

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**  
 JUL 06 2010

Application No: 10-0255  
 Date: 7/20/10  
 Zoning District: R-1/Class 1 & 3  
 Amount Paid: \$175

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 SW 1/4 of Section 18 Township 48 North, Range 4 West, Town of BARKSDALE

Gov't Lot 3 Lot Block Subdivision CSM # Acreage Class A

Volume Page of Deeds Parcel I.D.

Property Owner WI DOT

Address of Property END OF BOND CREK

ROAD, BARKSDALE

Contractor BRAD CAMPBELL (Phone) 715 209 1012

Plumber ---

Authorized Agent WI DNR (Phone) 715 209 1928

Telephone (Home) (Work) --- Written Authorization Attached: Yes  No

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 \$26,000 Square Footage 16' X 50'  
**USE:** BOAT RAMP

- \* 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) ---
- 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) Timothy W Davis Date 7/6/10

Address to send permit BOX 545 WASHBURN, WI 54891  
WI DNR

\* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number --- Date ---

Date 7-23-10 Permit Number 10-0255 Permit Denied (Date) ---

Reason for Denial: ---

Inspection Record: Project is within WI DOT Right-of-way. The proposal is to replace the boat ramp near the mouth of Bond creek on Lake Superior. The concrete ramp will be 16' x 50', 20 ft of which will be by Travis Tebenitsky Date of inspection 7/06/2010 below the OHBM.  
 Mitigation Plan Required: Yes  No  Variance (B.O.A.) # ---

Condition: Grading and land disturbance is limited to the area needed to construct the boat ramp. Subject to the conditions on WI DNR approval letter.

Signed Travis Tebenitsky Date of Approval 7/19/2010

Inspector Rec'd for Issuance

JUL 22 2010

Secretarial Staff

