

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

MAR 18 2010

Application No.: 10-0046
 Date: _____
 Zoning District: F-1
 Amount Paid: \$75
3/22/10/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 SE 1/4 of NE 1/4 of Section 36 Township 48 North, Range 9 West, Town of Bartsdale
 Gov't Lot _____ Lot _____ Block _____ Subdivision _____
 Volume 434 Page 125 of Deeds Parcel I.D. 04-002-2-48-06-36-1 04-000-3000

Property Owner Glen & Mary Floz
 Address of Property 70545 Range Rd
Asland, WI 54806
 Telephone 715 682 6082 (Home) _____ (Work) _____

Is your structure in a Shoreland Zone? Yes No if yes.
 Structure: New Addition Existing _____
 Fair Market Value \$10,000 Square Footage 960
 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) GARAGE
- Residential Accessory Building Addition (explain) _____
- Residential Other (explain) _____

Written Authorization Attached: Yes No
 Distance from Shoreline: greater than 75' 75' to 40' less than 40'
 Basement: Yes _____ No Number of Stories 1
 Sanitary: New _____ Existing Privy _____ City _____
 Type of Septic/Sanitary System Conventional
 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 zoning ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature) [Signature] Date 3-18-10
 Address to send permit _____ 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 _____ Date _____
 Date 3/24/10 Permit Number 10-0046 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Proposed structure location was well staked and south property line well flagged w/blue paint ribbons. Appears to meet codes. By Travis Talovitzky Date of Inspection 3/23/2010 requirements per owner's representation.
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: No human habitation.

Signed Travis Talovitzky Inspector Date of Approval 3/23/2010
 rec'd for issuance
 MAR 24 2010
 Secretarial Staff

LOT LINE

GLEN
70545
ASHLA

