

**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**  
NOV 24 2009  
BAYFIELD CO. ZONING DEPT.

Application No: 10-0050

Date: F-1

Zoning District: F-1

Amount Paid: \$300

\$175-TBA

6/3/09/mj

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 S22 SW NW 1/4 of NW 1/4 of Section 24 Township 47 North, Range 09 West, Town of Hayes

Gov't Lot 28 of Deeds 104-022-2-47-09-24-202-000-2000 Parcel I.D. Subdivision 4.96 Acreage

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Property Owner Franz Blhokst Contractor Self (Phone) \_\_\_\_\_

Address of Property 66790 East Deep Lt RD Plumber Tony Blhokst

Deep River WI, 54847 Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone (715) 372-8478 (Home) (715) 372-4287 (Work)

Is your structure in a Shoreland Zone? Yes  No  if yes.

Structure: New  Addition Existing  Distance from Shoreline: greater than 75'  75' to 40'  less than 40'

Fair Market Value 100,000 Square Footage 132 Basement: Yes  No  Number of Stories 1

USE:  Residence or Principal Structure (# of bedrooms) 3648 Sanitary: New  Existing  Privy  City

Mobile Home (manufactured date) \_\_\_\_\_ Type of Septic/Sanitary System Septic Tank

Residence sq. ft. \_\_\_\_\_  Commercial Principal Building \_\_\_\_\_

Residence w/deck-porch (# of bedrooms) \_\_\_\_\_  Commercial Principal Building Addition (explain) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_  Commercial Accessory Building (explain) \_\_\_\_\_

Deck sq. ft. \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_

Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_  Special/Conditional Use (explain) \_\_\_\_\_

Residential Addition / Alteration (explain) \_\_\_\_\_  External Improvements to Principal Building (explain) \_\_\_\_\_

Residential Accessory Building (explain) \_\_\_\_\_  External Improvements to 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 have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature) Franz Blhokst Date 11-24-09

Address to send permit 66790 E. Deep Lt RD Deep River WI, 54847 ATTACH

\* 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 10-085 Date 3-24-10

Date 3/30/10 Permit Number 10-0050 Permit Denied (Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Inspection Record: Structural Geotech/Advisors AS REPRESENTED BY OWNER BEST BE CONSULT A DO

Permit may be issued by DOZ By DOZ Date of Inspection 11-30-09

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

Condition: A DISTURBANCE MITIGATION CASE (DMC) FROM THE LOCALITY CONTRACTED DDC INSPECTION KRAKE

MUST BE OBTAINED PRIOR TO THE START OF CONSTRUCTION.

2) EXISTING MOBILE MUST BE REMOVED WHEN CONSTRUCTION OF THIS DISTURBANCE MITIGATION CASE - THIS PERMIT IS COMPLETED AT

A FURTHER PERMIT MUST BE REQUESTED FOR

MAINTAINING THE(2) RESIDENCES AS THE STATE ORDER.

Signed \_\_\_\_\_ Inspector \_\_\_\_\_ Date of Approval 11-30-09

Rec'd for Issuance \_\_\_\_\_

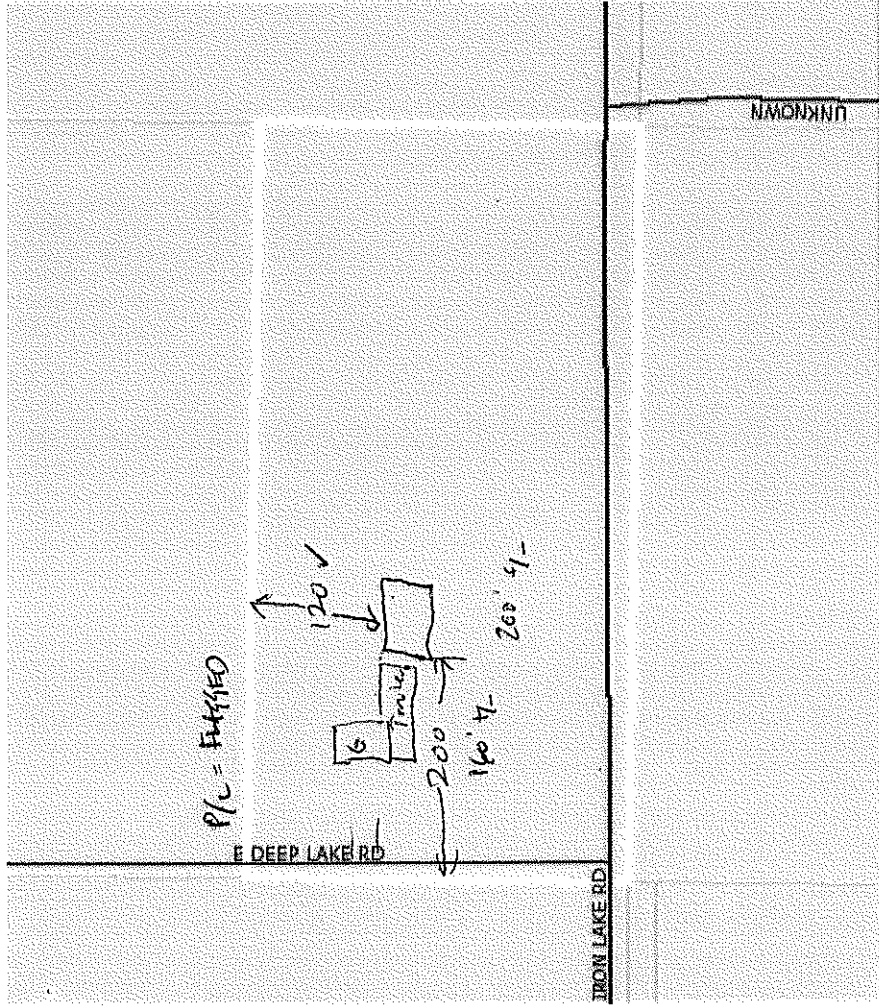
Secretary Staff \_\_\_\_\_

to DC to Clarify \_\_\_\_\_

MAR 25 2010

Secretary Staff

12



76 x 46  
~~60 x 32~~ Footprint  
 8' x 8' outbuilding

Proposed building site was never identified as intended

0 0.01 0.02 mi

Query Results

<b>Parcel Owner</b>	<b>Legal Description</b>
FRANK J POLKOSKI 66790 E DEEP LAKE RD IRON RIVER WI 54847	S 1/2 SW 1/4 OF NW NW
<b>Location</b>	<b>History</b>
Section 24, Town 47 N, Range 09 W	634-28
<b>New PIN</b>	<b>Old PIN</b>
04-022-2-47-09-24-2 02-000-20000	022106106990
<b>Land Value</b>	<b>Improvement Value</b>
17500.000000	63200.000000
	<b>Total Acres</b>
	4.98000