

TBA #75 L.U.# 250

ENTERED

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
MAY 01 2008
Bayfield Co. Zoning Dept.

Application No.: 08-02224
Date: _____
Zoning District: AG-1
Amount Paid: \$195.00 (FDS)
512108

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
Legal Description: NE 1/4 of NE 1/4 of Section 23 Township 46 North, Range 6 West Town of Masoch
Gov't Lot Lot Block Subdivision 05 CSM # 20 Acreage 20
Volume 991 Page 255 of Deeds Parcel I.D. # 032-1044-0A-000 Use Tax Statement for Legal Description
Property Owner Tracy E. McDonald Contractor Miller Construction (715) 270-3855
Address of Property 60875 County Hwy E Plumber Blakeman Plumbing & Heating
Mason WI. 54956 Authorized Agent Chad Wooley (Phone) 715-292-5256

Telephone 715-765-4557 (Home) 682-7087 (Work) Written Authorization Attached: Yes No
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 Basement: Yes No Number of Stories 1
Estimated Cost of Construction \$65,000 Square Footage 4576 Sanitary: New Existing Privy City
USE: NY \$80,000 total 12,432 sq

* Residence or Principal Structure (# of bedrooms) 0 Mobile Home (manufactured date) _____
Residence sq. ft. _____ Commercial Principal Building _____
 * Residence w/deck/porch (# of bedrooms) 2 00 Commercial Principal Building Addition (explain) _____
Residence sq. ft. 1,392 00 Porch sq. ft. 272 00 Commercial Accessory Building (explain) _____
Deck sq. ft. 00 Deck(2) sq. ft. _____ Commercial Accessory Building Addition (explain) _____
 * Residence w/attached garage (# of bedrooms) 2 00 Commercial Accessory Building Addition (explain) _____
Residence sq. ft. 1,392 00 Garage sq. ft. 768 00 Commercial Other (explain) _____

Residential Addition / Alteration (explain) Backroom, between utility room, porch + garage
 Residential Accessory Building (explain) Change roof structure existing portion of residence
 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) Chad Wooley Date 5-1-08
Address to send permit 64248 Long Rd Marngo WI 54855 ATTACH
Miller Const. Copy of Tax Statement
If you previously purchased the property Attach a Copy of Recorded Deed

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number 08-585 Date 6/10/2008
Date 6/11/08 Permit Number 08-0224 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: Meets code requirements per owner's representation. Contractor present at time of inspection verified location of addition + North By Travis Tulowitzki Date of Inspection 5/06/2008
Property line. 5/14/08: Revised application for new residence: TBA and survey report. 5/14/2008
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____

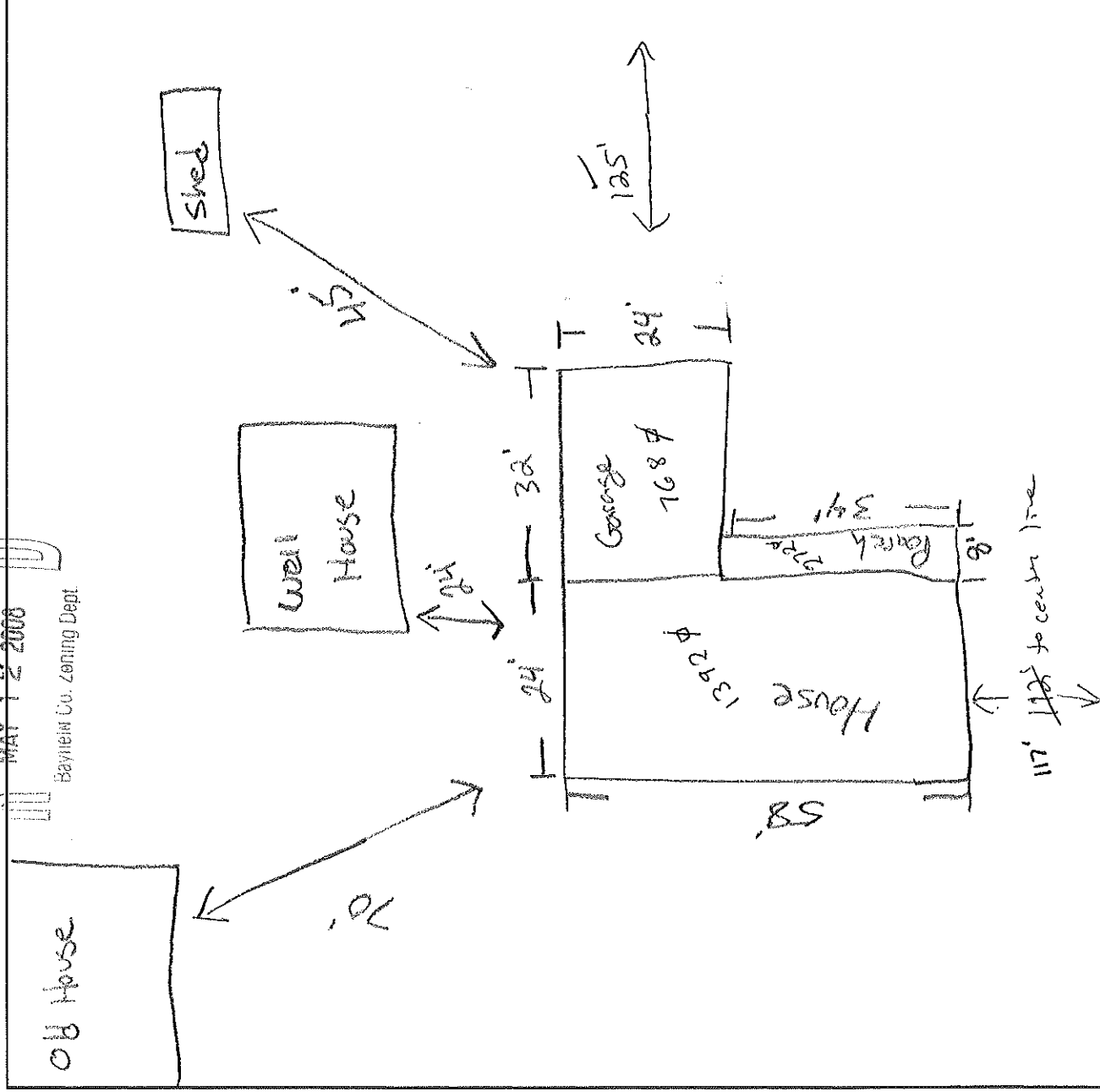
Condition: _____
Signed Travis Tulowitzki Date of Approval 6/10/2008
Inspector _____ Rec'd for Issuance _____

JUN 1 1 2008

Bayfield Staff

Revised

RECEIVED
MAY 12 2006
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Name of Frontage Road (Candy Hwy E)

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 119'
 - c. Building to lake, river, stream or pond
 - d. Septic tank to closest lot line 100'
 - e. Septic tank to building 27'
 - f. Septic tank to well 110'
 - 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 32'

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.