

ENTERED

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
OCT 20 2009
Bayfield Co. Zoning Dept.

Application No. 09-0535
Date: _____
Zoning District Commercial
Amount Paid: \$ 450.00 605
10/23/09

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 N 1/4 of SE 1/4 of Section 7 Township 47 North, Range 8 West, Town of Iron River
Gov't Lot 3 Lot 3 Block _____ Subdivision _____ CSM # 115 Acreage .96
Volume _____ Page _____ of Deeds _____ Parcel I.D. # 024-1014-06 960 Use Tax Statement for Legal Description
Property Owner Mike Santikko Contractor Self/HW Const (phone) 322-4244
Address of Property _____ Plumber Nor Rues Plumber (Phone) _____
Bahn St Iron River Authorized Agent _____

Telephone 322-4244 (Home) _____ (Work) _____
Is your structure in a Shoreland Zone? Yes No If yes, _____
Structure: New Addition Existing _____
Estimated Cost of Construction 180,000.00 Square Footage 3700
USE: * Residence or Principal Structure (# of bedrooms) _____
 * 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) _____

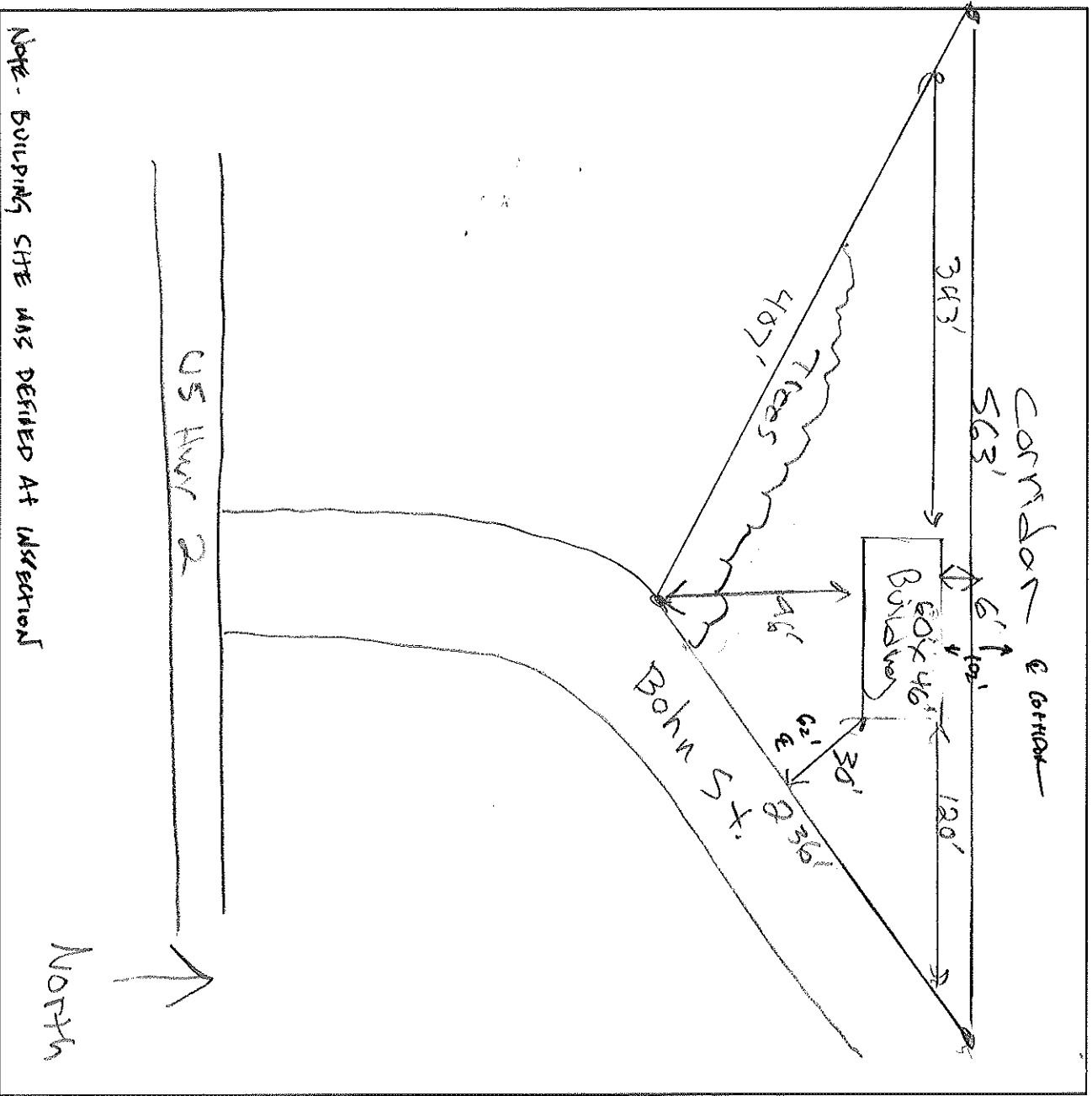
Mobile Home (manufactured date) _____
 Commercial Principal Building Restaurant, store
 Commercial Principal Building Addition (explain) _____
 Commercial Accessory Building (explain) _____
 Commercial Accessory Building Addition (explain) _____
 Commercial Other (explain) _____
 Special/Conditional Use (explain) _____
 External Improvements to Principal Building (explain) _____
 External Improvements to Accessory Building (explain) _____
Written Authorization Attached: Yes No
Distance from Shoreline: greater than 75' 75' to 40' less than 40'
Basement: Yes _____ No Number of Stories 1 1/2
Sanitary: New _____ Existing _____ Privy City

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) Mike Santikko Date Oct 20 09
Address to send permit 68725 Fisk Lake Rd Iron River WI 54847 Copy of Tax Statement ATTACH
* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE if you previously purchased the property Attach a Copy of Recorded Deed

Permit Issued: _____ State Sanitary Number _____ Date _____
Date 11/5/09 Permit Number 09-0535 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: STRUCTURAL SETBACKS/CONDITIONS AS REPRESENTED BY OWNER APPEARS TO BE CODE COMPLIANT & I.U. PERMIT MAY BE ISSUED DDC Date of Inspection 10-20-09
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: _____
Signed [Signature] Inspector [Signature] Date of Approval 10-20-09
Rec'd for issuance
NOV 5 2009
Proof of ownership / Declaration of Officers
Sanitary District Ltd.

Lot Line



Note - BUILDING SITE WAS DESIGNED AT INTERSECTION

ONERARY DISTRICT

Name of Frontage Road (Bohn St.)

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.