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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

RECEIVED  
JUN 19 2008

Application No. 08-0360  
Date: \_\_\_\_\_  
Zoning District AG-1  
Amount Paid: \$75.00 RDS  
10/1/08 RDS Review  
\$50 Reinspection RDS

Bayfield Co. Zoning Dep.  
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 BY APPLICATION.

Changes in plans must be approved by the Zoning Department.

LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER  
1/2 of 1/4  
Legal Description 1/4 of NE 34 Township 46 North, Range 5 West, Town of Kelly  
Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage A.69  
Volume 994 Page 131 of Deeds Parcel I.D. # 026-1070-05 000 Use Tax Statement for Legal Description  
Property Owner Alan Craig Contractor Self (Phone) 715-682-1392

Address of Property No. 1 Road and Brown Road - "back" 20. Mason  
Telephone 611(215) (Home) (715) 682-1392 (Work) \_\_\_\_\_  
Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_  
Written Authorization Attached: Yes  No

Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_  
Structure: New  Addition  Existing   
Estimated Cost of Construction \$12,000 Square Footage 600 City \_\_\_\_\_  
USE:  \* Residence or Principal Structure (# of bedrooms) shed = 1512 x 304 (lean to work) Sanitary: New  Existing  Privy \_\_\_\_\_  
 \* Residence sq. ft. \_\_\_\_\_ Deck(2) sq. ft. \_\_\_\_\_  
 \* Residence w/deck-porch (# of bedrooms) 32 Porch sq. ft. 236 Garage sq. ft. \_\_\_\_\_  
 Residence sq. ft. \_\_\_\_\_ Deck(2) sq. ft. \_\_\_\_\_  
 \* Residential Addition / Alteration (explain) \_\_\_\_\_  
 Residential Accessory Building (explain) Garage / Shop  
 Residential Accessory Building Addition (explain) w/lean to  
 Residential Other (explain) \_\_\_\_\_

Basement: Yes  No  Number of Stories 1  
Distance from Shoreline: greater than 75'  75' to 40'  less than 40'   
 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) AC Date \_\_\_\_\_  
Address to send permit 27875 St. Hwy 137 Ashland WI 54806 ATTACH Copy of Tax Statement

\* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE If you previously purchased the property Attach a Copy of Recorded Deed

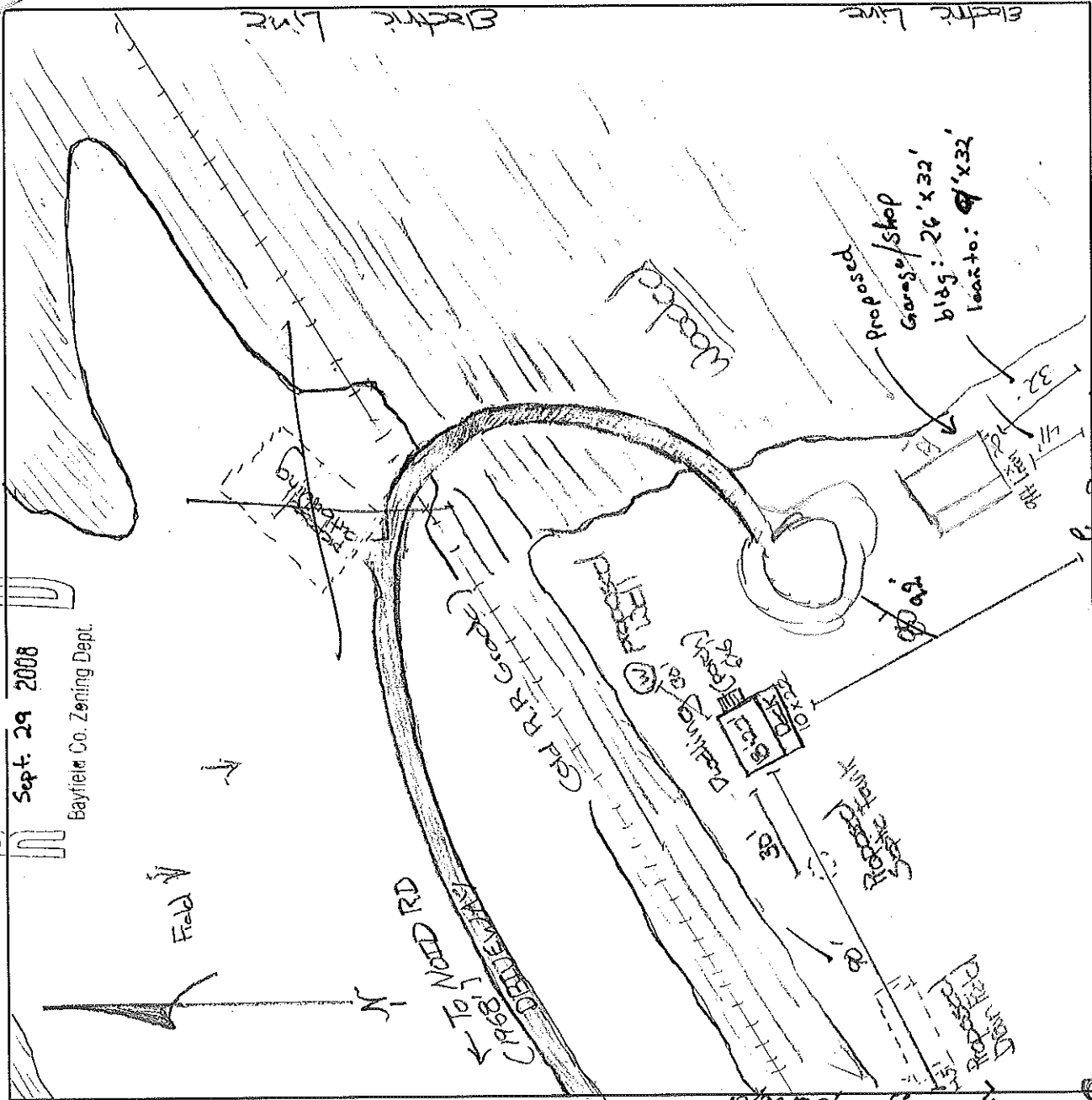
Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_  
Date 7-27-08 Permit Number 08-0360 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: \_\_\_\_\_  
Inspection Record: Meets code requirements per owner's representation. Owner present at time of inspection  
verified bldg. location + By Tavis Tuburzyky Date of Inspection 7/24/2008  
property has property to be surveyed. Reinspect: 9/29/2008  
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
Condition: No human habitation.  
Revision Approved: \_\_\_\_\_ Signed Tavis Tuburzyky 7/28/2008 Date of Approval  
Tavis Tuburzyky 7/29/2008 Inspector  
Rec'd for Issuance  
**Revision**  
JUL 14 2008

# Revised Site Plan

RECEIVED

Sept. 29 2008

Bayfield Co. Zoning Dept.



Name of Frontage Road ( NO RD )

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
  - i. Privy to building
  - j. Privy to lake, river, stream or pond
  - k. Septic Tank and Drain field to closest lot line

**IMPORTANT**  
 DETAILED PLOT PLAN  
 IS NECESSARY. FOLLOW  
 STEPS 1-8 (a-o) COMPLETELY.