

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

RECEIVE
 OCT 28 2008
 Bayfield Co. 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 NW 1/4 of SE 1/4 of Section 24 Township HUGHES North, Range 47N 9W West, Town of HUGHES

Gov't Lot 1 Block Subdivision CSM # 617 Acreage 1.68

Volume 751 Page 246 of Deeds Parcel I.D. 02-1064-A-601

Property Owner ERIK PRICE Contractor SELF (Phone) 715 372 4628

Address of Property 6515 KOLLING RD. Plumber JAY LARSON

IRON RIVER, WI 54847 Authorized Agent N/A (Phone) N/A

Telephone 715 813 0282 (Home) 715 372 4628 (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 \$100,000 Square Footage 4080
 USE: 19,000.00

Residence or Principal Structure (# of bedrooms) _____
 Residence sq. ft. _____

Residence w/deck-porch (# of bedrooms) _____
 Residence sq. ft. _____

Deck sq. ft. _____ Deck(2) sq. ft. _____

Residence w/attached garage (# of bedrooms) 1

Residence sq. ft. 1440 Garage sq. ft. 2640

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) [Signature] Date 10/20/08

Address to send permit PO Box 421 Iron River, WI 54847 ATACH

* 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 09-023 Date 1/30/2009

Date 08/04/09 Permit Number 09-0023 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: STRUCTURAL SETBACKS/CONDITIONS AS REPRESENTED BY OWNER APPEARS TO BE CODE COMPLIANT & PERMIT MAY BE ISSUED w/ CONDITIONS

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

Condition: A UNIFORM BREWING CODE (UBC) PERMIT AND THE LOCAL OUTLETS UBC INSPECTION AGENCY MUST BE OBTAINED PRIOR TO THE START OF CONSTRUCTION.

Signed [Signature] Inspector [Signature] Date of Inspection 11-18-08

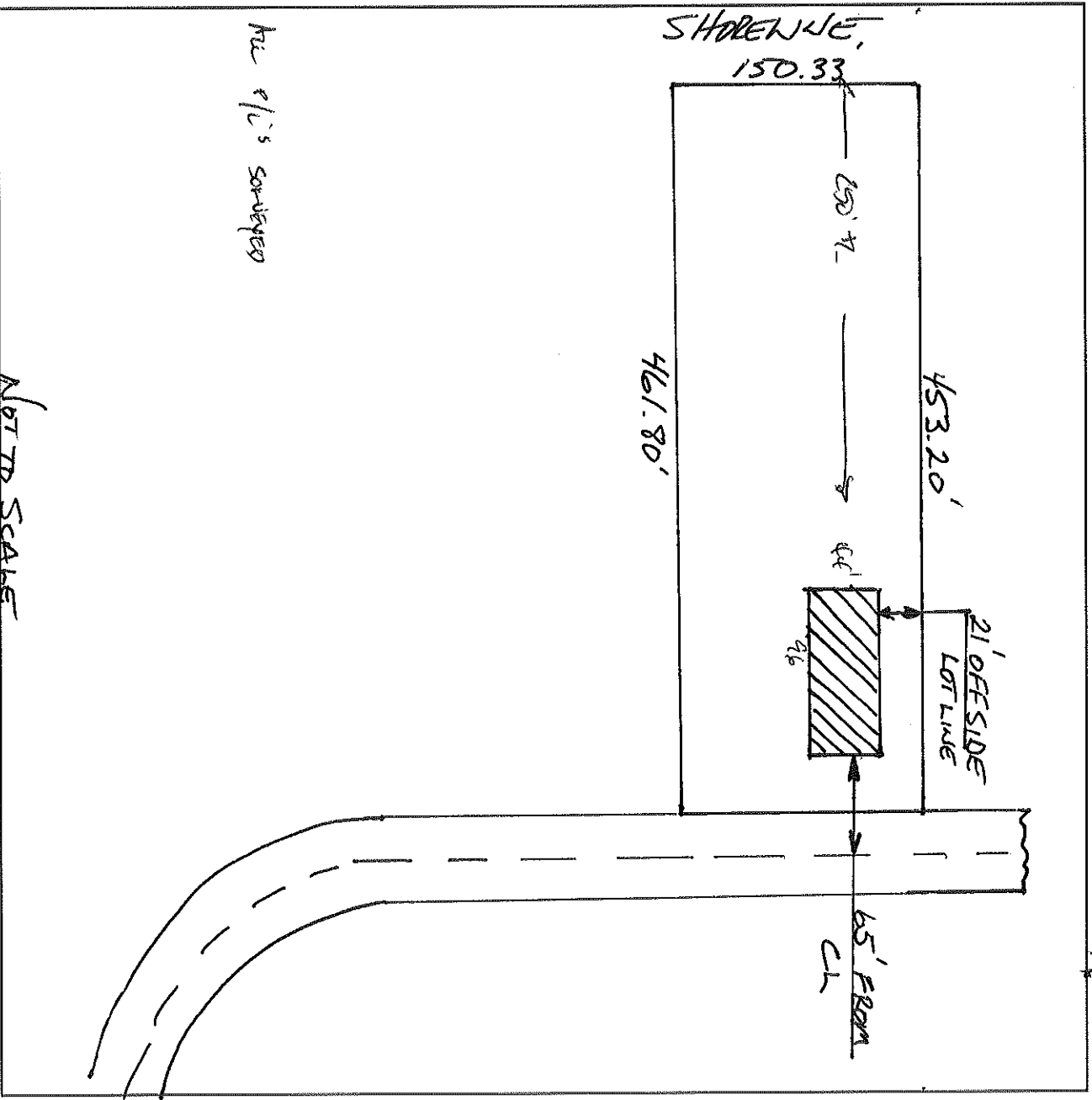
Rec'd for Issuance [Signature] Approval 11-1-08
Feb 4 2009

Secretarial Staff

Application No. 09-0023
 Date: _____
 Zoning District R-1/2
 Amount Paid: \$250.00
11/12/08/mj



Lot Line



Name of Frontage Road (KOLLING RD.)

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.