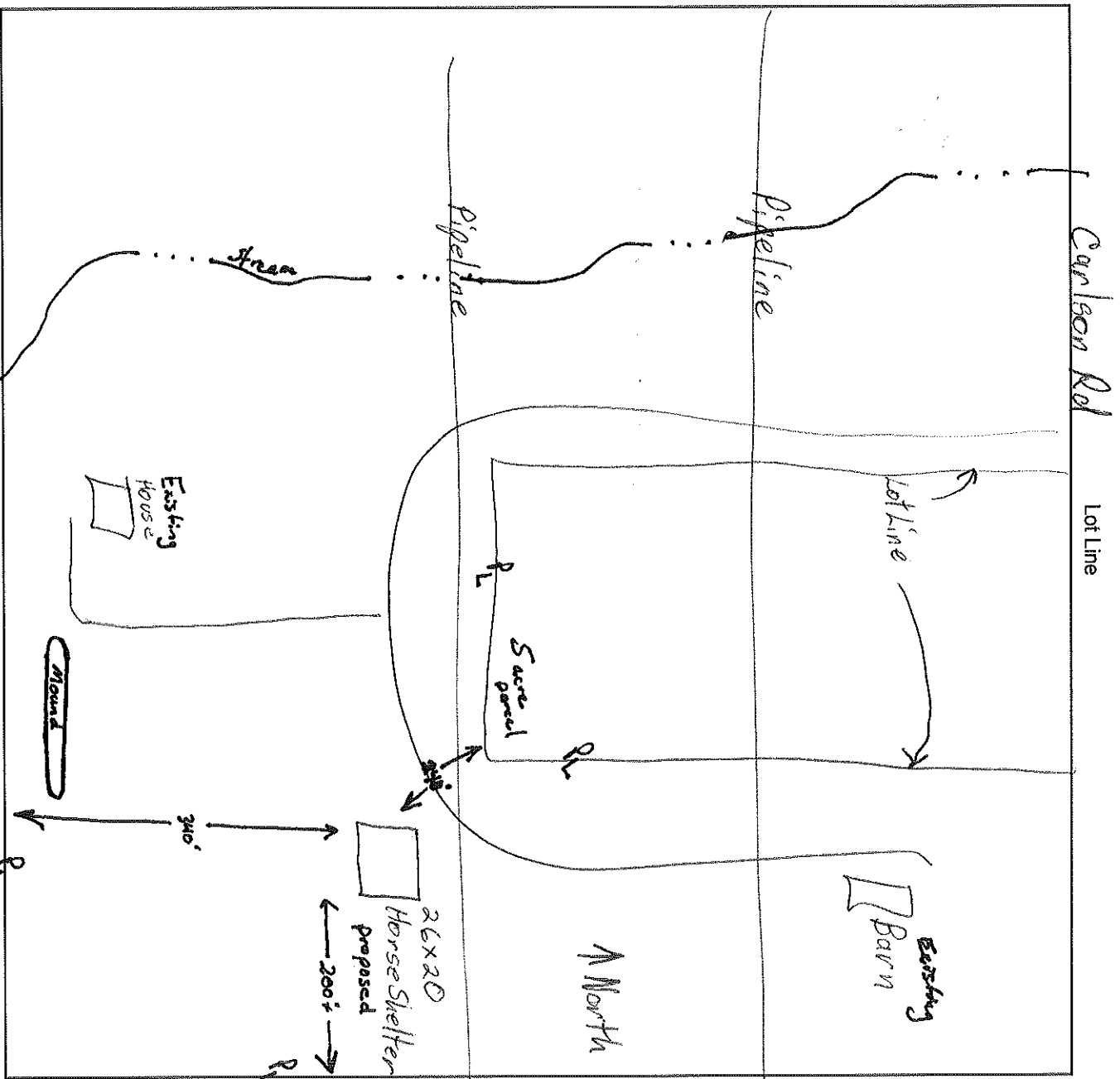
Condition: \_\_\_\_\_

Signed Travis Tabungly Inspector 12/22/2009 Date of Approval

Rec'd for Issuance

DEC 23 2009

www.bayfieldstaff.com



Name of Frontage Road ( \_\_\_\_\_ )

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.