

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

MAY 01 2009
Bayfield Co. Zoning Dept.

Application No.: 09-0304
Date: _____
Zoning District: F-PB/3
Amount Paid: 180.- 5/5/09
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 Part SW 1/4 of NE 1/4 of Section 11 Township Hughes North, Range 09W West, Town of Hughes
Gov't Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 32
Volume _____ Page _____ of Deeds Parcel I.D. 04-022247-09-11-103-000-10000

Property Owner: Richard Rewald Contractor: SRK (Phone) _____
Plumber

Address of Property 5620 US HWY 2 Iron River WI 54847 Authorized Agent _____ (Phone) _____
303 699-0486 303 827-9813
Telephone 715 372-6428 (Home) 715 372-6428 (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 60,000 Square Footage 1100 sq ft Sanitary: New _____ Existing Privy _____ City _____
USE: 450 sq ft Garage type of Septic/Sanitary System Septic Tank & S.C.C.

- * Residence or Principal Structure (# of bedrooms) _____
Residence sq. ft. _____
- * Residence w/deck-porch (# of bedrooms) _____
Residence sq. ft. _____ Porch sq. ft. _____
- Deck sq. ft. _____
- * Residence w/attached garage (# of bedrooms) _____
Residence sq. ft. _____ Garage sq. ft. _____
- Residential Addition / Alteration (explain) Expand Size, Add Deck on 2nd Floor, Garage
- Residential Accessory Building (explain) _____
- Residential Accessory Building Addition (explain) _____
- Residential Other (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 county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature) Richard Rewald Date 1 May 2009
Address to send permit 608 15 Av W, Ashland WI 54806 ATTACH _____
Copy of Tax Statement or Attach a Copy of Recorded Deed

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

Permit Issued: State Sanitary Number 2037/09-355 Date MAY 16/10/09
Date 6/10/09 Permit Number 09-0304 Permit Denied (Date) _____

Reason for Denial: _____
Inspection Record: Structure sanitary conditions (PITS) AS REPRESENTED BY OWNER MEANS TO BE CORRECT
COMPLIANT - C.W. PERMIT NOT BY ISSUED Date of Inspection 5-12-09

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

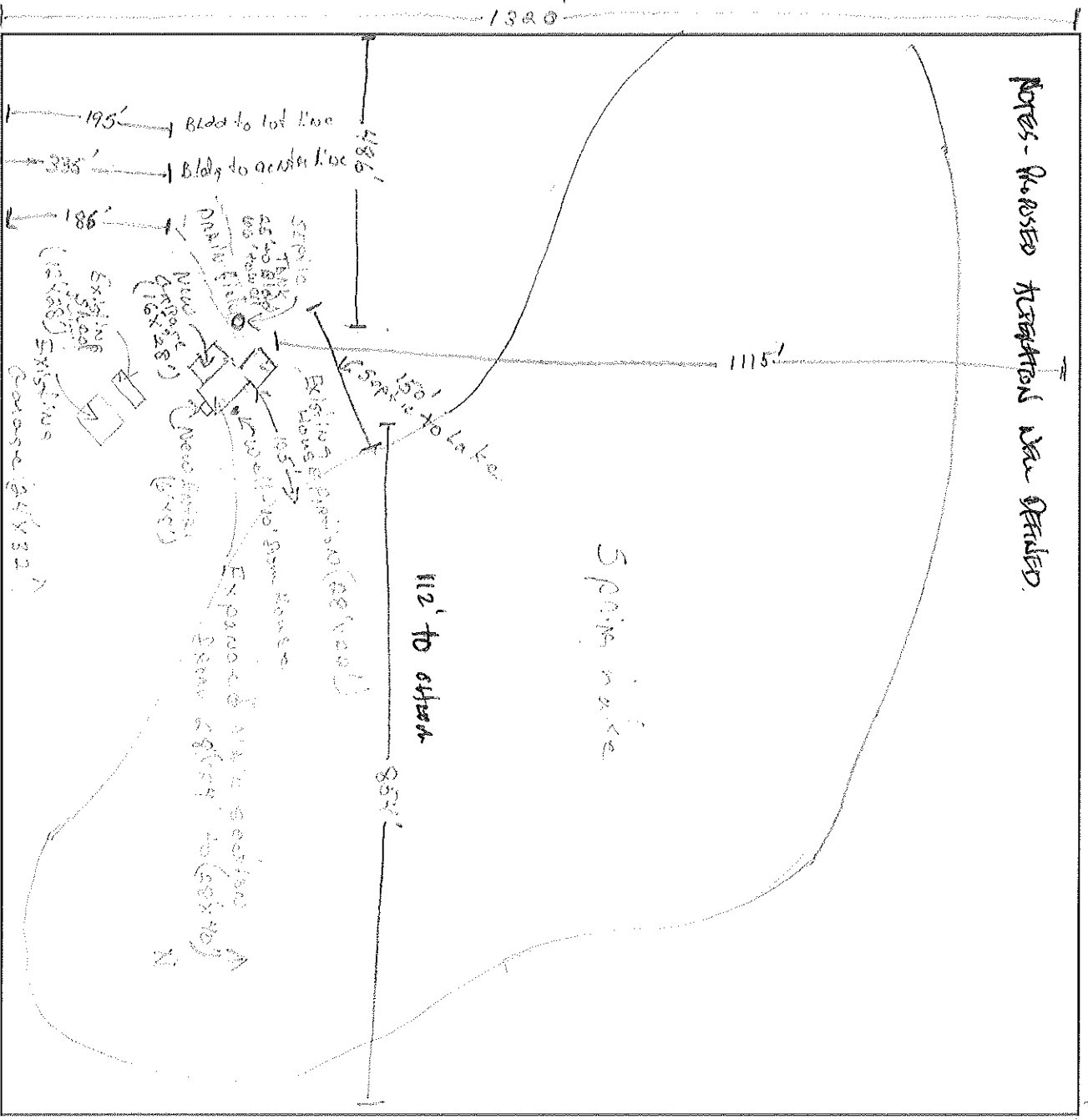
Signed [Signature] Inspector _____ Date of Approval 5-12-09
10day Sanitary Permit # _____
Dev. tasked previous address - 2 BAYCOON

Rec'd for Issuance

JUN 10 2009
Secretarial Staff

1320'
Lot Line

Notes - No ROSTED Attachments Were Provided.



105' to St. > 30' to Drain Field
Name of Frontage Road (US Hwy 2)

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 ~~1185~~ 30 495 6
 - b. Building to centerline of road 325
 - c. Building to lake, river, stream or pond 105
 - 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 186
 - l. Septic Tank and Drain field to building 27
 - m. Septic Tank and Drain field to well 66
 - n. Septic Tank and Drain field to lake, river, stream or pond. 150
 - o. Well to building 10

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.