

ATF

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 05 2009

Application No. 09-0488 **ENTERED**  
Date: \_\_\_\_\_  
Zoning District R-1, Class 3  
Amount Paid: \$495  
**ATF** \$75 ATF  
10/6/09 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 \_\_\_\_\_

Use Tax Statement for Legal Description

Legal Description NE 1/4 of NE 1/4 of Section 07 Township 47 North, Range 08 West, Town of IRON RIVER

Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 12.0

Volume 899 Page 407 of Deeds Parcel I.D. 04-024-2-47-08-07-1 01-000-30000

Property Owner DARYL L. + MARLYN K. JOHNSON Contractor SELF (Phone) \_\_\_\_\_

Address of Property 6885 CTH A Plumber \_\_\_\_\_

IRON RIVER, WI 54847 Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 372-8341 (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ Written Authorization Attached: Yes  No

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 \_\_\_\_\_ Basement: Yes \_\_\_\_\_ No  Number of Stories \_\_\_\_\_

Fair Market Value \$ 500 Square Footage 7207 Sanitary: New \_\_\_\_\_ Existing  Privy \_\_\_\_\_ City \_\_\_\_\_

USE: 12' x 60' Type of Septic/Sanitary System CONV

\* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_  Mobile Home (manufactured date) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_  Commercial Principal Building \_\_\_\_\_

\* Residence w/deck-porch (# of bedrooms) \_\_\_\_\_  Commercial Principal Building Addition (explain) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_ Porch sq. ft. \_\_\_\_\_  Commercial Accessory Building (explain) \_\_\_\_\_

Deck sq. ft. \_\_\_\_\_ Deck(2) sq. ft. \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_

\* Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_ Garage sq. ft. \_\_\_\_\_  Residential Addition / Alteration (explain) \_\_\_\_\_

Residential Accessory Building (explain) \_\_\_\_\_  Special/Conditional Use (explain) \_\_\_\_\_

Residential Accessory Building Addition (explain) LEAN-TO  External Improvements to Principal Building (explain) \_\_\_\_\_

Residential Other (explain) \_\_\_\_\_  External Improvements to Accessory Building (explain) \_\_\_\_\_

Owner or Authorized Agent (Signature) Daryl L. Johnson Date OCT 1, 2009

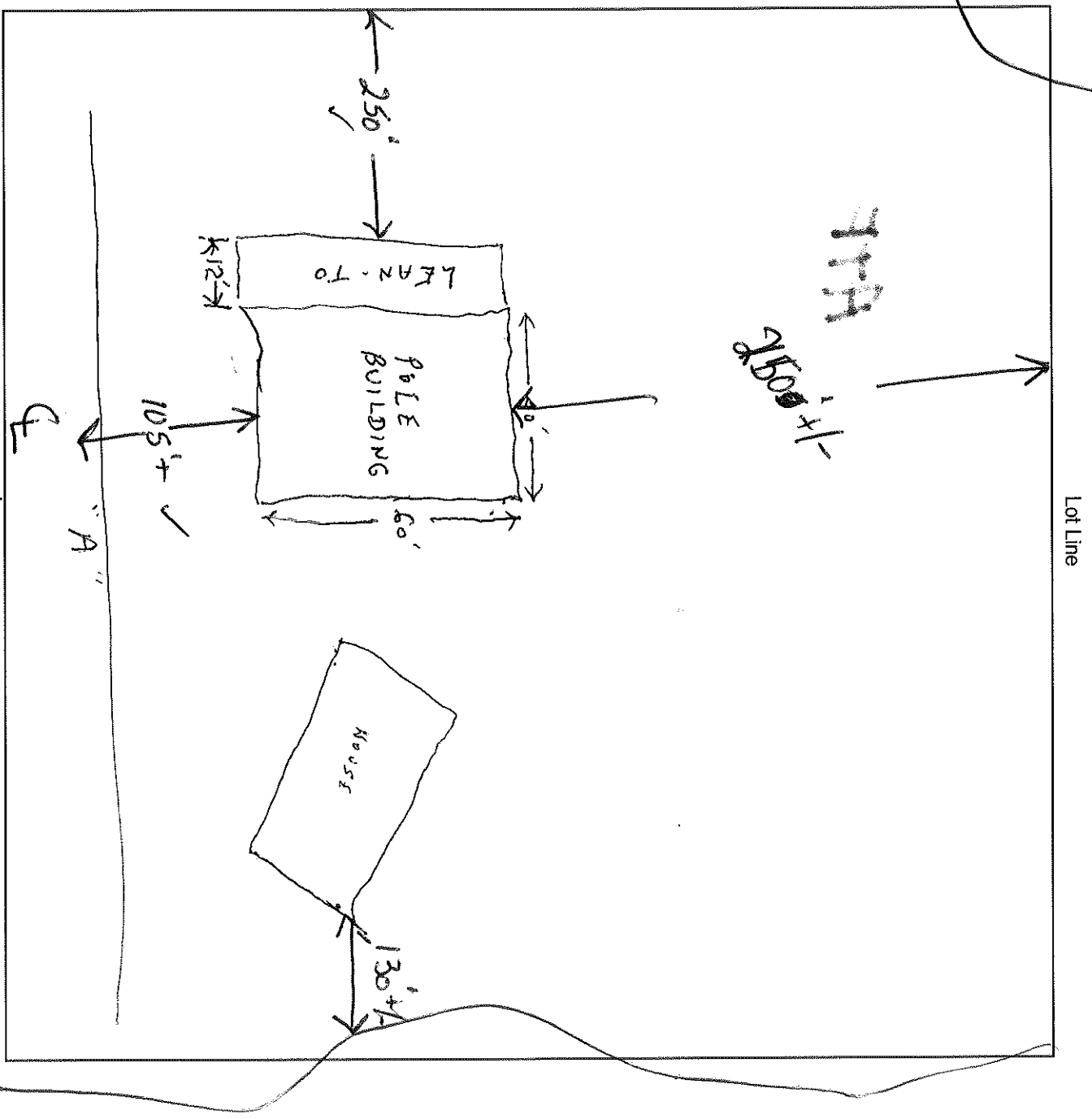
Address to send permit \_\_\_\_\_ ATACH  
Copy of Tax Statement or  (If you recently purchased the property Attach a Copy of Recorded Deed)

\* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_  
Date 10/15/09 Permit Number 09-0488 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: \_\_\_\_\_  
Inspection Record: SWITCH SEWER/CONDITIONS AS-BUILT APPEARS TO MEET CODE REQS. 2 REQS. MAY BE ISSUED By IDC Date of Inspection 10-13-09  
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
Condition: \_\_\_\_\_  
Signed [Signature] Inspector \_\_\_\_\_ Date of Approval 10-13-09  
Rec'd for Issuance

PREVIOUS PERMIT: 2  
OK 0910

OCT 15 2009  
Secretarial Office



Name of Frontage Road ( CTN A )

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.
 

**IMPORTANT**  
DETAILED PLOT PLAN  
IS NECESSARY, FOLLOW  
STEPS 1-8 (a-o) COMPLETELY.
3. Show the location, size and dimensions of attached deck(s), porch(s) or garage.
4. Show the location of the well, holding tank, septic tank and drain field.
5. Show the location of any lake, river, stream or pond if applicable.
6. Show the location of other existing structures.
7. Show the location of any wetlands or slopes over 20 percent.
8. Show dimensions in feet on the following:
 

<ol style="list-style-type: none"> <li>a. Building to all lot lines</li> <li>b. Building to centerline of road</li> <li>c. Building to lake, river, stream or pond</li> <li>d. Holding tank to closest lot line</li> <li>e. Holding tank to building</li> <li>f. Holding tank to well</li> <li>g. Holding tank to lake, river, stream or pond</li> <li>h. Privy to closest lot line</li> </ol>	<ol style="list-style-type: none"> <li>i. Privy to building</li> <li>j. Privy to lake, river, stream or pond</li> <li>k. Septic Tank and Drain field to closest lot line</li> <li>l. Septic Tank and Drain field to building</li> <li>m. Septic Tank and Drain field to well</li> <li>n. Septic Tank, and Drain field to lake, river, stream or pond.</li> <li>o. Well to building</li> </ol>
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\*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, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.