

ENTERED

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

Application No. 10-0022
Date: _____
Zoning District F-1 / 2
Amount Paid: \$75.00 PDS
12/24/07



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 1/4 of 1/4 of Section 02 Township 47 North, Range 08 West. Town of IRON RIVER
Gov't Lot 7 Lot _____ Block _____ Subdivision _____ CSM # 4.32
Volume 907 Page 884 of Deeds Parcel I.D. # 04-24-2-47-08-02-3 Use Tax Statement for Legal Description 05-087-10000
Property Owner CHRISTOPHER J. FORSLUND Contractor N/A (Phone) _____
Address of Property 1100 SOUTH LONG LAKE ROAD Plumber N/A
IRON RIVER, WI 54847 Authorized Agent N/A (Phone) _____

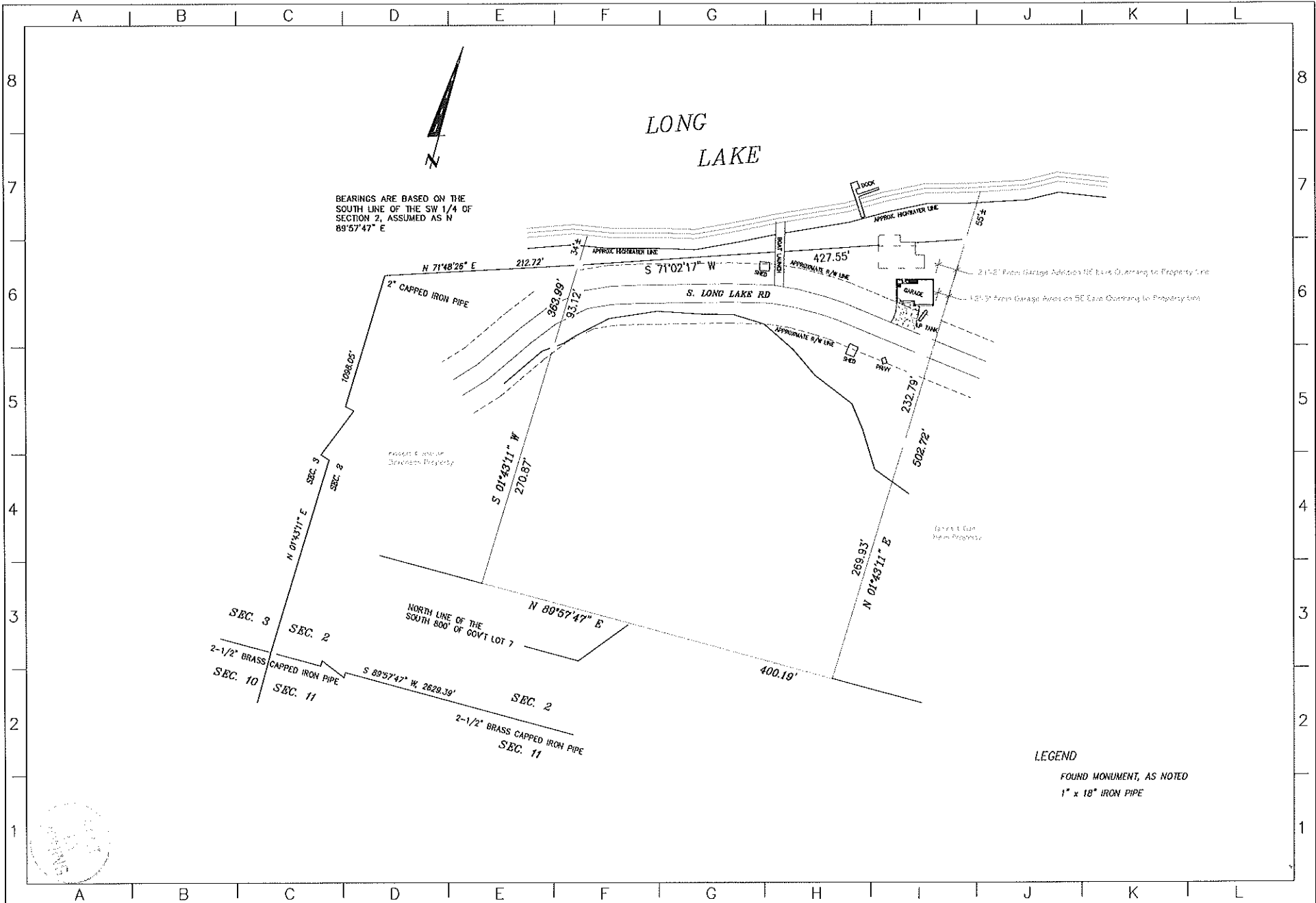
Telephone 715-453-3312 (Home) 715-634-5487 (Work) _____
Is your structure in a Shoreland Zone? Yes No If yes, _____
Structure: New Addition _____ Existing _____
Basement: Yes _____ No Number of Stories 2
Estimated Cost of Construction \$18,000 Square Footage 960 Sanitary: New Existing _____ Privy _____ City _____
USE: * Residence or Principal Structure (# of bedrooms) _____
Residence sq. ft. _____
 * 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) GARAGE
 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) [Signature] Date 11/06/07
Address to send permit 317 PINE RIDGE LANE, DMATAWIK, WI 5487 Copy of Tax Statement ATTACH
* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE
Permit Issued: Hold for new san. State Sanitary Number 5446 / 09-174 S Date 11/16/09
Date 2/10/10 Permit Number 10-0022 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: EXISTING GARAGE BUILT VIA A VARIANCE (#39) OWNER MAY ADD 50% OF VARIANCE
5% FLOOR & SLOPES > 75' FROM LAKE By DPL Date of Inspection 1-16-08

Mitigation Plan Required: Yes No Variance (B.O.A.) # 08-04B
Condition: Per attached BOA decision requirements
Signed [Signature] Inspector _____ Date of Approval 1-16-08
Rec'd for Issuance



BEARINGS ARE BASED ON THE SOUTH LINE OF THE SW 1/4 OF SECTION 2, ASSUMED AS N 89°57'47" E

LEGEND
FOUND MONUMENT, AS NOTED
1" x 18" IRON PIPE



NO.	REVISION	DR.	DATE	APP.	ZONE
A	For Evaluation	MK	07/07		

Owners: Pohos
Location: Fire #:
Telephone #:

SCALE:	1/64" = 1'
DRAWN:	UK
CHECKED:	
APPROVED:	
DATE:	07/07

FILE	Forlund Garage Property Arrangement Enclosure (1a)	
CAD FILE NO.	Rev-A	SHT. 1 OF 1
DATE:		REV
DWG NO.	Forlund Garage	A