

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**  
 MAY 27 2011  
 Bayfield Co. Zoning Dept.

Application No.: 11-0388  
 Date: 9/13/11  
 Zoning District: RS-00005 FA  
 Amount Paid: \$125.00 PDS  
5/13/11

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  PRIVATE  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER \_\_\_\_\_

Use Tax Statement for Legal Description  
 Legal Description SW 1/4 of NW 1/4 of Section 19 Township 47 North, Range 9 West, Town of HUGHES

Gov'l Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 23

Volume 411 Page 393 of Deeds Parcel I.D. 04022-2-47-08-19-2 03000.10000

Property Owner Arnold Nelson Contractor Self (Phone) \_\_\_\_\_

Address of Property 5408 GRAPE RD Plumber \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 715-879-5298 (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 \_\_\_\_\_ Basement: Yes  No  Number of Stories 1

Fair Market Value \$2,000 Square Footage 200 FT<sup>2</sup> Sanitary: New  Existing \_\_\_\_\_ Pity \_\_\_\_\_ City \_\_\_\_\_

USE:  Residence or Principal Structure (# of bedrooms) \_\_\_\_\_ Type of Septic/Sanitary System \_\_\_\_\_

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

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

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

Deck sq. ft. \_\_\_\_\_ Deck(2) sq. ft. \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_

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

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

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 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) Arnold Nelson Date 5-25-2011  
 Address to send permit 1273 95 1010 W 5th Elk Head Wisconsin 54789 ATTACH  
 \* See Notice on Back Copy of Tax Statement or (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_

Date 9/13/11 Permit Number 11-0388 Permit Denied (Date) \_\_\_\_\_

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

Inspection Record: Structure appears satisfactory AS REQUESTED APPEARS TO BE O.K.

Overcast & LD Rain By DOC Date of Inspection 6-21-11

Mitigation Plan Required: Yes  No  96' Variance (B.O.A.) # \_\_\_\_\_

Condition: Structure must be at least 60 feet from the centerline of the road lots

3 conditions Signed [Signature] Date of Approval 6-21-11

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

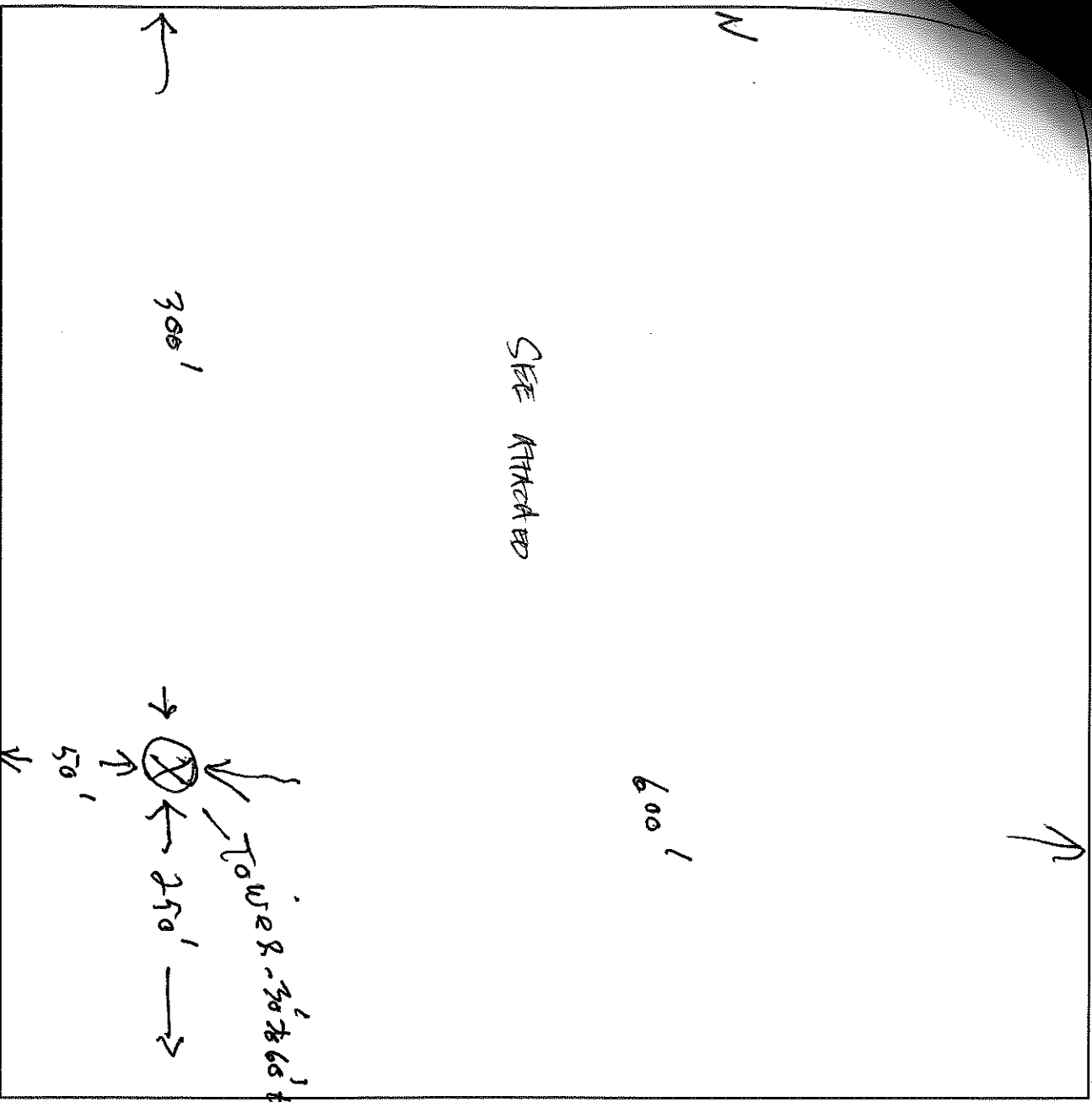
SEP 13 2011

Secretarial Staff

STAMP: STAFF BY BAYFIELD COUNTY ZONING

ENTERED

Lot Line



Name of Frontage Road (SHORE GRAD)

WIND GENERATOR

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:
 

<ol style="list-style-type: none"> <li>a. Building to all lot lines</li> <li>b. Building to centerline of road</li> <li>c. Building to lake, river, stream or pond</li> <li>d. Holding tank to closest lot line</li> <li>e. Holding tank to building</li> <li>f. Holding tank to well</li> <li>g. Holding tank to lake, river, stream or pond</li> <li>h. Privy to closest lot line</li> </ol>	<ol style="list-style-type: none"> <li>i. Privy to building</li> <li>j. Privy to lake, river, stream or pond</li> <li>k. Septic Tank and Drain field to closest lot line</li> <li>l. Septic Tank and Drain field to building</li> <li>m. Septic Tank and Drain field to well</li> <li>n. Septic Tank, and Drain field to lake, river, stream or pond.</li> <li>o. Well to building</li> </ol>
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**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.

