

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
JUN 09 2009
Bayfield Co. Zoning Dept

Application No.: 09-0206
Date: _____
Zoning District: P-1
Amount Paid: \$75 6/2/09

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 NW 1/4 of NW 1/4 of Section 8 Township 47 North, Range 8 West, Town of Iron River

Gov't Lot Lot 4 284A Block _____ Subdivision WYAKUW CSM # _____ Acreage 8.190

Volume _____ Page _____ of Deeds Parcel I.D. # 040242470808200930 Use Tax Statement for Legal Description

Property Owner JAMES DIANE KUNKEL Contractor SELF (Phone) 372-4083

Address of Property 6880 Co Hwy A Plumber Ø (Phone) _____

IRON RIVER WI 54847 Authorized Agent Ø (Phone) _____

Telephone 372-4083 (Home) Ø (Work) _____

is your structure in a Shoreland Zone? Yes No If yes, _____

Structure: New _____ Addition Existing _____

Estimated Cost of Construction \$ 748,45 Square Footage 192 Sanitary: New _____ Existing City _____

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

Residence sq. ft. _____

* Residence w/deck-porch (# of bedrooms) _____

Residence sq. ft. _____

Deck sq. ft. _____

* Residence w/attached garage (# of bedrooms) _____

Residence sq. ft. _____

Residential Addition / Alteration (explain) FRONT DECK

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) Diane Appunckel Date 6/9/09

Address to send permit PO BOX 171 IRON RIVER, WI 54847 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 _____

Date _____

Date 6/12/09

Permit Number 09-0206

Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: STRUCTURE SEEBACK/CONDITIONS AS REPRESENTED BY OWNER APPEARS TO BE CODE COMPLIANT & L.U. PERMIT MAY BE ISSUED

BY DAC Date of Inspection 6-9-09

Mitigation Plan Required: Yes No

Variance (B.O.A.) # _____

Condition: _____

Signed _____

Inspector

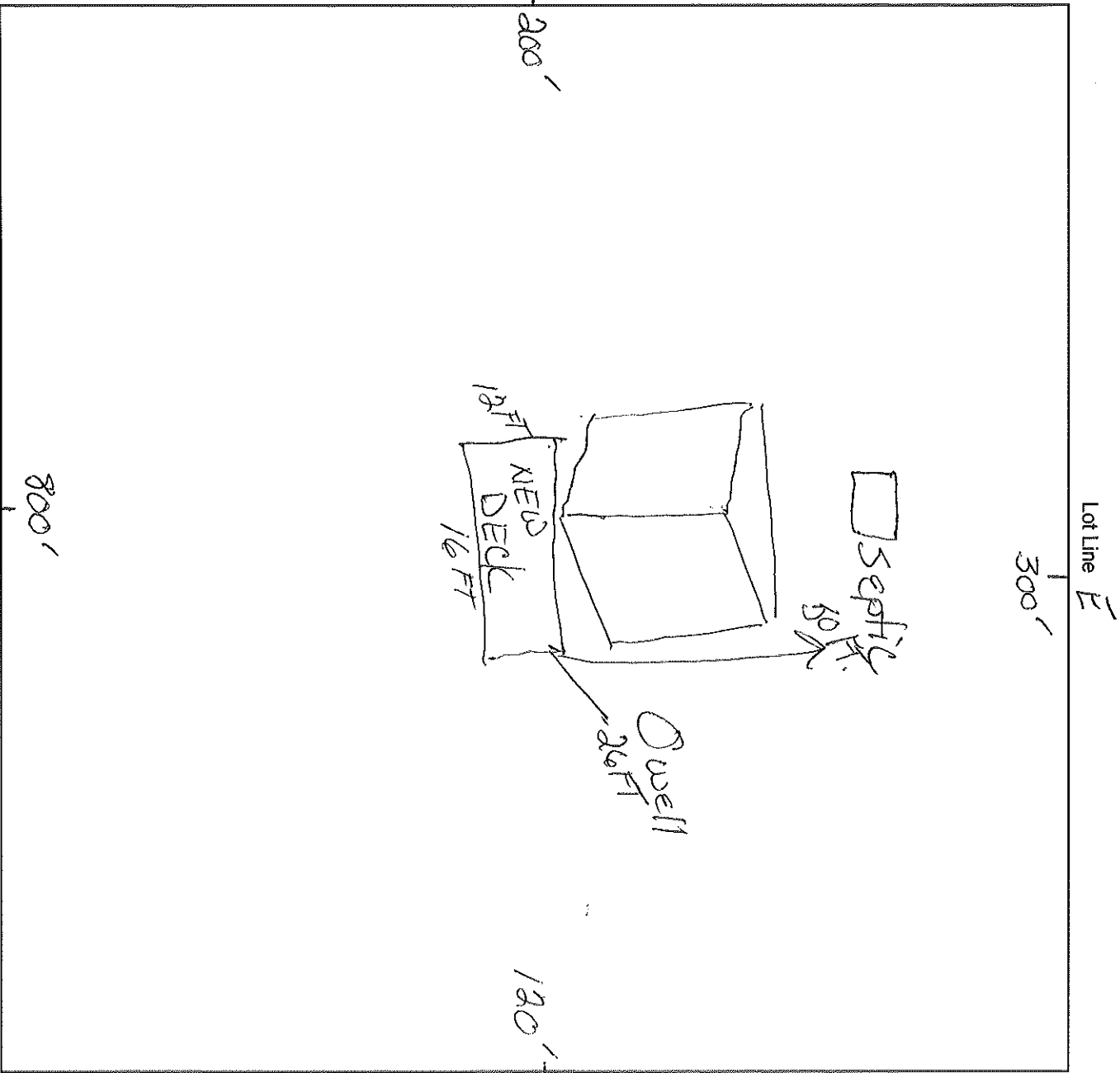
6-9-09

Rec'd for Issuance Approval

See Permit for Garage 00-0206

JUN 12 2009

Seniorial Staff



Name of Frontage Road (20 Highway A North)

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.