

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department
P.O. Box 58
Wausabum, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY ZONING DEPARTMENT

APR 23 2010

Application No: 10-00037

Date:

Zoning District: F-1 (f)

Amount Paid: \$50 4/23/10

my

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 TEMP. PERMIT

Use Tax Statement for Legal Description

Legal Description SW 1/4 of NE 1/4 of Section 18 Township 47 North, Range 9 West, Town of BOYDLES

Gov't Lot Block of Deeds Subdivision CSM # Acreage 28.5

Volume Page Parcel I.D. 09-022-2-47-05-18-1 03-000-10000

Property Owner BRUCE BAILLIE Contractor (Phone)

Address of Property 67710 WILLS RD Plumber (Phone)

Telephone BRUCE WE 54820 Authorized Agent (Phone)

715-372-5631 (Home) 218 348-5490 (Work)

Is your structure in a Shoreland Zone? Yes No If Yes, Structure: New Addition Existing

Fair Market Value Square Footage 80 x 16

USE: * Residence or Principal Structure (# of bedrooms) City

Residence sq. ft. Type of Septic/Sanitary System Existing

* Residence w/deck-porch (# of bedrooms) Mobile Home (manufactured date) Existing

Residence sq. ft. Porch sq. ft. Commercial Principal Building

Deck sq. ft. Deck(2) sq. ft. Commercial Principal Building Addition (explain)

* Residence w/attached garage (# of bedrooms) Commercial Accessory Building (explain)

Residence sq. ft. Garage sq. ft. Commercial Accessory Building Addition (explain)

Residential Addition / Alteration (explain) Commercial Other (explain)

Residential Accessory Building (explain) Special/Conditional Use (explain)

Residential Accessory Building Addition (explain) External Improvements to Principal Building (explain)

Residential Other (explain) TEMP. PERMIT External Improvements to Accessory Building (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) B. Baillie Date 4-23-10

Address to send permit ATTACH

* See Notice on Back (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number Date

Date 4/26/10 Permit Number 10-00037 Permit Denied (Date)

Reason for Denial:

Inspection Record: PRE-EXISTING STRUCTURE TO BE USED DURING CONSTRUCTION OF NEW DRAINAGE

PERMIT MAY BE ISSUED BY ORDINANCE BY DDC Date of Inspection 4-23-10

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

Condition: TEMPORARY PERMIT EFFECTIVE FOR ONE (1) YEAR FROM DATE OF THIS PERMIT AT WHICH TIME

THE EXISTING DRAINAGE MUST BE REMOVED OR IT MUST BE RENEWED FOR AN EXTENDED TIMEFRAME.

Signed B. Baillie Inspector Date of Approval 4-23-10

Rec'd for Issuance

APR 26 2010

Secretarial Staff

1. Using the frontage road as a guideline, fill in the lot dimensions and indicate North (N).

2. Show the approximate location and size of the building.

3. Show the location of the well, septic tank, and drain field.

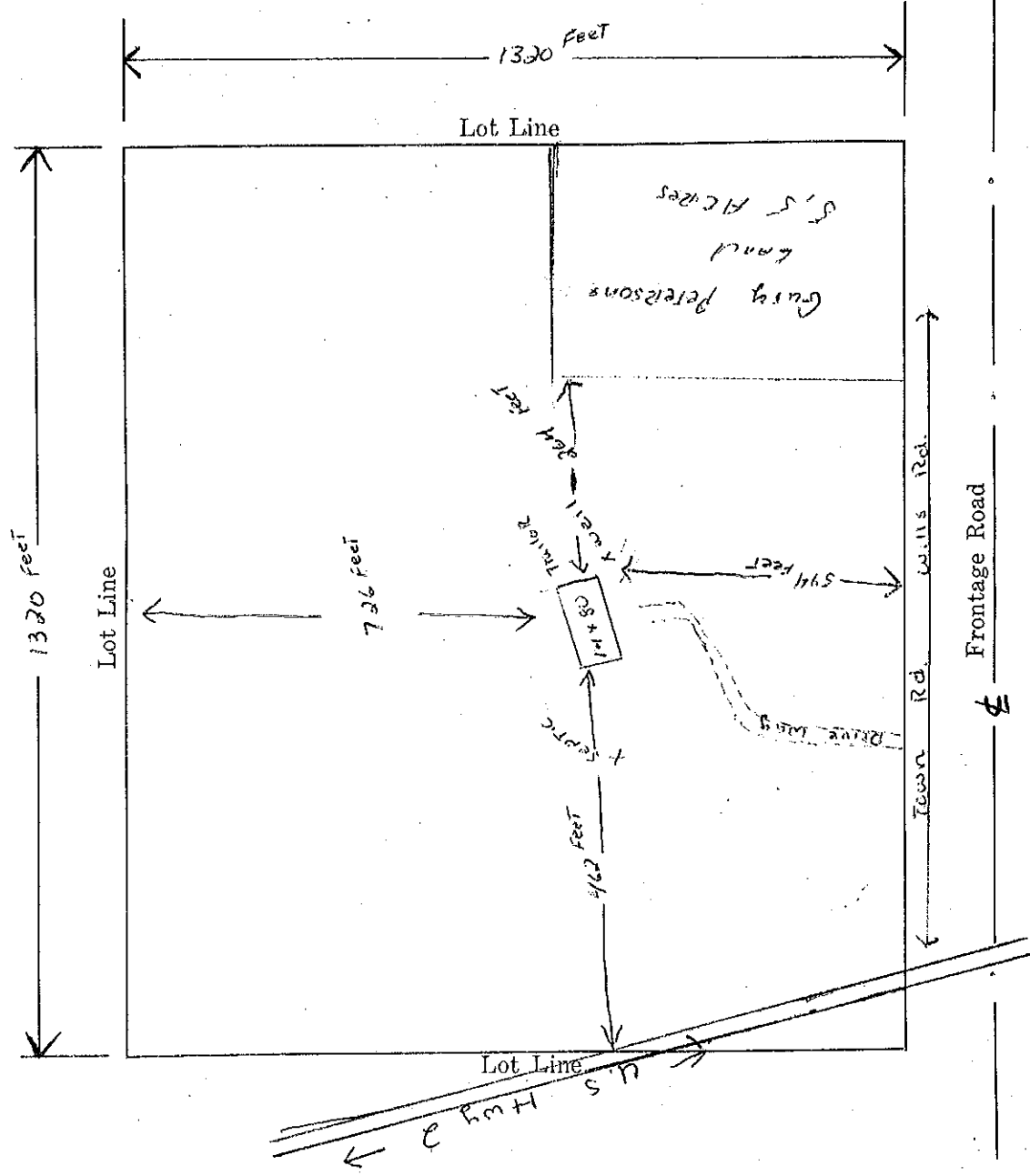
4. Show the location of any lake, river or stream if applicable.

5. Show dimensions in feet on the following:

- a. building to all lot lines
- b. building to centerline of road
- c. building to lake, river, or stream - 75'
- d. septic tank to closest lot line
- e. septic tank to building - 5'
- f. septic tank to well 25'
- g. septic tank to lake, river, or stream
- h. drain field to closest lot line 5'
- i. drain field to building - 25'
- j. drain field to well - 50'
- k. drain field to lake, river, or stream
- l. well to building *min 2'*

COPY

← This distance or all min. distances required.



Indicate whether or not the following locations are staked:

Structure	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Drain Field	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Septic Tank	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Well	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>