

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
 FEB 17 2010

Application No.: 10-0450
 Date: _____
 Zoning District R-1 CUS 2
 Amount Paid: \$750.00 2-18-10
(pd c Spec. U.)
Per SD/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 U SPECIAL USE B.O.A. OTHER _____
 Use Tax Statement for Legal Description
 Legal Description 1/4 of 1/4 of Section 7 Township 47 North, Range 8 West, Town of Iron River
 Gov't Lot 1 Block _____ of Deeds _____ CSM # 801 Acreage 0.97
 Volume _____ Page _____ Parcel I.D. 04-078-2-071-08-02-1 00-212-4400
 Property Owner Barbara K. Anick Contractor Greg Martineau Const (Phone) 715-292-3279
 Address of Property 69665 Island Blvd Plumber Blakeman Plumbing
Iron River, WI 54847 Authorized Agent Cory Markhusen (Phone) 715-292-3279
 Telephone 715-292-1624 (Home) same (Work) _____
 Is your structure in a Shoreland Zone? Yes No If yes, _____
 Structure: New Addition _____ Existing _____
 Fair Market Value 100,000.00 Square Footage 864
 USE:
 * Residence or Principal Structure (# of bedrooms) _____
 * Residence w/deck-porch (# of bedrooms) 2
 Residence sq. ft. _____ Porch sq. ft. 140
 Deck sq. ft. 175 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 _____
 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) _____

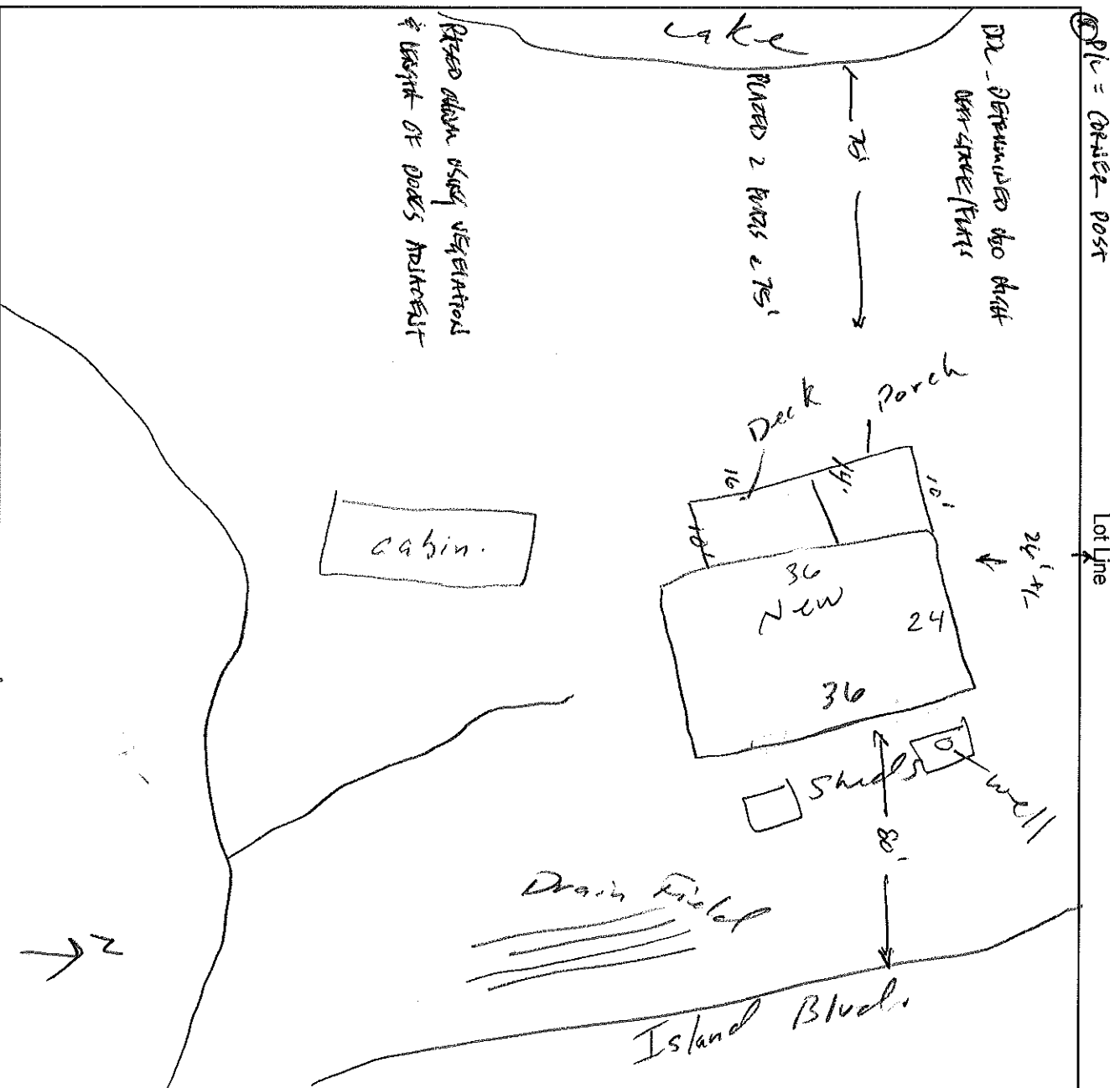
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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) BK Anick Date 2-17-2010
 Address to send permit: 69665 Island Blvd Iron River, WI 54847 ATTACH _____
 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 09-160 Date 12-2-09
 Date 11/3/10 Permit Number 10-0450 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: two (2) pre-existing structures to be used for glass-beam fixtures - one (1) doorhead - sheet panel visible to be built. By DDC Date of Inspection 4-16-10
10/24/10 Shoreland setbacks/obstructions as requested by owner appears to be code compliant + 1.0. Permit
 Mitigation Plan Required: Yes No
 Note - RETRACTED FRONT TWO (2) GARAGE W/ATTACHED BACK 9-5 Variance (B.O.A.) # _____
 Condition: _____
 Signed [Signature] Inspector _____ Date of Approval 11-2-10
 New plans submitted for the 2 existing drawings
 Record for Issuance 11/18/10
 Confirmed use permit # 10-158

Secretarial Staff



Name of Frontage Road (Island Blvd)

NOTE TO FILE - HARD TO RELOCATE TWO SAKES TOWARDS L&B 5'

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.
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:
 - a. Building to all lot lines
 - b. Building to centerline of road
 - c. Building to lake, river, stream or pond
 - d. Holding tank to closest lot line
 - e. Holding tank to building
 - f. Holding tank to well
 - g. Holding 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. Septic Tank and Drain field to closest lot line
 - l. Septic Tank and Drain field to building
 - m. Septic Tank and Drain field to well
 - n. Septic Tank, and Drain field to lake, river, stream or pond.
 - o. Well to building

IMPORTANT
 DETAILED PLOT PLAN
 IS NECESSARY, FOLLOW
 STEPS 1-8 (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, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.