



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  
MAY 20 2009  
Bayfield Co. Zoning Dept.

Application No: 09-0249  
Date: \_\_\_\_\_  
Zoning District: R-8B  
Amount Paid: \$1755/21/09  
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 SE 1/4 of SE 1/4 of Section 24 Township 47 North, Range 7 West, Town of KEYSERVE  
Gov't Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 3.84  
Volume 922 Page 884 of Deeds Parcel I.D. 04-028-2-47-07-24-4-04-00-20000

Property Owner DOHN JOHNSTON Contractor \_\_\_\_\_ (Phone) \_\_\_\_\_  
Address of Property 18920 US HWY 2 Plumber \_\_\_\_\_  
MASON WI 54856 Authorized Agent SHELLY SPANGLER (Phone) 715-746-2425  
Telephone 715-413-0710 (Home) 304-589-0243 (Work) \_\_\_\_\_  
Written Authorization Attached: Yes  No

Is your structure in a Shoreland Zone? Yes  No  **if yes.**  
Structure: New \_\_\_\_\_ Addition \_\_\_\_\_ Existing \_\_\_\_\_  
Fair Market Value \_\_\_\_\_ Square Footage 1,040  
Type of Septic/Sanitary System HOLDING TANK  
 Mobile Home (manufactured date) \_\_\_\_\_  
 Commercial Principal Building \_\_\_\_\_  
 Commercial Principal Building Addition (explain) \_\_\_\_\_  
 Commercial Accessory Building (explain) \_\_\_\_\_  
 Commercial Accessory Building Addition (explain) \_\_\_\_\_  
 Commercial Other (explain) \_\_\_\_\_

Residential or Principal Structure (# of bedrooms) \_\_\_\_\_  
Residence sq. ft. \_\_\_\_\_  
 Residential w/deck-porch (# of bedrooms) \_\_\_\_\_  
Residence sq. ft. \_\_\_\_\_ Porch sq. ft. \_\_\_\_\_  
Deck sq. ft. \_\_\_\_\_ 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) \_\_\_\_\_

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) John Johnston Date 5-14-09  
Address to send permit PO BOX 241 LAON BIVER 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 199808 Date 5/17/1991  
Date 6/29/09 Permit Number 09-0249 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: \_\_\_\_\_  
Inspection Record: Existing short-term rental "Trails End Lodge" with on-premise sign. Existing holding tank or time of inspection outfall pipe to By Travis Telowitzky Date of inspection 5/21/2009 day light was found. Contacted owner 5/25/09 he will correct the problem. Permit will not be issued until correction made to HT.  
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
Condition: \_\_\_\_\_  
Signed Travis Telowitzky Inspector \_\_\_\_\_ Date of Approval 6/26/2009  
Rec'd for Issuance  
6/26/2009: Met with owner on-site, holding tank outfall pipe has been capped and tank was recently pumped.  
JUN 29 2009  
Secretarial Staff



40'  
 1.26'  
 240  
 800  
 1040

0 0.01 0.02 mi

Selected point is located in the Fish Creek watershed within the Town of Keystone and is found on the *Ir* USGS 7.5' quadrangle. It is zoned RRB (Residential-Recreational Busin). This district provides for perm residential developments in neighborhood environments with water and/or sewer and other services/utilit Such developments should be protected from traffic hazards and the intrusion of incompatible land uses. location is within the Drummond School District and is in Supervisory District 10. It is served by the Ma Ambulance District and the Mason Fire Department (715-373-6120).

Query Results

Parcel Owner		Legal Description
JOHN JOHNSTON PO BOX 241 IRON RIVER WI 54847		PAR IN SE SE IN V.922 P.884 (417.5' X 521.8') IM 2005R-500627
Location		History
Section 24, Town 47 N, Range 07 W		500627
New PIN		Old PIN
04-028-2-47-07-24-4 04-000-20000		028105001990
Land Value	Improvement Value	Total Acres
11200.00000	56400.00000	3.84100