

ENTERED

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

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.: 08-0426
Date: _____
Zoning District: AG-1
Amount Paid: \$300.00 ROS
175
8/7/08

RECEIVED
AUG 06 2008

Bayfield Co. Zoning Dept.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

CLASSIFIED

LAND USE: SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Part of: NE 1/4 of NW 1/4 of Section 1 Township YG North, Range 6 West. Town of Mason

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 1.74

Volume 794 Page 413 of Deeds Parcel I.D. # 032-1000-07 Use Tax Statement for Legal Description

Property Owner Kenneth & Marion Johnson Contractor self (Phone) _____

Address of Property 24275 County Hwy F Plumber _____

Mason, WI 54856 Authorized Agent _____ (Phone) _____

Telephone 682-2701 (Home) _____ (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 \$9,000 Square Footage 980 Sanitary: New Existing City _____

USE: w/porch enclosed 1,000 sq ft Mobile Home (manufactured date) 1994

Residence of Principal Structure (# of bedrooms) _____

Residence sq. ft. _____

Residence w/deck-porch (# of bedrooms) 3

Residence sq. ft. 980 Porch sq. ft. 100

Deck sq. ft. _____ Deck(2) sq. ft. _____

Residence w/attached garage (# of bedrooms) _____ Garage sq. ft. _____

Residential Addition / Alteration (explain) _____

Residential Accessory Building (explain) _____

Residential Accessory Building Addition (explain) _____

Residential Other (explain) _____

Commercial Principal Building _____

Commercial Principal Building Addition (explain) _____

Commercial Accessory Building (explain) _____

Commercial Accessory Building Addition (explain) _____

Commercial Other (explain) _____

Special/Conditional Use (explain) _____

External Improvements to Principal Building (explain) _____

External Improvements to Accessory Building (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) Marion J. Johnson Date 7-24-08

Address to send permit 2401 Campbell Dr. Oakland, WI ATACH _____

* See Notice on Back 54806 if you previously purchased the property Attach a Copy of Recorded Deed

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number 08-1075 Date 8/06/2008

Date 8/20/08 Permit Number 08-0426 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Meets code requirements per owner's representation. Property has been surveyed existing mobile will be removed prior to new mobile home being placed. New mobile home is to be placed by Travis Tutwiler Date of inspection 8/06/2008. Placed when existing home was; Owner present & firm of rep. & surveyor's were present.

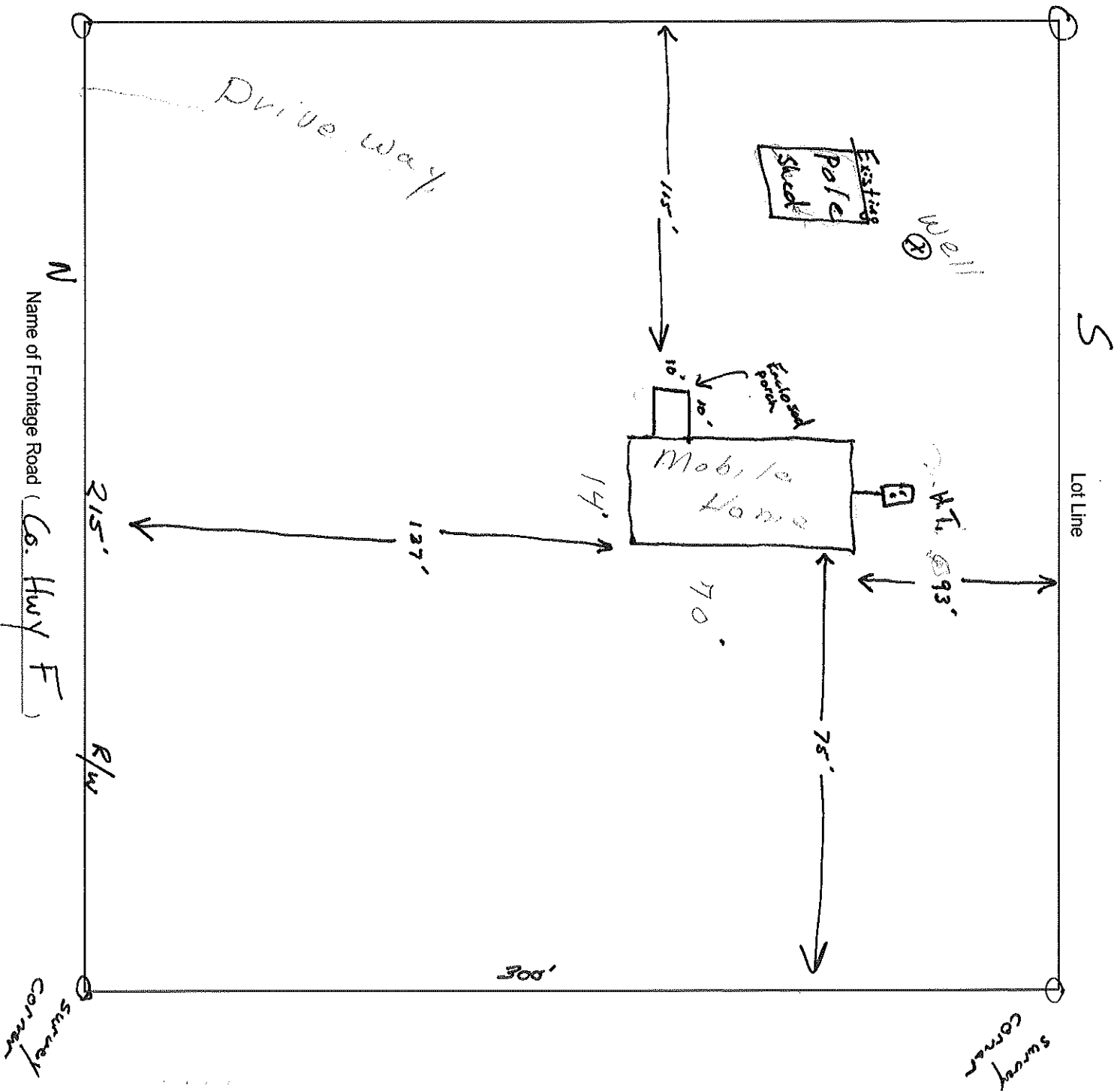
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____

Condition: _____

Signed Travis Tutwiler Inspector 8/19/2008 Date of Approval Issuance

* Substandard lot of record U.350 P.134 recorded on Mar. 20 1981 AUG 19 2008

Secretarial Staff



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.