

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:  
 Bayfield County Zoning Department  
 P.O. Box 58  
 Washburn, WI 54891  
 (715) 573-6138

APPLICATION FOR PERMIT  
 BAYFIELD COUNTY, WISCONSIN

RECEIVED  
 MAY 12 2008  
 Bayfield Co. Zoning Dept.

TBA 175.00 LU 125.00

Application No.: 08-0291  
 Date: \_\_\_\_\_  
 Zoning District: AG-1/Class 3  
 Amount Paid: \$300.00 5/13/08 RDS

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 YOU. Changes in plans must be approved by the Zoning Department.

LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER  
 Legal Description SW 1/4 of NW 1/4 of Section 14 Township 46 North, Range 5W West, Town of Kelly  
 Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 34.5  
 Volume \_\_\_\_\_ Page \_\_\_\_\_ of Deeds \_\_\_\_\_ Parcel I.D. # 026-1027-10 Use Tax Statement for Legal Description \_\_\_\_\_

\* Property Owner Dennis Engstrom Contractor Joe Guskki (Phone) 413-0989  
 Address of Property Applied for Kelly Rd. Plumber \_\_\_\_\_  
Mason Wis 54856 Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 765-4578 (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
 Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_  
 Written Authorization Attached: Yes  No

Structure: New  Addition \_\_\_\_\_ Existing \_\_\_\_\_  
 Basement: Yes \_\_\_\_\_ No  Number of Stories 1  
 Estimated Cost of Construction 18,000 Square Footage 1824 Sanitary: New  Existing \_\_\_\_\_ City \_\_\_\_\_

USE:  \* Residence or Principal Structure (# of bedrooms) garage 864 house 924 breezeway 196 NT  
 \* Residence sq. ft. \_\_\_\_\_  
 \* Residence w/deck-porch (# of bedrooms) 2 Mobile Home (Manufactured Home) 1986 14X66  
 \* Residence sq. ft. \_\_\_\_\_  
 \* Residence w/attached garage (# of bedrooms) \_\_\_\_\_  
 \* Residence sq. ft. \_\_\_\_\_  
 \* Residential Addition / Alteration (explain) \_\_\_\_\_  
 Residential Accessory Building (explain) \_\_\_\_\_  
 Residential Accessory Building Addition (explain) \_\_\_\_\_  
 Residential Other (explain) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_  
 Deck sq. ft. \_\_\_\_\_  
 Porch sq. ft. \_\_\_\_\_  
 Deck(2) sq. ft. \_\_\_\_\_  
 \* Residence w/attached garage (# of bedrooms) \_\_\_\_\_  
 Residence sq. ft. 924 Garage sq. ft. 864  
 Residential Addition / Alteration (explain) \_\_\_\_\_  
 Residential Accessory Building (explain) \_\_\_\_\_  
 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) Dennis Engstrom Date 4-23-08  
 Address to send permit 29200 Kelly Rd Mason Wis 54856 ATTACH  
Mail to: Joe Guskki - 29180 Kelly Rd / Mason 54856 Copy of Tax Statement  
 \* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE Attach a Copy of Recorded Deed

Permit Issued: State Sanitary Number 08-82, Date 7-2-08  
 Date 7/2/08 Permit Number 08-0291 Permit Denied (Date) \_\_\_\_\_  
 Reason for Denial: \_\_\_\_\_  
 Inspection Record: 2nd residence on a parcel that can be divided. Meets code requirements  
per owner's representation. Site  
well staked; approximately By Travis Taborsky Date of Inspection 5/19/2008  
250 ft. between residences.  
 Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
 Condition: \_\_\_\_\_  
 Signed Travis Taborsky Inspector Date of Approval 7/02/2008  
 Rec'd for Issuance \_\_\_\_\_

14  
 \* Joseph Guskki on San.

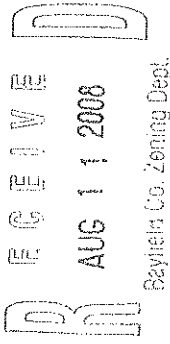


**APPLICATION FOR RECREATIONAL VEHICLE**

ZU 75.00 TBA 175.00

Office Use:	ENTERED
Application No.	08-0495
Date	
Fee Paid	\$ 250.00
	8/11/08

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



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

Lot 14 Petrin Rd.

**Applicant** Shawn i Penny Lee  
**Mailing Address** 1015 Ramona Terr  
Machesney Pk, B 61115  
**Telephone** 815 636 1244

**Property Address** w/2 of E/2 of the  
Section 25 Township 46N, Range 5W  
down st Kelly, Bayfield City, WI  
**Written Authorization Attached:** Yes  No

**Accurate Legal Description involved in this request:**

NE 1/4 of NW 1/4 of Section 25 Township 46 N. Range 5 W. Town of Kelly  
**Gov't Lot**      **Lot**      **Block**      **Subdivision**      **CSM #**       
**Volume**      **Page**      **of Deeds**      **Parcel I.D. #** 0426246052520100022000  
**Additional Legal Description:** Parcel 1 Part of Acreage 10  
ATTACH  
Copy of Tax Statement

**Zoning District:** AG-1

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   
**Make of RV:** Coachmen **Vin #** 5171202733 **Model of RV:** 1977 Recreational Trailer

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 _____ Date _____
Issuance Date <u>9-11-08</u>	Permit Number <u>08-0495</u> Permit Denied (Date) _____
Reason for Denial: _____	
Inspection Record: <u>Camper/RV location meets code requirements per owner's representation. Survey corners were found at time of inspection. Town Board app. was sent. By Travis Turbushy Date of Inspection 8/26/2008 to the town of Kelly for greater than 4 month placement. Worked with app. has been submitted Variance (B.O.A.) # _____</u>	
Condition: RV may be placed up to 4 months from issuance date. Must be removed by: _____	
Signed <u>Travis Turbushy</u>	Date of Approval <u>9/10/2008</u>
Inspector _____	

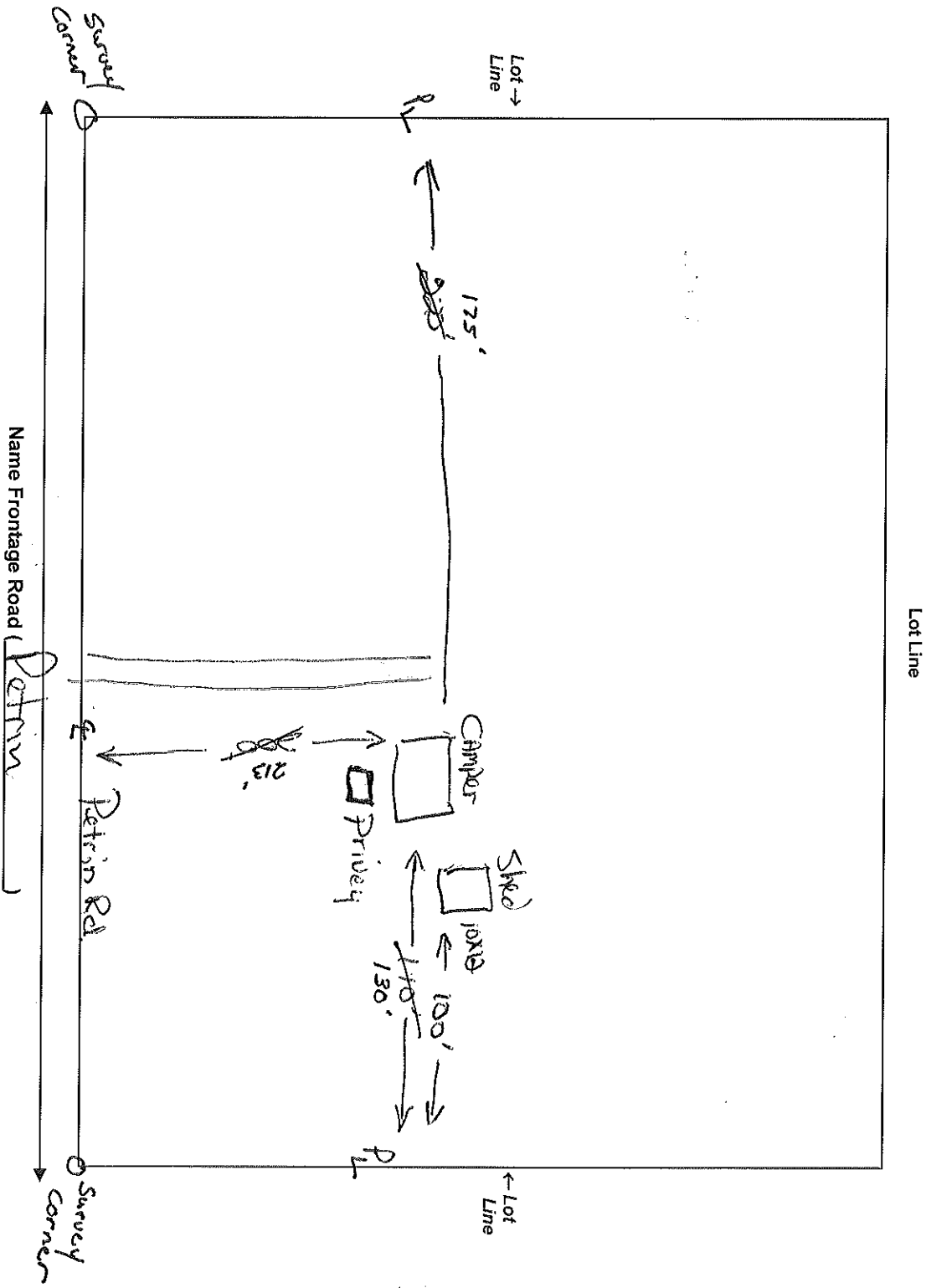
SEP 11 2008 \$ 5 yrs from date of permit

Secretarial Staff

1. Name and use frontage road as a guideline, and indicate North (N) on plot plan
2. Show the RV (Recreation Vehicle) location
3. Show dimensions in feet on the following:

**IMPORTANT**  
*Detailed Plot Plan is Necessary*

- 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

Shawn Lee

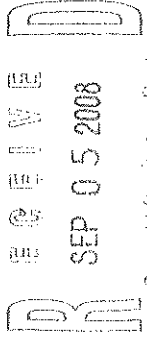
Date

Address to send permit

1015 Ramona Terrace, Mechesney Park, Il. Cillis

**APPLICATION FOR SIGN**

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



Office Use:  
Application No. 08-0496  
Date \_\_\_\_\_  
Fee Paid \$50.00 PMS  
9/8/08

INSTRUCTIONS: No permits will be issued until all fees are paid. Bayfield Co. Zoning Dept  
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

Applicant Rich Nettleton Contractor \_\_\_\_\_  
Address 25395 Squires Rd Authorized Agent \_\_\_\_\_  
Mason WI 54836 Agent's Telephone \_\_\_\_\_  
Telephone 715-765-4516 Written Authorization Attached: Yes ( ) No ( )

Accurate Legal Description involved in this request: Ag-1/class 3  
S&W 1/4 of NW 1/4 of Section 7 Township 46 N. Range 05 W. Town of Kelly  
Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_  
Volume 926 Page 935 of Deeds Parcel I.D. # 026-1013-04 ACREAGE 600 44.77

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: 10 Feet from grade to top of Sign

If this sign is off-premise, owner of property must complete the following:  
I, Rich Nettleton, owner of the above described property, do hereby give my authorization for \_\_\_\_\_ to erect and maintain a sign on my property.

Signed [Signature] Date 8-25-08  
Property Owner

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

For Office Use Only

Permit Issued: \_\_\_\_\_  
Date 9-11-08 Permit Number 08-0496 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: \_\_\_\_\_  
Inspection Record: Right-of-way from centerline of Hwy 63 is 43.3 ft.; sign is approx. 85 ft. from centerline. Sign advertises permitted, some farm and post-hill course. By Treviz Teberitzky Date of Inspection 9/09/2008  
Variance (B.O.A.) # \_\_\_\_\_

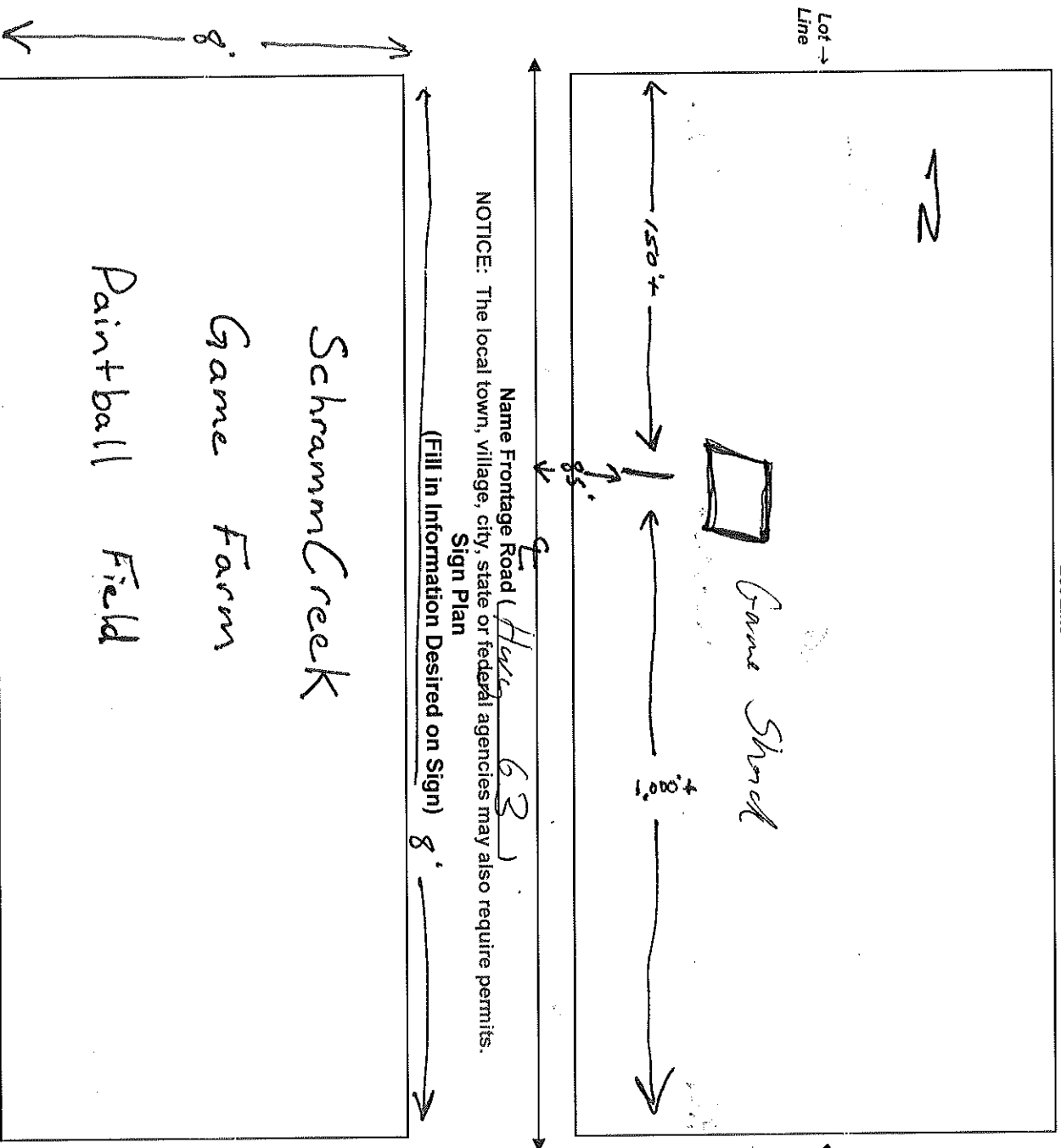
Condition \_\_\_\_\_  
Signed Treviz Teberitzky Date of Approval 7/09/2008  
Inspector \_\_\_\_\_ Date of Approval \_\_\_\_\_

SEP 10 2008

1. Name and use frontage road as a guideline, and indicate North (N) on plot plan
2. Show the sign location
3. Show dimensions in feet on the following:

**IMPORTANT**  
*Detailed Plot Plan is Necessary*

- 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.  
Sign Plan

(Fill in Information Desired on Sign)

8'

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.

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


 Applicant's/ Agent's Signature
 

 Date

Address to Mail Permit to