

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

MAY 08 2008

Bayfield Co. Zoning Dept.

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.

Application No.: 08-0137
Date: _____
Zoning District: F-1
Amount Paid: \$75.00 RDS
5/8/08

LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER _____
Legal Description NE 1/4 of NE 1/4 of Section 31 Township L45 North, Range 5 West, Town of Lincoln
Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 31.86
Volume 923 Page 716 of Deeds Parcel I.D. # 04-030-2-45-05-31-1-01-000 Use, Tax Statement for Legal Description _____
Property Owner Seth Repke Contractor self (Phone) _____
Address of Property 25830 Little House Rd. Plumber _____
Mason, WI 54856 Authorized Agent _____ (Phone) _____
Telephone (715) 492-5682 (Home) (715) 85-9657 (Work) _____
Is your structure in a Shoreland Zone? Yes No If yes, _____
Structure: New Addition _____ Existing _____ Number of Stories 2
Estimated Cost of Construction \$ 10,000 Square Footage 864 Sanitary: New _____ Existing Privy _____ City _____

- USE:
- * Residence or Principal Structure (# of bedrooms) _____
Residence sq. ft. _____
 - * Residence 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) Garage
 - 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) SAR Date 5/2/08
Address to send permit P.O. Box 113 Mason, WI 54852 ATTACH _____
Copy of Tax Statement
If you previously purchased the property Attach a Copy of Recorded Deed _____

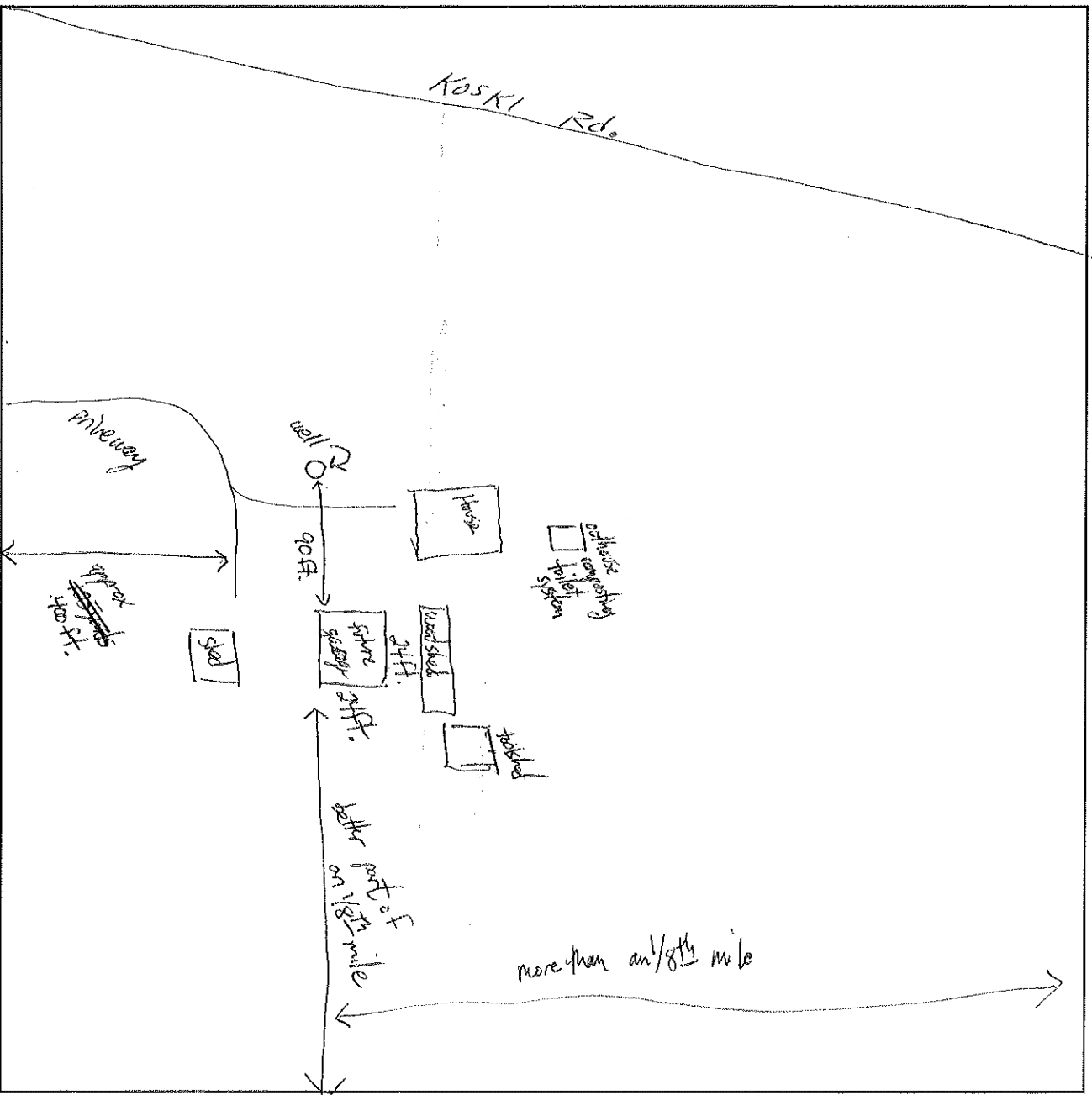
* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number _____ Date _____
Date 5/16/08 Permit Number 08-0137 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: Well staked. Meets all setbacks. Property lines per owners representations By M. Futch Date of Inspection 5-14-08
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: Not to be used for human habitation.
Signed Michael Futch 5-14-08 Date of Approval _____
Inspector _____ Rec'd for Issuance _____

North

Lot Line



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 - (include any deck(s), porch or garage)
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. 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. Septic tank to closest lot line
 - e. Septic tank to building
 - f. Septic tank to well
 - g. Septic 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. Drain field to closest lot line
 - l. Drain field to building
 - m. Drain field to well
 - n. Drain field to lake, river, stream or pond.
 - o. Well to building

IMPORTANT
 DETAILED PLOT PLAN
 IS NECESSARY. FOLLOW
 STEPS 1-7 (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, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.