

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
SEP 18 2009
Bayfield Co. Zoning Dept.

Application No.: 09-0449
Date: _____
Zoning District: F-1
Amount Paid: 75.94/109 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 Pole Shed

Use Tax Statement for Legal Description

Legal Description: N1/4 of SW 1/4 of Section 23 Township 46 North, Range 60 West, Town of Mason
Gov't Lot 1 Block 19.410 Subdivision CSM # 1521 Acreage 19.410

Volume 97 Page 120 of Deeds Parcel I.D. 04-032-2-46-06-23-3 01-000-20000

Property Owner Theodore & Kim Klemel
Address of Property 23315 Faith Church Road
Mason WI 54856

Telephone 715-765-4345 (Home) 209-7225 (Work)
Is your structure in a Shoreland Zone? Yes No If yes, _____

Structure: New Addition Existing
Fair Market Value \$200,000 Square Footage 2120
Basement: Yes No Number of Stories 1
Sanitary: New Existing Privy City _____
Type of Septic/Sanitary System Septic & drain field

- * Residence or Principal Structure (# of bedrooms) _____
- Residence sq. ft. _____
- * Residence w/deck-porch (# of bedrooms) _____
- Residence sq. ft. _____ Porch sq. ft. _____
- Deck sq. ft. _____
- * Residence w/attached garage (# of bedrooms) _____
- Residence sq. ft. _____ Garage sq. ft. _____
- Residential Addition / Alteration (explain) _____
- Residential Accessory Building (explain) Pole Shed Storage
- Residential Accessory Building Addition (explain) _____
- Residential Other (explain) _____

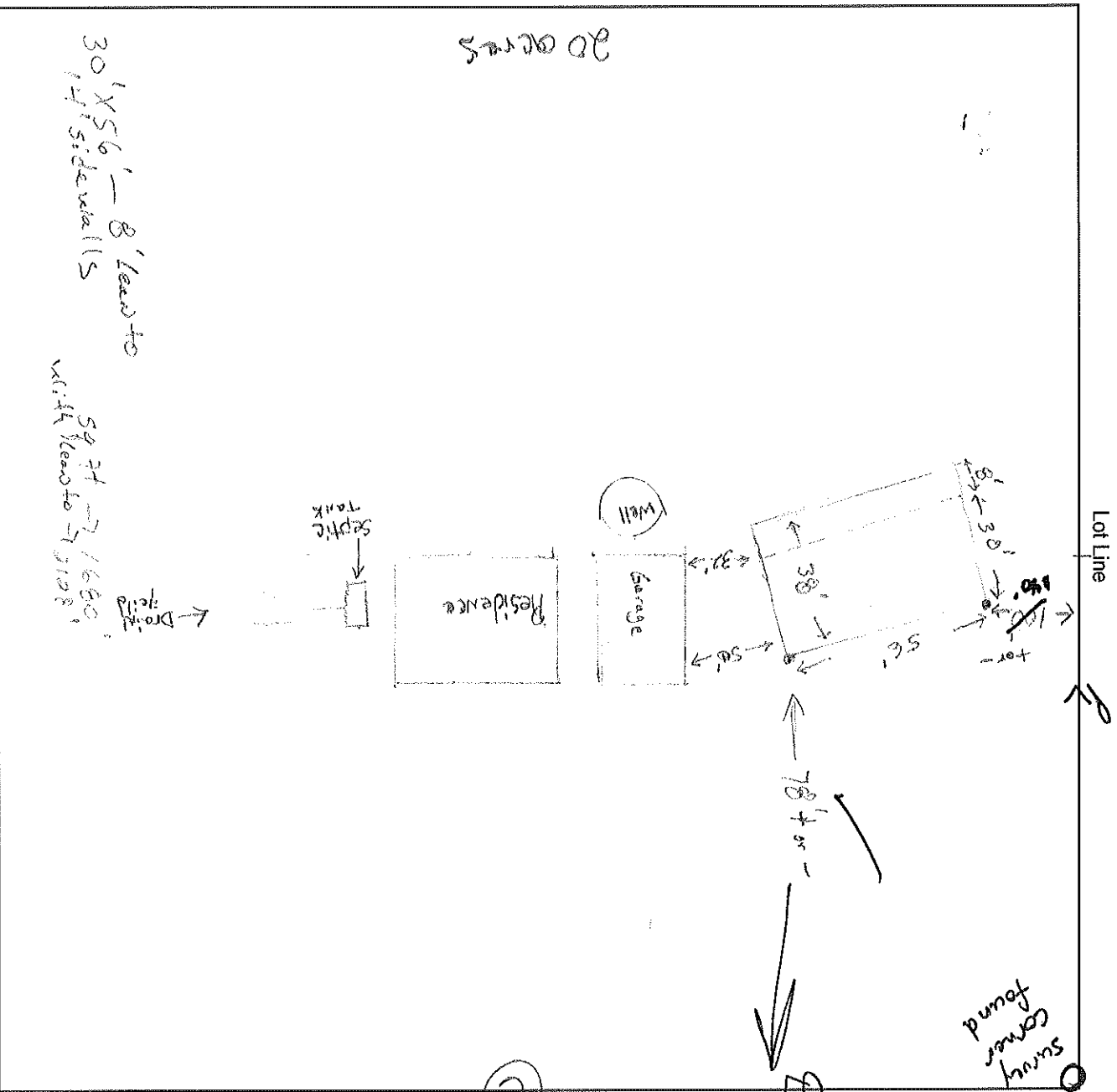
FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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) Theodore & Kim Klemel Date 9-17-09
Address to send permit 23315 Faith Church Road Mason WI 54856 ATTACH

* See Notice on Back Copy of Tax Statement of _____
(If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number _____ Date _____
Date 9/30/09 Permit Number 09-0449 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: Meets code requirements per owner's representation. Proposed structure will be started and new survey corner found. By Travis Tulowitzky Date of inspection 9/24/2009 property has been surveyed.
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: No human habitation.
Signed Travis Tulowitzky Inspector Date of Approval 9/24/2009
Rec'd for Issuance



TM
Name of Frontage Road (Faith Church Rd.)

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

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY FOLLOW
STEPS 1-8 (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, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.