

**APPLICATION FOR
RECREATIONAL VEHICLE**



Bayfield County Planning and Zoning Department
P.O. Box 58
117 East Sixth Street
Washburn, WI 54891
Phone - (715) 373-6138

RECEIVED
JUN 11 2012

Bayfield Co. Zoning Dept

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

Office Use:	Zoning District/Lakes Class
Application No. <u>19-0353</u>	
Date <u>9-13-12</u>	
Fee Paid <u>\$250.00</u>	<u>205</u>
	<u>6/11/12</u>

Applicant John M + Nancy J Marin **Property Address** _____
Mailing Address 11533 Jefferson St NE **of RV** 11533 Jefferson St NE
Blaine MN 55434 **Blaine MN 55434**
Telephone 963-754-3982 **Written Authorization Attached:** Yes () No ()
Zoning District: F-1

Accrual Municipality: (024) TOWN OF IRON RIVER **Parcel I.D. #** 201-291-00-14-4 **Acres** 11.78
 STR: 519 T47N R08W **Volume** _____ **Page** _____ **of Deeds** _____ **Parcel I.D. #** _____ **Acres** _____ **CSM #** _____
 1/ Description: THAT PART OF GOVT LOT 3 KNOWN AS THE NE SE _____ **angle** _____ **W. Town of** Iron River
 LYING S OF SPIDER LAKE RD LESS LOT 1 CSM #1346
 IN V.8 P.154 LESS S 440' IN V.1061 P.707 TOG WITH
 EASE 426

Additional Legal Description: _____ **ATTACH** _____
 Copy of Tax Statement

Is your RV in a Shoreland Zone? Yes No If Yes, Distance from Shoreline: 75' or greater < 75' to 40' less than 40'

RV: New Replacement **Vin #** 1UTB02L1N1CDD0076
Make of RV: Sayco **Model of RV:** 25' TR

FAILURE TO OBTAIN A PERMIT OR PLACING RV ON PROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES
 APPLICANT - PLEASE COMPLETE REVERSE SIDE

For Office Use Only	
Permit Issued:	Sanitary Number <u>19-0353</u> Date <u>9-13-12</u>
Issuance Date <u>9-13-12</u>	Permit Number <u>19-0353</u> Permit Denied (Date) _____
Reason for Denial: _____	_____
Inspection Record: <u>Method of N 2 for address representations the left of the vehicle</u>	_____
Needs Setbacks For A <u>FI zoning Ord</u> By <u>DR</u> Date of Inspection <u>6-29-12</u>	_____
Variance (B.O.A.) # _____	_____
Condition: <u>RV may be placed up to 4 months from issuance date.</u> Must be removed by: _____	_____
Recd for issuance _____	Signed <u>[Signature]</u> Inspector _____ Date of Approval <u>6-28-12</u>
SEP 19 2012	

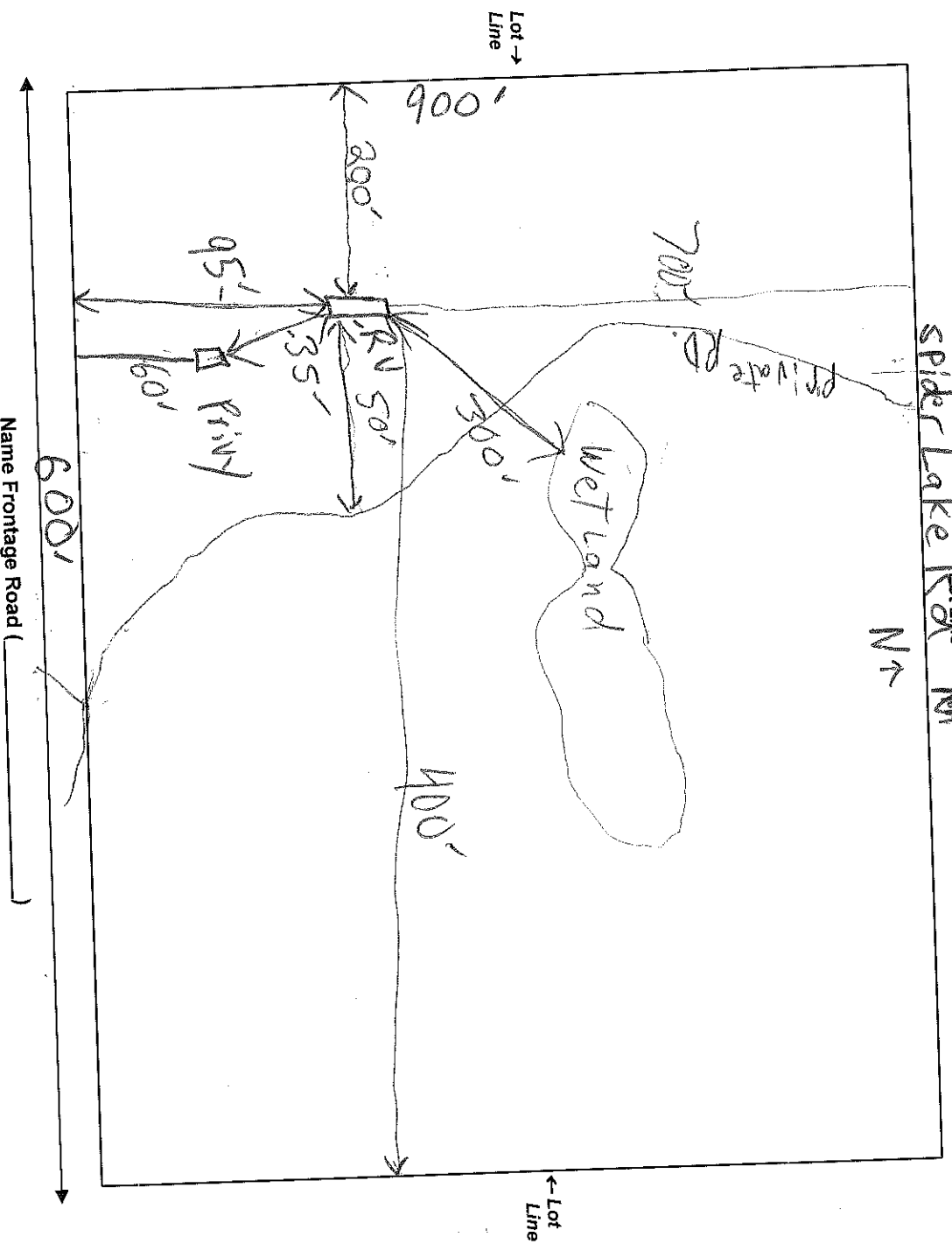
Name and use frontage road as a guideline, and indicate North (N) on plot plan

IMPORTANT
Detailed Plot Plan is Necessary

2. Show the RV (Recreation Vehicle) location

3. Show dimensions in feet on the following:

- a. RV from centerline of road(s).
- b. RV from right-of-way line
- c. RV from property lines
- d. RV from lake, river, stream or pond
- e. RV from Privy



NOTICE: The local town, village, city, state or federal agencies may also require permits.

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 John M Marin Date 6/02/2012
Address to send permit 11533 Jefferson St NE Braine, MD 55434

APPLICATION FOR SIGN

RECEIVED
AUG 30 2012

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Office Use:
Application No. <u>12-0345</u>
Date <u>9-10-12</u>
Fee Paid <u>\$50.00 PD5</u>
<u>8/30/12</u>

Applicant Richard & Kristin Peterson Contractor _____

Address P.O. Box 175 Authorized Agent _____

7805 USH 2 Iron River WI 54847 Agent's Telephone _____

Telephone (715) 372-812-1085 Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request: Zoning District: Commercial

1/4 of SE 1/4 of Section 7 Township 47 N. Range 8 W. Town of Iron River

Gov't Lot _____ Lot _____ Block _____ Subdivision of 2nd 2-11-08-07-4 01-000 2000 CSM # _____

Volume _____ Page _____ of Deeds Parcel I.D. # _____ ACREAGE 0.73

Additional Legal Description: _____ ATTACH Copy of Tax Statement

Sign: On-premise Off-premise Sign: New Replacement

Size of Sign: 8 Feet by 8 Feet Height of Sign: 5 Feet from grade to top of Sign

If this sign is off-premise, owner of property must complete the following:

I, _____, owner of the above described property, do hereby give my authorization for _____ to erect and maintain a sign on my property. Signed _____ Date _____

Property Owner
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
APPLICANT - PLEASE COMPLETE REVERSE SIDE

For Office Use Only

Permit Issued: _____ Permit Number 12-0345 Permit Denied (Date) _____

Date 9-12-12 Reason for Denial: _____

Inspection Record: Permit on child's representation / sign located & administrative fees complete
Review & permit after the sign by DC Date of Inspection 9/12

Variance (B.O.A.) # _____

Condition _____ Signed [Signature] Inspector _____ Date for Issuance 9/12 Date of Approval _____

6.5' to West of

SEP 12 2012

Secretarial Staff

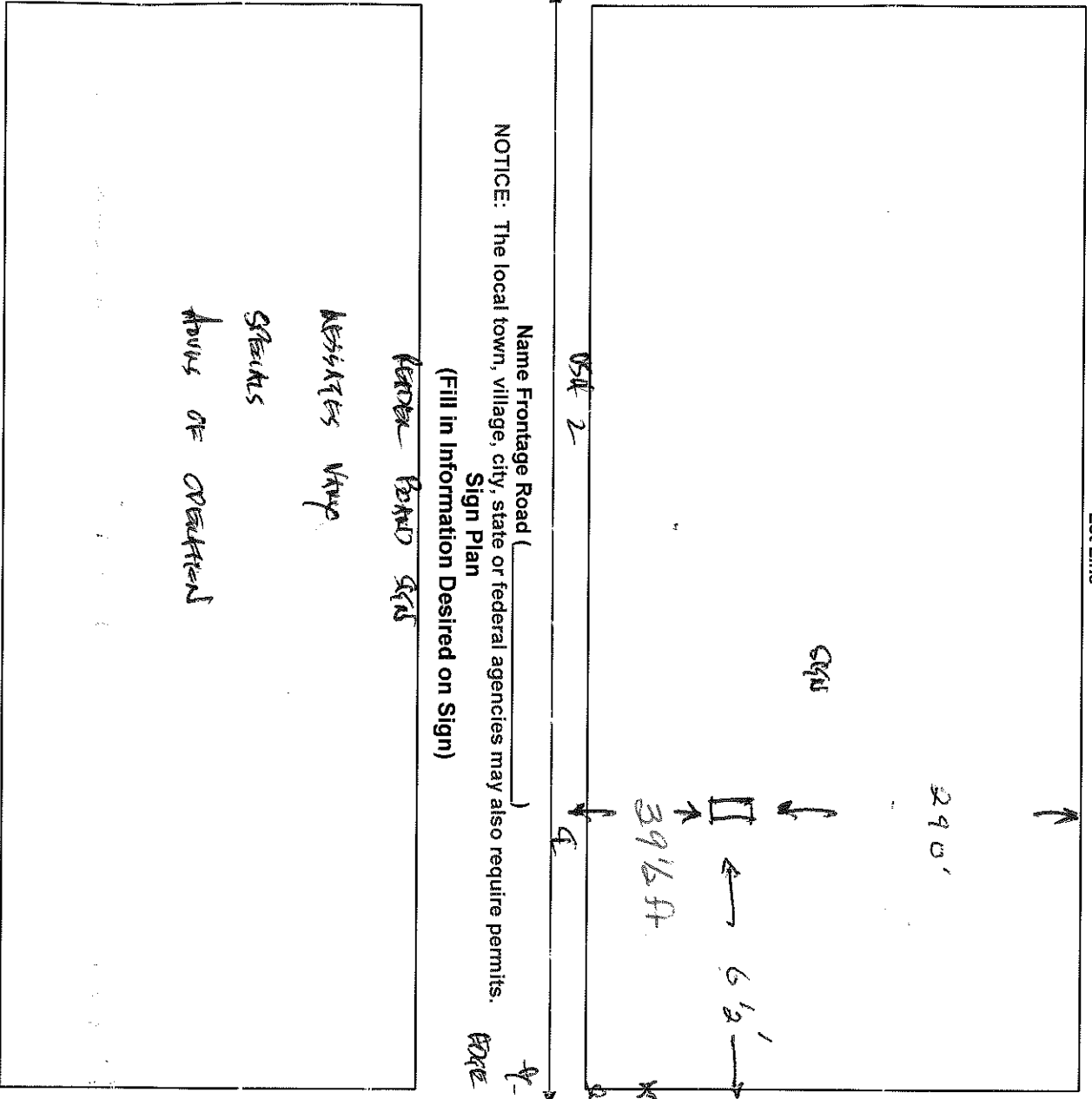
and use frontage road as a guideline, and indicate North (N) on plot plan

Show the sign location

IMPORTANT
Detailed Plot Plan is Necessary

3. Show dimensions in feet on the following:

- a. Sign from centerline of road(s).
- b. Sign from right-of-way line
- c. Sign from property lines
- d. Sign from lake, river, stream or pond
- e. Sign from other signs



NOTICE: The local town, village, city, state or federal agencies may also require permits.

(Fill in Information Desired on Sign)

K. BAKER on divider
 K. BAKER on divider
 SIGN
 SIGN
 SIGN OF OPERATION

I, the undersigned, attest that the information contained herein is accurate and true.

(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.

Applicant's/ Agent's Signature Shawn Peterson Date 9-10-12

Address to Mail Permit to