

APPLICATION FOR SIGN

Bayfield County Zoning Department
P.O. Box 58
117 East Sixth Street
Washburn, WI 54891
Phone - (715) 373-6138

RECEIVED
JUN 23 2009
Bayfield Co. Zoning Dept.

Office Use:
Application No. 09-0255
Date _____
Fee Paid \$100.00 205
6/22/09

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

Applicant PAS TYME, LTD **Contractor** _____
Address Superior, WI 54880 **Authorized Agent** _____
Telephone 715-398-7663 **Agent's Telephone** _____
Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request: **Zoning District:** _____
1/4 of SE 1/4 of Section 07 Township 47 N. Range 08 W. Town of Iron River
Gov't Lot _____ **Lot** 6-13 **Block** 1 **Subdivision** Pettingill 2nd Add, lots 6 thru 13 **CSM #** _____
Volume 989 **Page** 675 **of Deeds** **Parcel I.D. #** 02414807000 **ACREAGE** .448

Additional Legal Description: 62255 CITY HWY 14, IRON RIVER, WI 54817 ATTACH Copy of
WOODS AND WATERS OUTLINES **Tax Statement**

Sign: On-premise Off-premise **Sign:** New Replacement

Size of Sign: 5 Feet by 10 Feet **Height of Sign:** 6'6" Feet from grade to top of Sign

If this sign is off-premise, owner of property must complete the following:

I, Woods and Water Outlines, Inc **owner of the above described property, do hereby give**
my authorization for PAS TYME, LTD **to erect and maintain a sign on my property.**

Signed [Signature] **Date** 6/16/09
Property Owner

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
APPLICANT - PLEASE COMPLETE REVERSE SIDE

For Office Use Only

Permit issued: _____
Date 7-1-09 **Permit Number** 09-0255 **Permit Denied (Date)** _____
Reason for Denial: _____
Inspection Record: Sign configuration & location as represented meets code requirements
Permit may be issued **By** DOC **Date of Inspection** 6-24-09
Variance (B.O.A.) # _____
Condition _____

[Signature] **Signed** [Signature] **Inspector** 6-24-09
Rec'd for Issuance Date of Approval

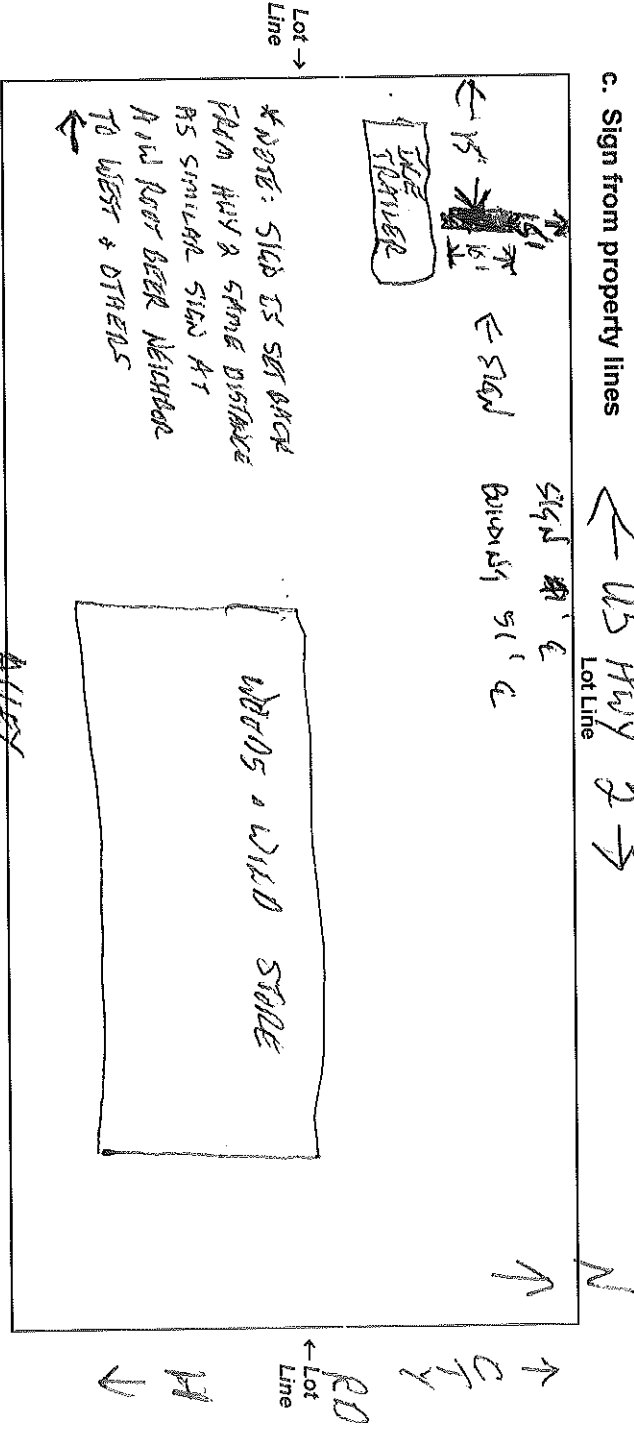
ON PREMISES SIGN

JUN 30 2009

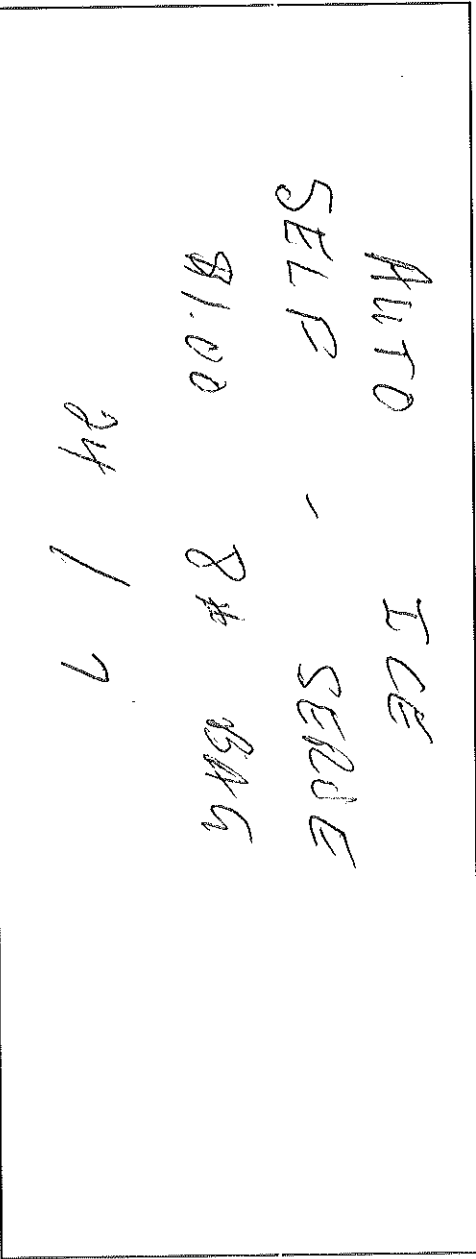
Secretarial Staff

1. Name and use frontage road as a guideline, and indicate North (N) on plot plan
2. Show the sign location
3. Show dimensions in feet on the following:

- a. Sign from centerline of road(s).
- b. Sign from right-of-way line
- c. Sign from property lines
- d. Sign from lake, river, stream or pond
- e. Sign from other signs



Name Frontage Road (US HWY 2)
 NOTICE: The local town, village, city, state or federal agencies may also require permits.
 Sign Plan
 (Fill in Information Desired on Sign)



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.

I, the undersigned, attest that the information contained herein is accurate and true.

Applicant's/ Agent's Signature William S. Williams Date 6/16/07

Address to Mail Permit to _____