

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
 NOV 04 2010

ENTERED
 Application No. 10-0484
 Date: _____
 Zoning District A-1
 Amount Paid: 75 11/8/10 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 USE SPECIAL USE B.O.A. OTHER _____

Use Tax Statement for Legal Description
 Legal Description SW 1/4 of NW 22 Township 46 North, Range 5 West, Town of Kelly
 Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 16.53
 Volume 876 Page 241 of Deeds Parcel I.D. 04-026-a-46-05-22-2 03-000-20000

Property Owner CHRIS DUE + AUTUMN KELLEY Contractor Self (Phone) _____
 Address of Property 2800 MAPLE RIDGE RD. Plumber _____
MASSON WI 54856 Authorized Agent _____ (Phone) _____
 Telephone 715.765.4297 (Home) same (Work) _____

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

Structure: New Addition _____ Existing _____
 Fair Market Value 10,000 Square Footage 22x90 Basement: Yes _____ No Number of Stories _____
 USE: 1 2112 Sanitary: New _____ Existing _____ Pwly _____ City _____
 * Residence or Principal Structure (# of bedrooms) _____ Type of Septic/Sanitary System none
 * Residence sq. ft. _____ Mobile Home (manufactured date) _____

Residence sq. ft. _____ Commercial Principal Building _____
 * Residence w/deck-porch (# of bedrooms) _____ Commercial Principal Building Addition (explain) _____
 Residence sq. ft. _____ Porch sq. ft. _____ Commercial Accessory Building (explain) _____
 Deck sq. ft. _____ Commercial Accessory Building Addition (explain) _____
 * Residence w/attached garage (# of bedrooms) _____ Commercial Other (explain) _____
 Residence sq. ft. _____ Garage sq. ft. _____ Special/Conditional Use (explain) _____
 Residential Addition / Alteration (explain) _____ External Improvements to Principal Building (explain) _____
 Residential Accessory Building (explain) greenhouse (nonpwly) External Improvements to Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) _____

FAILURE TO OBTAIN A PERMIT OF 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 10/30/10

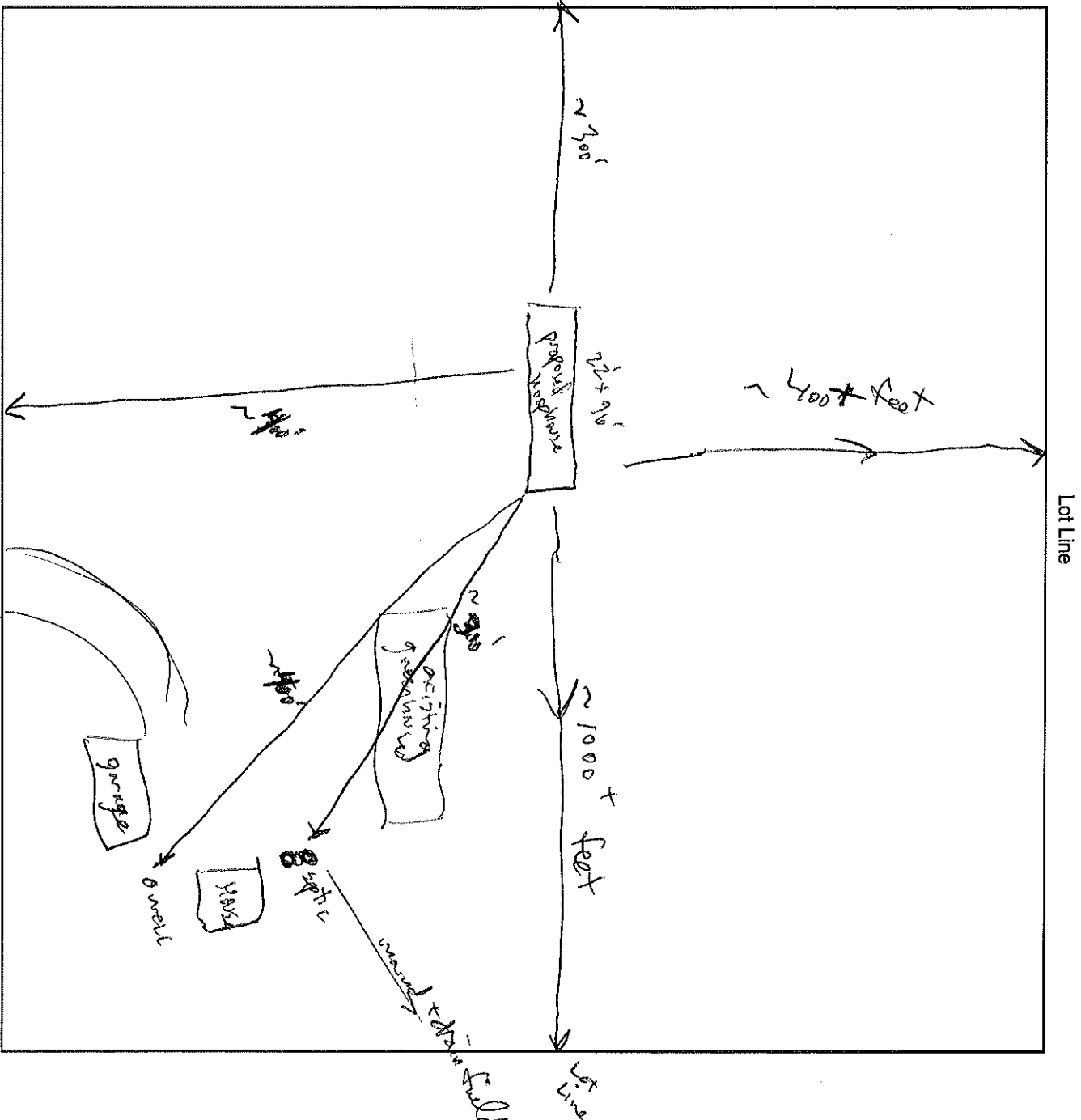
Address to send permit same ATACH
 * See Notice on Back Copy of Tax Statement or Attach a Copy of Recorded Deed

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number _____ Date _____
 Date 11/29/10 Permit Number 10-0484 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Meets all setbacks. Property lines per owners representations. By M. Fustak Date of Inspection 11-18-10
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: _____
 Rec'd for Issuance Michael Fustak Date of Approval 11-29-10
 Inspector Michael Fustak
 NOV 29 2010
 Secretarial Staff

don't have my tax statement, engineer, app for this info - (see previous greenhouse permit app for this info)

Mike - Commercial ?? - No permit



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.