

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

SEP 11 2009

Application No: 09-0426
 Date: _____
 Zoning District R-1/CASS
 Amount Paid: \$975.-
9/11/09/mj

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 1/4 of 1/4 of Section 33 Township 47 North, Range 8 West, Town of Iron River
 Gov't Lot 4+S Lot 4 Block _____ Subdivision Ledins CSM # 1563 Acreage .81
 Volume 9 Page 208 of Deeds Parcel I.D. 04-024-a-47-08-100-201-394000

Property Owner C.T.D LLC Contractor Lipka Construction (Phone) 715-685-0858
 Address of Property 9838 Tee Pee Trail Plumber Blakeman Plumbing & Heating
Iron River, WI 54847 Authorized Agent _____ (Phone) _____

Telephone 715-209-0706 (Home) _____ (Work) _____

Is your structure in a Shoreland Zone? Yes No If yes, _____ Written Authorization Attached: Yes No

Structure: New Addition _____ Existing _____
 Fair Market Value 325,000 Square Footage 3758

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

Residence sq. ft. _____
 * Residence w/deck-porch (# of bedrooms) 2

Residence sq. ft. 3758 w/ basement porch sq. ft. _____
 Deck sq. ft. 48 Deck(2) sq. ft. 424

* 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) _____ Date _____

Address to send permit 3100 Ellis Avenue, Ashland, WI 54806 ATTACH _____

* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE Copy of Tax Statement of _____ (If you recently purchased the property Attach a Copy of Recorded Deed)

Permit Issued: State Sanitary Number 09-0965 Date 8-19-09

Date 9/17/09 Permit Number 09-0426 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Structural Services/Conditions as presented by owner appears to meet code requirements & i.d. permit may be used by contractors.

Date of Inspection 9-15-09

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

Condition: A uniform through code (UDC) permit from the local UDC inspection agency

must be obtained prior to the start of construction

Signed [Signature] Inspector _____ Date of Approval 9-15-09

NOTE: Structural Services/Conditions as presented by owner appears to meet code requirements & i.d. permit may be used by contractors

to i.d. the services & permit for this project

Rec'd for Issuance

Health Relations Panel County From local construction

SEP 17, 2009

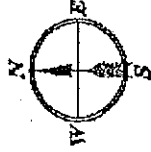
Secretarial Staff

8179-225

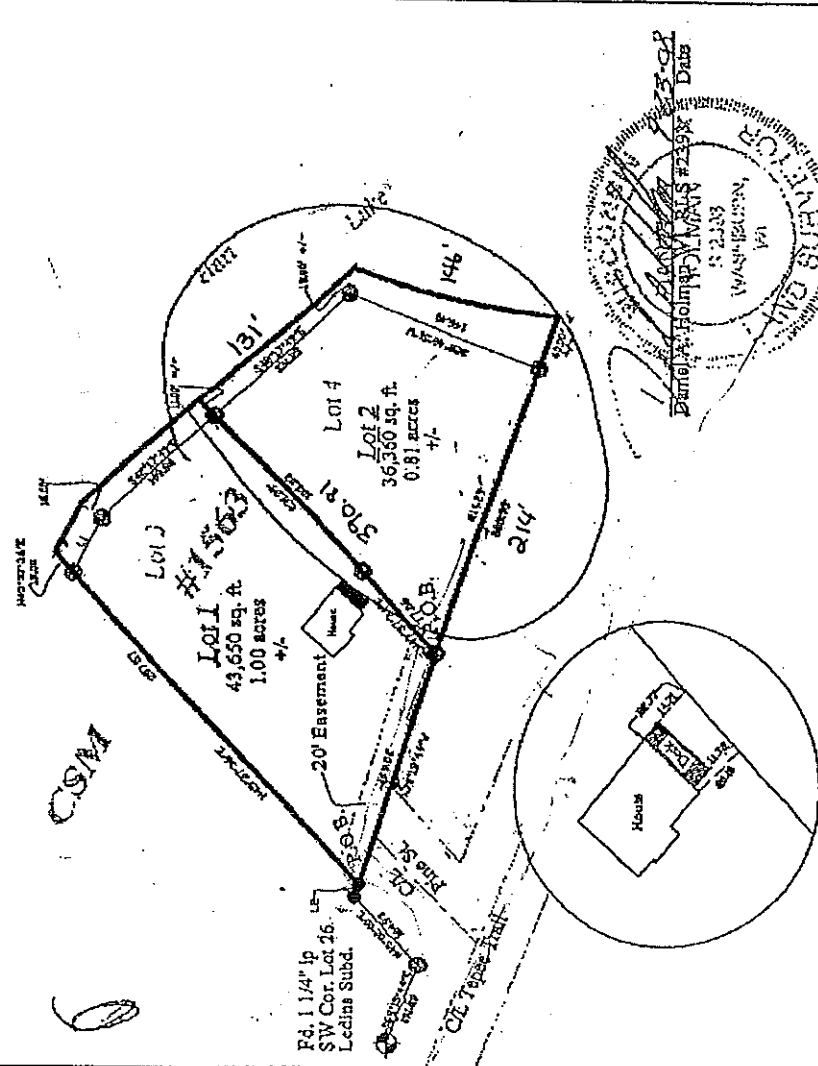
BAYFIELD COUNTY MAP OF SURVEY

A PARCEL OF LAND LOCATED IN LOTS 3 AND 4
OF CSM #1563, SECTION 33, TOWNSHIP 47 NORTH,
RANGE 8 WEST, TOWN OF IRON RIVER, BAYFIELD
COUNTY, WISCONSIN.

Register of deeds recording area only



LINE TABLE		
LINE	LENGTH	BEARING
L1	4324	S 89° 15' 30" E
L2	1260	S 70° 19' 42" E



Detail not to scale



HOLMAN
LAND SURVEYING

David A. Holman WI. RLS #2393
PO Box 726
Washburn, WI. 54891
(715)-373-0848 Fax 0848

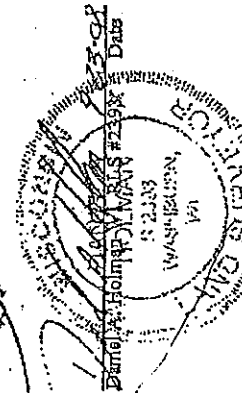
Project

Project name: 47-8-33
Client name: Craig Vernon
Fieldbook: 47-8
Date: 9/22/08
Sheet 1 of 2 Sheets
Drafted by: Micheal T. Coleman

Legend

Found monument as noted
Pd. 1 1/4" iron pipe

All Monument are outside dimension



Bearing refers to the West line of Lot 3
CSM #1563 Section 33, T. 47 N., R. 8 W.
Bearing N45°17'36" E