

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

**R E C E I V E D**  
MAY 27 2008  
Bayfield Co. Zoning Dept.

Application No.: 08-0306  
Date: \_\_\_\_\_  
Zoning District: R-1, Class 2  
Amount Paid: \$175 ROS  
5/25/08

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  S.B.O.A.  OTHER   
Legal Description 1/4 of 1/4 of Section 33 Township 47 North, Range 8 West, Town of Iron River  
Gov'l Lot 5 Lot \_\_\_\_\_ Block \_\_\_\_\_ Acreage 1.65  
Volume 786 Page 198 of Deeds Parcel I.D. # 024-1107-04 Use Tax Statement for Legal Description  
Property Owner Douglas E Manthey Contractor \_\_\_\_\_ (Phone) \_\_\_\_\_  
Address of Property 64905 McCarry Lake Rd Plumber North Country Vacation Rentals  
Iron River, WI 54847 Authorized Agent Craig Manthey (Phone) 739-6645

Telephone \_\_\_\_\_ (Home) \_\_\_\_\_ (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  Number of Stories 1  
Estimated Cost of Construction N/A Square Footage 696 Sanitary: New \_\_\_\_\_ Existing  City \_\_\_\_\_  
USE:  \* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_  
 Residence sq. ft. \_\_\_\_\_ (manufactured date) \_\_\_\_\_  
 \* 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 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.

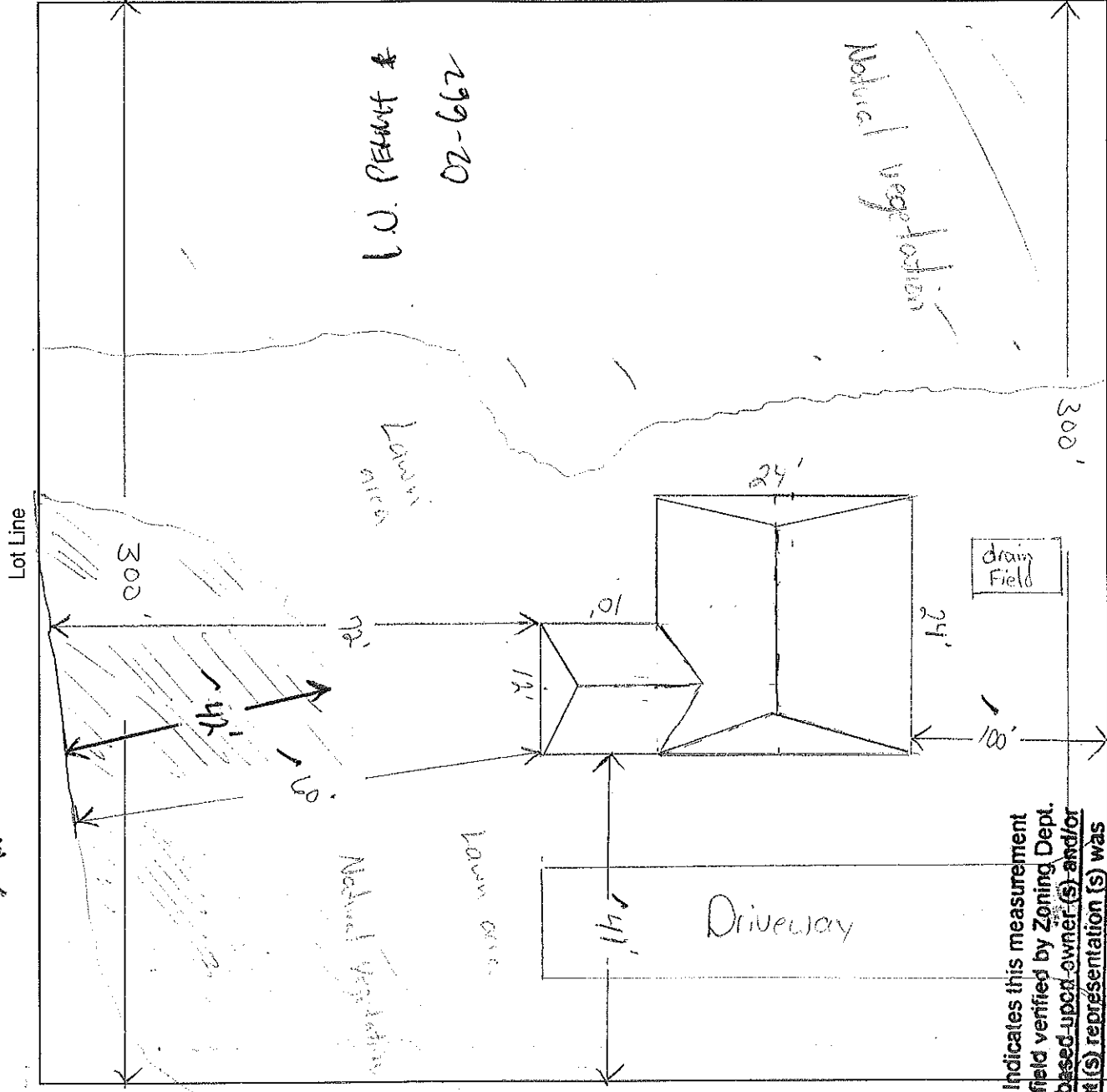
Owner or Authorized Agent (Signature) Craig Manthey Date 5/2/08  
Address to send permit P.O. Box 130 Drummond, WI 54832 ATTACH  Copy of Tax Statement  
\* See Notice on Back If you previously purchased the property Attach a Copy of Recorded Deed

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number 367435 Date 2000  
Date 7-3-08 Permit Number 08-0306 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: \_\_\_\_\_  
Inspection Record: PRE-EXISTING BEYOND-BLANK STRUCTURE, CURRENT & COMPLETE ROUTES w/ NO SIGNS OR PLUQUE NO OBVIOUS SHORELAND MARKERS ADJACENT TO MCCARRY LK. BY DDL Date of Inspection 7-1-08  
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
Condition: (PLANKING ON-GATE INSTALLED - TREATMENT SPECIES DESIGNATED FOR A MAXIMUM OF SIX (6) OCCUPANTS.  
SIGNED [Signature] Inspector [Signature] Date of Approval July 03 2008  
Bayfield County Zoning Department

McCary Lake

1-2000



U. Permit # 02-662

Moduel vegetation

Moduel vegetation  
100' 00"

✓ - Indicates this measurement was field verified by Zoning Dept. and based upon owner(s) and/or agent(s) representation(s) was found to be accurate and code compliant

Name of Frontage Road (McCary Lake Rd.)

1. Name the frontage road and use 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, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:
  - a. Building to all lot lines
  - b. Building to centerline of road
  - c. Building to lake, river, stream or pond
  - d. Septic tank to closest lot line
  - e. Septic tank to building
  - f. Septic tank to well
  - g. Septic 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. Drain field to closest lot line
  - l. Drain field to building
  - m. Drain field to well
  - n. Drain field to lake, river, stream or pond.
  - o. Well to building

**IMPORTANT**  
DETAILED PLOT PLAN  
IS NECESSARY. FOLLOW  
STEPS 1-7 COMPLETELY.

\*NOTICE: The local town, village, city, state or federal agencies may also require permits.

Stake or mark proposed location(s) of new building, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.

**HIT COMPLETED ORIGINAL  
APPLICATION, TAX STATEMENT  
D FEE TO:**

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

**APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN**

Application No.: 08-0308  
Date: \_\_\_\_\_  
Zoning District: R-1/B1  
Amount Paid: \$600 7/13/08 ps

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 \_\_\_\_\_  
Legal Description: SE 1/4 of SE 1/4 of Section 18 Township 47 North, Range 8 West, Town of Iron River  
Gov't Lot --- Lot m Block --- Subdivision --- CSM # 1510 Acreage 2.46  
Volume 994 Page 276 of Deeds Parcel I.D. # 04-024-2-47-05-18-4-05-053 <sup>13000</sup> Use Tax Statement for Legal Description  
Property Owner: James and Frances Jacobson Contractor: Calculus Builders (Phone) 715-372-4670  
Address of Property: 1504 AVE Plumber: Balkus Plumbing  
Ind Area, WI - 54891 Authorized Agent: Jim Jacobson (Phone) 715-315-2363  
Telephone: 715-375-2363 (Home) 715-376-2680 <sup>Ext 6</sup> (Work)  
Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_  
Structure: New  Addition \_\_\_\_\_ Existing \_\_\_\_\_ Sanitary: New  Existing \_\_\_\_\_ Privy \_\_\_\_\_ City \_\_\_\_\_  
Basement: Yes  No  Number of Stories 1  
Estimated Cost of Construction: \$300K Square Footage 1600 <sup>1,328</sup> Mobile Home (manufactured date) \_\_\_\_\_  
384 <sup>384</sup> Commercial Principal Building \_\_\_\_\_  
 \* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_  
Residence sq. ft. \_\_\_\_\_  
 \* Residence w/deck-porch (# of bedrooms) 3 Commercial Principal Building Addition (explain) \_\_\_\_\_  
Residence sq. ft. 1600 Porch sq. ft. 320  Commercial Principal Building Addition (explain) \_\_\_\_\_  
Deck sq. ft. 384 Deck(2) sq. ft. \_\_\_\_\_  Commercial Accessory Building (explain) \_\_\_\_\_  
 \* Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_  
Residence sq. ft. \_\_\_\_\_ Garage sq. ft. \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_  
 Residential Addition / Alteration (explain) \_\_\_\_\_  
 Residential Accessory Building (explain) \_\_\_\_\_  
 \* Residential Accessory Building Addition (explain) Garage 1600 sq. ft.  External Improvements to Principal Building (explain) \_\_\_\_\_  
 Residential Other (explain) \_\_\_\_\_  External Improvements to Accessory Building (explain) \_\_\_\_\_

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

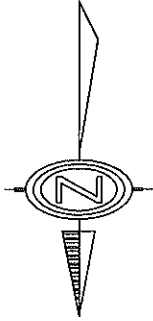
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) 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): James Jacobson 7/13/08 ATTACH \_\_\_\_\_  
Address to send permit: 9417 S. Pison Rd Bennett, WI 54813 Copy of Tax Statement \_\_\_\_\_  
If you previously purchased the property Attach a Copy of Recorded Deed \_\_\_\_\_

\* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit issued: \_\_\_\_\_ State Sanitary Number 08-065 Date 5-26-08  
Date 7/13/08 Permit Number 08-0308 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: REJECTED  
Inspection Record: STRUCTURE SETBACKS/CONDITIONS AS REPRESENTED BY OWNER APPEAR TO BE CODE COMPLIANT - I.O. PERMIT NOT BE ISSUED BY CONDITIONS. By DC Date of Inspection 7-1-08  
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
Condition: A UNIFORM DWELLING CODE (UDC) PERMIT FROM THE LOCALITY OUTLETTED UDC INSPECTION AGENCY MUST BE OBTAINED PRIOR TO THE START OF CONSTRUCTION  
Signed: [Signature] Inspector [Signature] Date of Approval 7-1-08  
Rec'd for Issuance \_\_\_\_\_



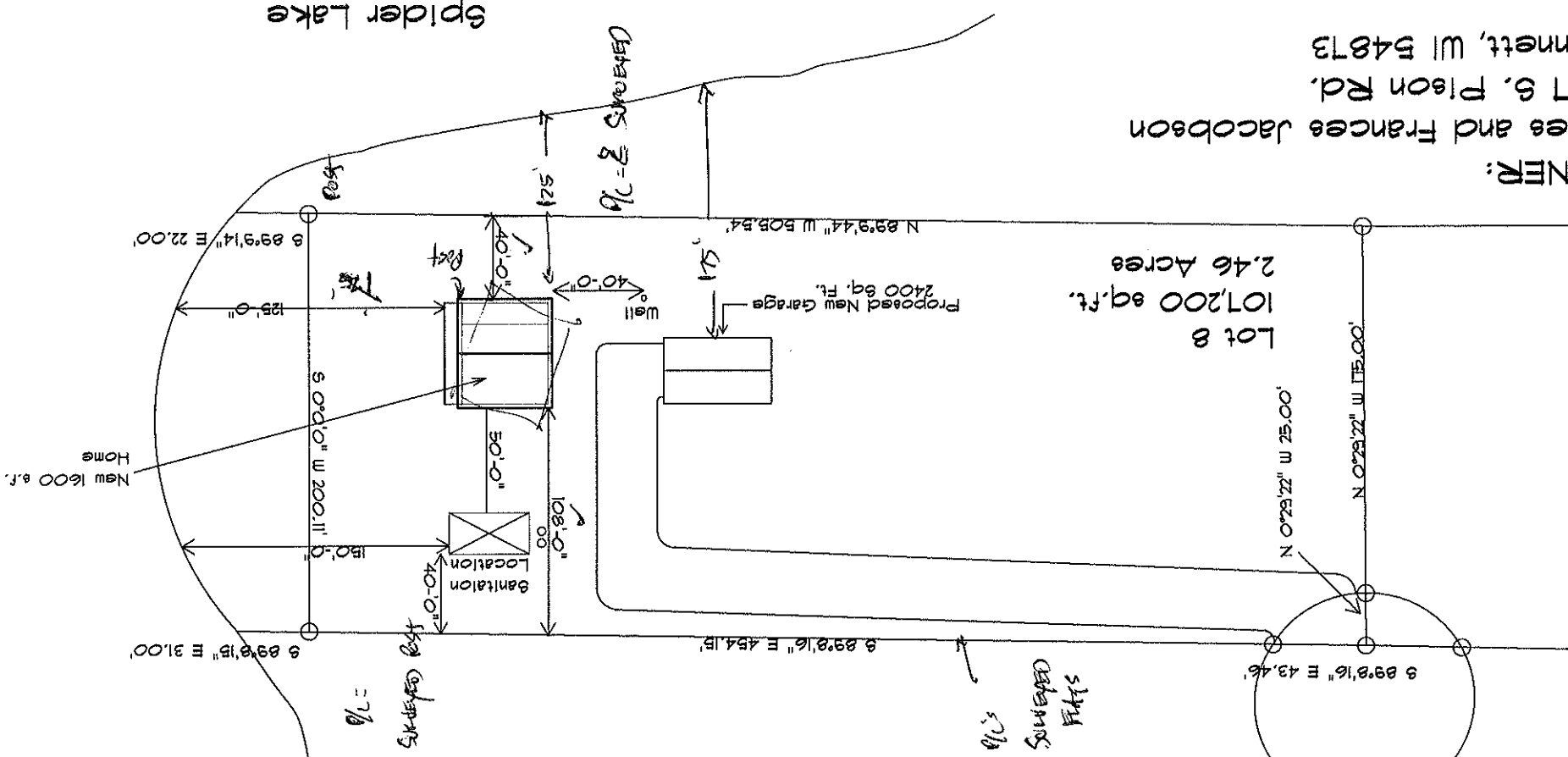
ALL PL'S SURVEYED

Located in Gov. Lot 3 of Sec. 18,  
T.47N., R. 8 W., Twp of Iron River,  
Bayfield County, Wisconsin

CGM 1510

PL'S  
SURVEYED  
PLATS

Approximate Shoreline Location



OWNER:

James and Frances Jacobson  
9417 S. Pleon Rd.  
Bennett, WI 54873

Lot 8  
107,200 sq. ft.  
2.46 Acres

7-1-08 NOTES

Both PROPOSED BUILDING SITES WERE ALSO DETAILED AT INTERSECTION.

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 (715) 373-6138

**APPLICATION FOR PERMIT  
 BAYFIELD COUNTY, WISCONSIN**

Application No.: 08-0309  
 Date: \_\_\_\_\_  
 Zoning District: P-1/B2  
 Amount Paid: \$150 7/3/08 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

Legal Description SE 1/4 of SE 1/4 of Section 18 Township 47 North, Range 13 West, Town of Iron River

Gov't Lot 83 Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CS# 1510 Acreage 2.46

Volume 998 Page 96 of Deeds Parcel I.D. # 04-024-2-47-08-18-4-05-603-13000 Use Tax Statement for Legal Description

Property Owner James & France Jacobson Contractor Self (Phone) 715-375-2863

Address of Property Spider Drive Plumber \_\_\_\_\_

Iron River, WI 54847 Authorized Agent Jim Jacobson (Phone) 715-375-2863

Telephone 715-375-2863 (Home) 715-376-2680 (Work) 826

Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_

Structure: New  Addition \_\_\_\_\_ Existing \_\_\_\_\_

Estimated Cost of Construction 50K Square Footage 2400 Sanitary: New  Existing \_\_\_\_\_ Privy \_\_\_\_\_

- USE:**
- \* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_
  - Residence sq. ft. \_\_\_\_\_
  - \* Residence w/deck-porch (# of bedrooms) \_\_\_\_\_
  - Porch sq. ft. \_\_\_\_\_
  - Deck sq. ft. \_\_\_\_\_
  - Deck(2) sq. ft. \_\_\_\_\_
  - \* Residence w/attached garage (# of bedrooms) \_\_\_\_\_
  - Garage sq. ft. \_\_\_\_\_
  - Residential Addition / Alteration (explain) \_\_\_\_\_
  - Residential Accessory Building (explain) GARAGE
  - Residential Accessory Building Addition (explain) \_\_\_\_\_
  - Residential Other (explain) \_\_\_\_\_

**FAILURE TO OBTAIN A PERMIT AT STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES**

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Owner or Authorized Agent (Signature) James Jacobson Date 6/10/08  
 Address to send permit 9417 S. Pison Rd Bennett, WI 54813 ATACH  
 Copy of Tax Statement

\* See Notice on Back **APPLICANT — PLEASE COMPLETE REVERSE SIDE** If you previously purchased the property Attach a Copy of Recorded Deed

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

Date 7-3-08 Permit Number 08-0309 Permit Denied (Date) \_\_\_\_\_

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

Inspection Record: STRUCTURE SETBACKS/CONDITIONS AS REPRESENTED BY OWNER APPEARS TO BE CODE COMPLIANT & NO PERMIT MAY BE ISSUED. BY DRC Date of Inspection 7-1-08

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

Condition: \_\_\_\_\_

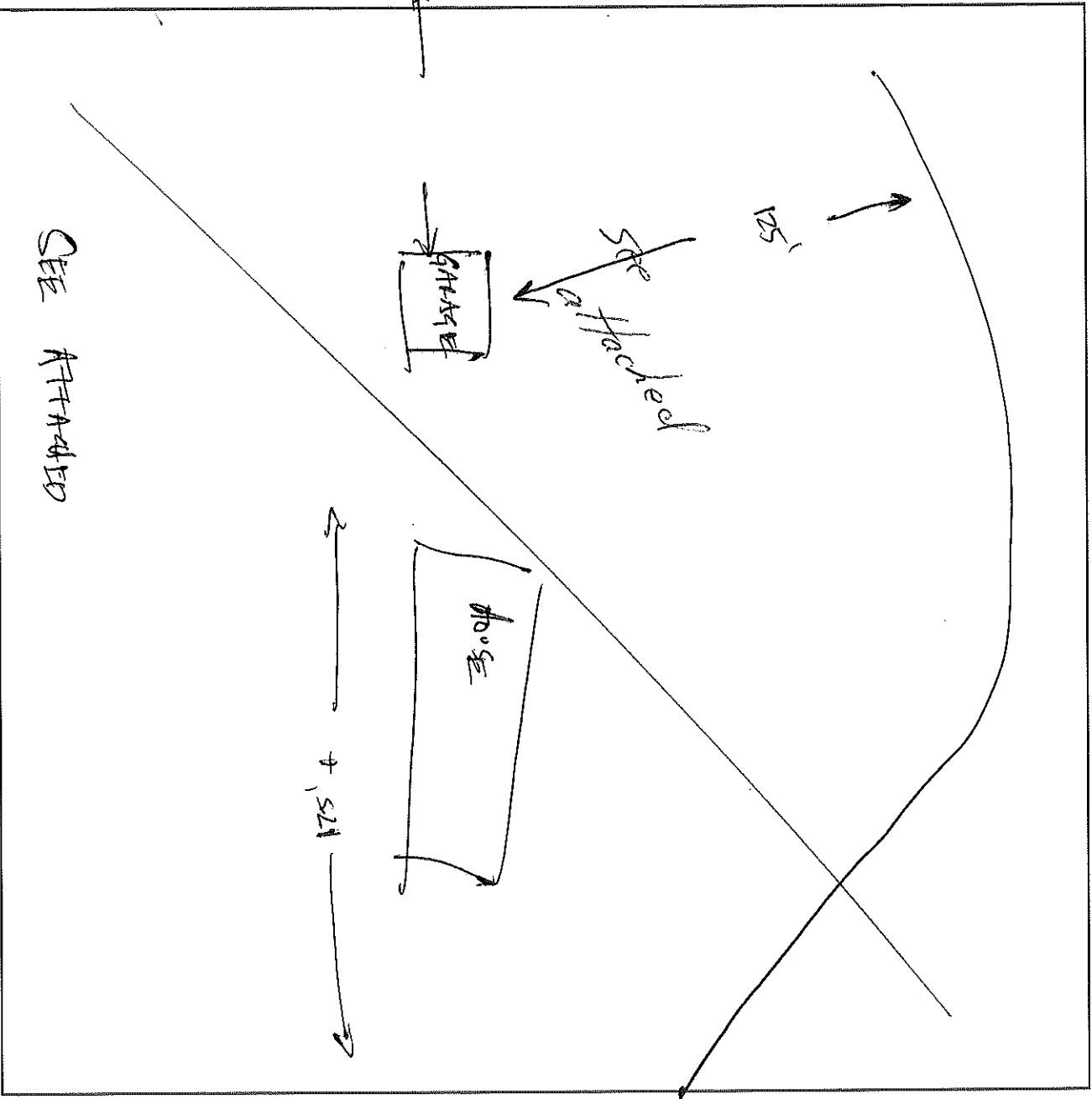
Signed [Signature] Inspector [Signature] Date of Approval 7-1-08

Secretary [Signature] Date JUL 03 2008

Rec'd for Issuance

SEE ATTACHED

Lot Line



Name of Frontage Road ( \_\_\_\_\_ )

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 - (include any deck(s), porch or garage)
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:
  - a. Building to all lot lines
  - b. Building to centerline of road
  - c. Building to lake, river, stream or pond
  - d. Septic tank to closest lot line
  - e. Septic tank to building
  - f. Septic tank to well
  - g. Septic 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. Drain field to closest lot line
  - l. Drain field to building
  - m. Drain field to well
  - n. Drain field to lake, river, stream or pond.
  - o. Well to building

**IMPORTANT**  
 DETAILED PLOT PLAN  
 IS NECESSARY, FOLLOW  
 STEPS 1-7 (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, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.