## 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

SENTERED)

F 2000

Bayflett Co., Zonnig Dapt.

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.

Date: 15:285-Amount Paid: \$175.00, RDS Zoning District Application No.: 10,0140 1/17/12 N

	Date of Approval	Inspector		8	Tor Issu	7. P. W.
	-4rh-3			Cut tructed.	5 H	
					on the second	Condition:
	Variance (B.O.A.) #	<b>V</b>		Yes □ No	Mitigation Plan Required:	X Gau
	spection 6-10-12	Date of Inspection	By Control of the Con	THE ROOP PRINCE	MANUES TO THE	regission t
,	the MOD COM THE	The workship out	pretices in	fest which evisit	Inspection Record: (1964)	Type q
چ ک	ر ارانج(انجاء) ارانج(انجاء)				Reason for Denial:	
	(Date)	Permit Denie	Permit Number 12-01		5-25-12	
	Date		3,		<u>8</u>	Dermit Issued
	ATTACH Copy of Tax Statement or (If you recently purchased the property Attach a Copy of Recorded Deed)	n, lowa 50131-2930  CE: PLEASE COMPLETE REVERSE SIDE	8101 Birchwood Court, Suite F. Johnston, Iowa 50131-2930 45 - Os Mocres Agrant Offer Maines Applicant — Please Compli	Birchwood Court, S. Oks Morders A. Mark 185	Address to send permit 8101  August 1843 Address of 187 -  * See Notice on Back	Address to s  Address to s  * See Not
	Date 1/9// L		+ Thate	gnature) X	Owner or Authorized Agent (Signature)	Owner or Au
	relied upon by Eayling in (are) providing in any reasonable time	(we) am (are) providing and that it will be try relying on this information I (we) as ss to the above described property at	(we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) issue a permit. I (we) further accept liability which may be a result of Bayfield County consent to county officials charged with administering county ordinarges to have access	responsible for the detai cept liability which ma with administering of	viedge that I (we) am (are) i permit. I (we) further acc county officials charged	(we) acknowled to issue a per- consent to co
	VILL RESULT IN <u>PENALTIES</u> ) knowledge and belief it is true, correct and complete. I	FAILURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief	OI STARTING CONSTRU	)BTAIN A PERMIT	FAILURE TO O that this application (inc	I (we) declare
	ccessory Building (explain)	□ External Improvements to Accessory Building		ď	☐ Residential Other (explain)	☐ Residenti
	rincipal Building (explain)	☐ External Improvements to Principal Building (explain)		ng (expiain)	T Residential Accessory Building Addition (explain)	☐ Residenti
	plain) Grading in Shoreland Area	☑ Special/Conditional Use (explain)		ion (explain)	☐ Residential Addition / Alteration (explain)	☐ Residenti
		☐ Commercial Other (explain)	:	Garage sq. ft	9 Sq. ft	Residence sq. ft
	ding Addition (explain)	☐ Commercial Accessory Building Addition (explain)	9)	rage (# of bedrooms)	Residence w/attached garage (#	□ <b>*</b> Reside
	ding (explain)	☐ Commercial Accessory Building (explain)		Deck(2) sq. ft		Deck sq. ft.
	ng Addition (explain)	☐ Commercial Principal Building Addition (explain)		Porch sq. ft	Residence wideck-polon (# or beardonns)	Residence so fi
	ng	Commercial Principal Building		(# of badrooms)	sq. ft	מג 🛊
	1 date)	☐ Mobile Home (manufactured date)	ms)	ructure (# of bedrooms)	☐ <b>※</b> Residence or Principal Structure	□ <b>*</b> Reside
	**************************************	Septic/Sanitary	NAX)		2000	USE
	No Number of Stories Existing Privy City	Basement: Yes No Sanitary: New Exis	Existing Existing	AdditionE	New	Structure: New
*	er than 75′ ☐ 75′ to 40′ ☐ less than 40 🗓	Distance from Shoreline: greater than 75'	No 🗍 If yes.	id Zone? Yes 🗓	cture in a Shoreland Zone?	Is your structure in
	Yes O No O	Written Authorization Attached:	515-226-2011 (Work)	(Home) 51		Telephone
	MANOTAL (Phone)	Authorized Agent JANAR &		202		Washing
	MONTHERY RATIONAL CAS	Plumber		3.1%	roperty Whs	Address of Property
	d (Phone)	Contractor To be determined		£085	ner Chotal	Property Owner
	002.11510	02-2-48-08-07-2 05-	Parcel I.D01-002-1-	of Deeds	Page	Volume
	Acreage 2.5		Subdivision	Block	Lot	Gov't Lot
	4 West, Town of Barksdale	Township 48 North, Range	1/4 of SectionTowr	W	Legal Description NE, SE 1/	Legal Descrip
	BOA. LE OIREK	USE [_] SPECIAL USE [X]	CONDITIONAL USE	scription PRLVY	AND USE \( \text{SANITARY \( \text{L} \)  Use Tax Statement for Legal Description	Use Tax Statem
	ָר (			d by the Zoning Dep	THE S	Changes in pl