

**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 27 2010

Application No.: 10-0462  
 Date: \_\_\_\_\_  
 Zoning District A-1/-  
 Amount Paid: \$150.00 BAS  
10/27/10

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 NE 1/4 of Section 28 Township 47 North, Range S West, Town of Eileen  
 Gov't Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 4.0  
 Volume \_\_\_\_\_ Page \_\_\_\_\_ of Deeds Parcel I.D. 04-D20-2-17-05-28-1 04-220-10000

Property Owner John Fiorio Contractor Owner (Phone) \_\_\_\_\_  
 Address of Property 65745 Gilles Rd Ashland, WI Plumber N/A (Phone) \_\_\_\_\_  
 Authorized Agent Owner (Phone) \_\_\_\_\_

Telephone 715-682-2807 (Home) 715-692-8439 (Work) Written Authorization Attached: Yes  No   
 Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_

Structure: New \_\_\_\_\_ Addition  Existing \_\_\_\_\_  
 Fair Market Value 150K Square Footage 600  
 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. 600 sf.  
 Residential Addition / Alteration (explain) Garage on addition  
 Residential Accessory Building (explain) \_\_\_\_\_  
 Residential Accessory Building Addition (explain) \_\_\_\_\_  
 Residential Other (explain) \_\_\_\_\_

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 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 Fiorio Date 10/25/10  
 Address to send permit 65745 Gilles Rd, Ashland, WI 54806 ATTACH \_\_\_\_\_  
 Copy of Tax Statement or (if you recently purchased the property Attach a Copy of Recorded Deed)

\* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number 60324 (11512) Date 2008 11/12  
 Date # 10-0462 Permit Number 11/8/10 Permit Denied (Date) \_\_\_\_\_  
 Reason for Denial: \_\_\_\_\_  
 Inspection Record: Structural Sanitary Conditions as represented by other Agency to be case  
Checked by: Permit only by DR By DR Date of Inspection 11-5-10  
 Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
 Condition: \_\_\_\_\_

Signed John Fiorio Inspector \_\_\_\_\_ Date of Approval 11-5-10  
Call 292-1761 rec'd for issuance



1952 # 0230

INDICATES 30' TO N RIC

1996 # 5360

235' E OF ROAD

0 0.02 0.04 mi

Query Results

<b>Parcel Owner</b>	<b>Legal Description</b>
JOHN R FIORIO 65745 GILLES RD ASHLAND WI 54806	SE NE 488
<b>Location</b>	<b>History</b>
Section 28, Town 47 N, Range 05 W	453-188;556-402
<b>New PIN</b>	<b>Old PIN</b>
04-020-2-47-05-28-1 04-000-10000	020105806000
<b>Land Value</b>	<b>Total Acres</b>
5800.00000	40.32000
<b>Improvement Value</b>	
0.00000	