

ENTERED

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

SUBMIT COMPLETED ORIGINAL
APPLICATION, TAX STATEMENT
AND FEE TO:
Bayfield County Zoning Department
P.O. Box 58
Washburn, WI 54891
(715) 373-6138

RECEIVED
OCT 23 2008
Bayfield Co. Zoning Dept

Application No.: 08-0617
Date: _____
Zoning District: A-1/-
Amount Paid: \$125.00
11/17/08
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 _____

Use, Tax Statement for Legal Description

Legal Description NW 1/4 of NW 1/4 of Section 7 Township 47 North, Range 8 West, Town of I.R.

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 32.34

Volume 16 Page 289 of Deeds Parcel I.D. 024-1010-10

Property Owner Bayfield Co. Fairgrounds Contractor the OHIES (Phone) _____

Address of Property N. Main St. Plumber _____ (Phone) _____

Telephone 372-4011 (Home) _____ (Work) _____ Authorized Agent _____ (Phone) _____

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 \$2,000.00 Square Footage 288
USE: _____
Basement: Yes _____ No Number of Stories _____
Sanitary: New _____ Existing Privy _____ City _____
Type of Septic/Sanitary System Septic Tank
 Mobile Home (manufactured date) _____

* 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) _____

Commercial Principal Building Addition (explain) Bathrooms

Commercial Accessory Building (explain) _____

Commercial Accessory Building Addition (explain) _____

Commercial Other (explain) _____

Special/Conditional Use (explain) _____

External Improvements to Principal Building (explain) _____

External Improvements to Accessory Building (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) James Seeborn Date Oct 23-08

Address to send permit _____ ATTACH _____
Copy of Tax Statement or _____
(If you recently purchased the property Attach a Copy of Recorded Deed)

* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: 11-7-08 State Sanitary Number 08-0865 Date _____

Date: 08-0617 Permit Number 08-0617 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: STRUCTURAL SETBACKS/CONDITIONS AS REPRESENTED BY OWNER - APPEALS TO BE COE
COMPLAINT & PERMIT MAY BE
ISSUED. W

Mitigation Plan Required: Yes No By DGC Date of Inspection 10-28-08

Variance (B.O.A.) # _____

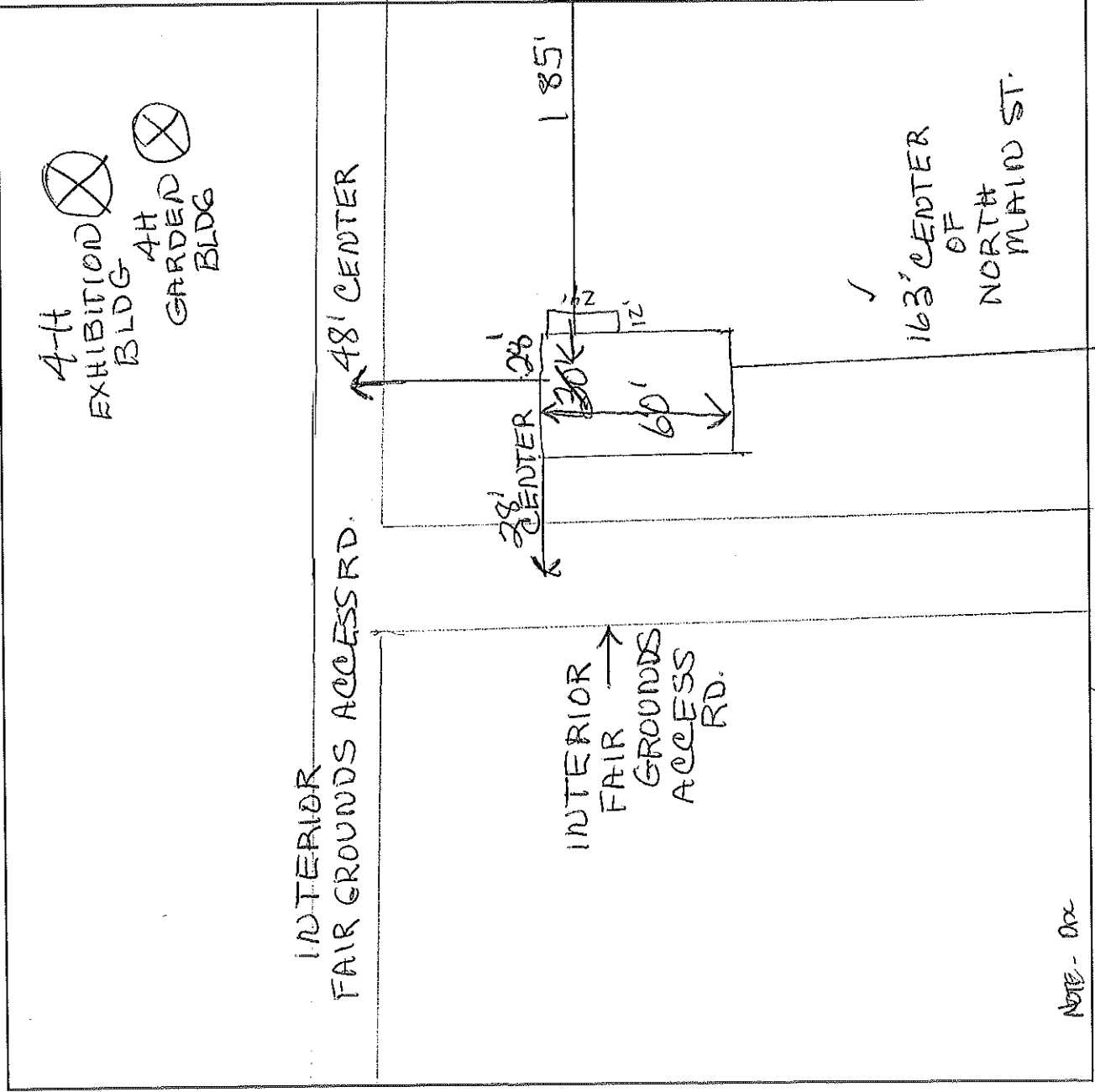
Condition: _____

Signed [Signature] Inspector _____ Date of Approval 10-28-08

THE STATEMENT Rec'd for Issuance _____



Lot Line N ↑



Name of Frontage Road (N. MAIN ST.)

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location, size and dimensions of the structure - (include any deck(s), porch or garage)
3. Show the location of the well, septic tank and drainfield. **COUNTY WILL INSTALL IN 2008**
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.

