

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

JUL 22 2009

Bayfield County Zoning Dept.

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 1/4 of Section 7 Township 48 North, Range 4 West, Town of Barksdale
Gov't Lot 2 Lot Block Subdivision CSM # Acreage .6

Volume 1017 Page 119 of Deeds Parcel I.D. 002-1002-03 000

Property Owner Ron Tanko Contractor Dykstra Const (Phone) 715 209 7411

Address of Property 74740 Lake Shore Dr Plumber
Washburn WI 54891 Authorized Agent _____

Telephone 608 289 6951 (Home) 608 758 7948 (Work)

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

Structure: New _____ Addition Existing

Fair Market Value 15,000 Square Footage 931

USE:

* Residence or Principal Structure (# of bedrooms) _____

Residence sq. ft. _____ Garage 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) Replacing garage

Residential Accessory Building (explain) New deck (10.5 x 14)

Residential Accessory Building Addition (explain) Repair 16' of basement (North side)

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 ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature) Ronald Tanko Date 7-20-09

Address to send permit 4259 Parkview Dr Janesville WI

ATTACH

* See Notice on Back Copy of Tax Statement or
Attach a Copy of Recorded Deed

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number 09-1385 Date 9/23/2009

Date 10-15-09 Permit Number 09-0490 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Per present at the inspection, staked proposed garage location
North property line has been flagged & surveyed.

BOA limited garage size to 16' x 14' by Travis Telnovsky Date of Inspection 10-5-2009

30' x 30' including overhang and deck not to exceed 100 sq. ft.

Mitigation Plan Required: Yes No

Variance (B.O.A.) # 09-08B

Condition: Per recorded Affidavit: Properly install silt fence downslope of

proposed garage addition and spoil pile area.

Signed Travis Telnovsky 10/14/2009

Inspector

Date of Approval

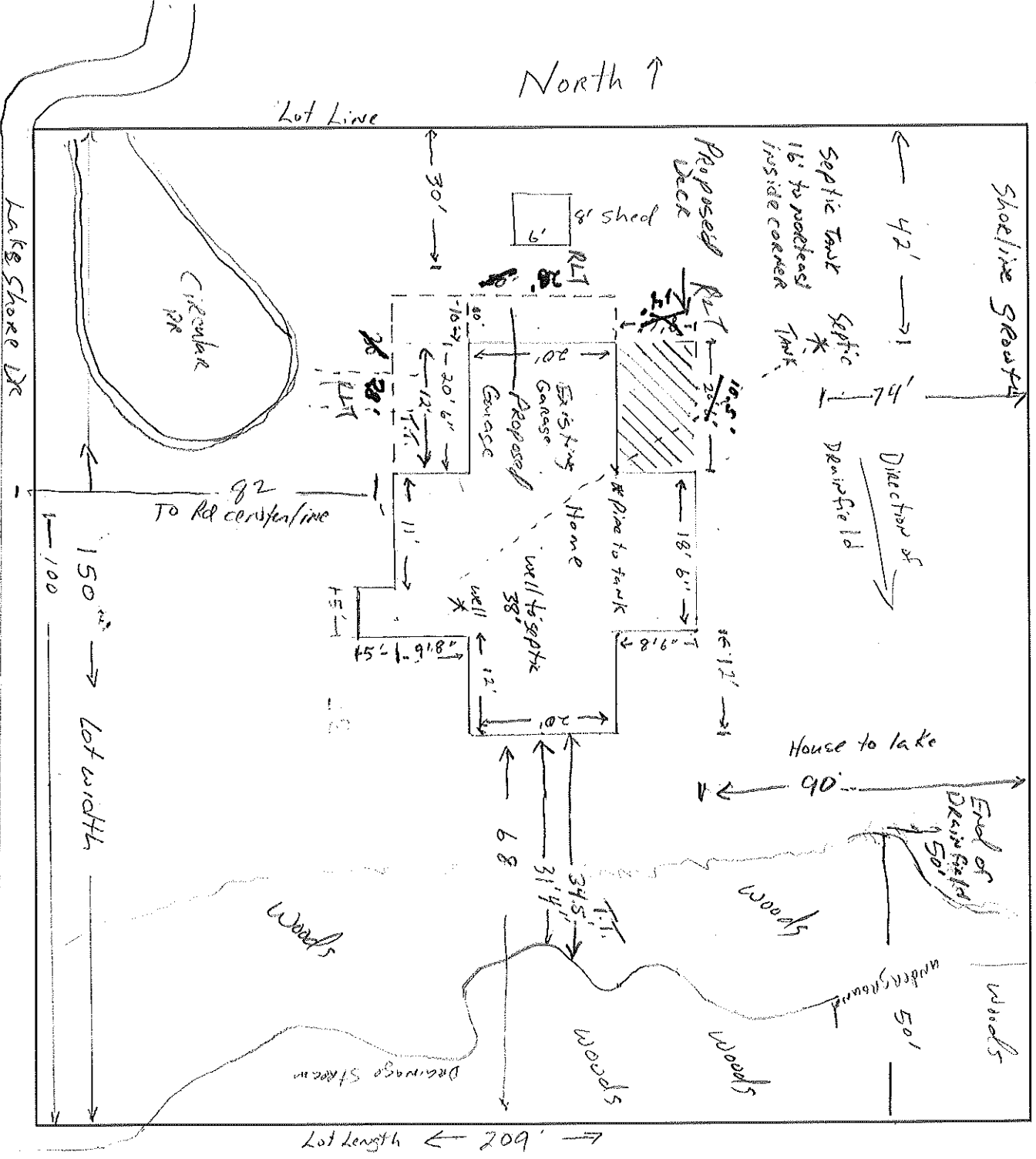


Application No: 09-0490
Date: 10-15-09
Zoning District Class I + 3 / R-1
Amount Paid: 50 - 7/22/09 PPS
325.00 10-15-09
dkk



Lake Superior

Lot Line



Name of Frontage Road (Lakeshore Dr)

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 tank, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.

