

ENTERED

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
OCT 28 2009
Bayfield Co. Zoning Dept

Application No.: 10-0001
Date: _____
Zoning District: R-1
Amount Paid: _____

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 OTHER Class B

Use Tax Statement for Legal Description
Legal Description: NE 1/4 of NW 1/4 of Section 18 Township 48 North, Range 4 West, Town of Barksdale
Gov't Lot 1 Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 8.8

Volume 352 Page 287 of Deeds Parcel I.D. 04-002-2-48-04-18-2-05-001-50000
Property Owner Robert & Teresa Misner Contractor _____ (Phone) _____
Address of Property 3285 Engle Rd Plumber _____
Washburn WI 54891 Authorized Agent _____ (Phone) _____
Telephone 715-373-2114 (Home) 715-209-0510 (Work) _____

Is your structure in a Shoreland Zone? Yes No If yes, _____
Structure: New _____ Addition _____ Existing
Fair Market Value _____ Square Footage _____
 * Residence or Principal Structure (# of bedrooms) 2

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) _____
 Residential Accessory Building Addition (explain) _____
 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) Teresa Misner Date 10-25-09

Address to send permit Same as above 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 1/6/10 Permit Number 10-0001 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: Home-based business for Realty office, work space will be within current residence.
Special Use Class B By Teresa Tubowitz Date of Inspection _____
Permit required.
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: Per recorded Affidavit. No addl. condns placed

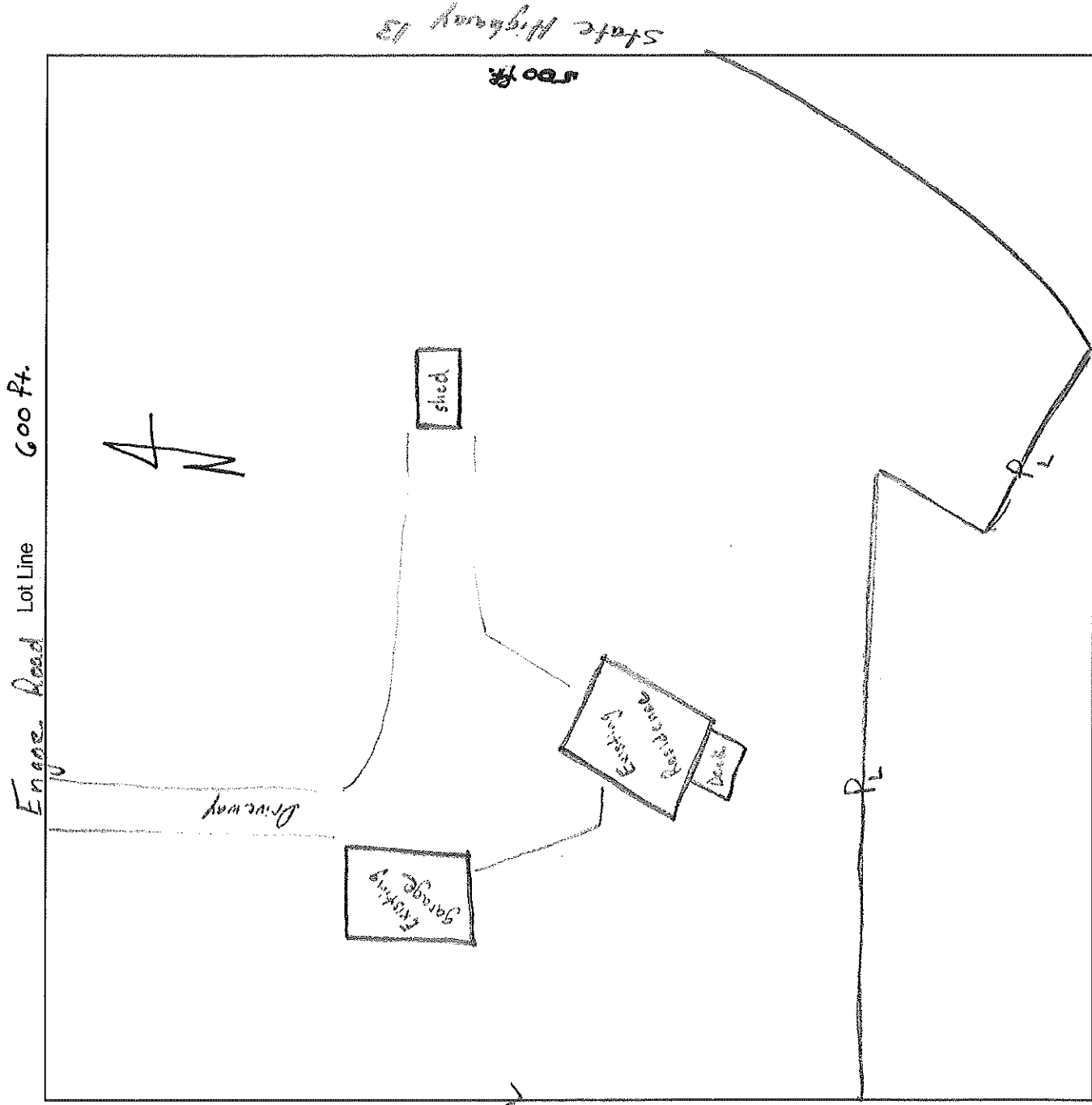
Signed Teresa Tubowitz Date of Approval 1-05-2010
Inspector _____

Rec'd for Issuance

SENT TO ZONING

JAN 6 2010

Secretarial Staff



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.

