

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**

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 OTHER

Use Tax Statement for Legal Description

Legal Description SE 1/4 of NE 1/4 of Section 9 Township 44E North, Range 6W West, Town of MASON

Gov't Lot 1 Block 147 Subdivision CSM # 1675 Acreage 1.45

Volume 69 Page 341 of Deeds Parcel I.D. 04-032-2-46-06-09-1 04-000-20000

Property Owner MASON TOWNSHIP Contractor KU Tech (Phone) 765-4483

Address of Property Laress Benoit Rd Plumber

MASON WI 54856 Authorized Agent (Phone)

Telephone 765-4657 (Home) 565 (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

Fair Market Value 24999.00 Square Footage 2560 Sanitary: New Existing City Holding Tank

USE: * Residence or Principal Structure (# of bedrooms) Type of Septic/Sanitary System Holding Tank

* Residence sq. ft. Mobile Home (manufactured date)

* Residence w/deck-porch (# of bedrooms) Commercial Principal Building

Residence sq. ft. Commercial Principal Building Addition (explain)

Deck sq. ft. Commercial Accessory Building (explain) Cold Storage

* Residence w/attached garage (# of bedrooms) Commercial Accessory Building Addition (explain)

Residence sq. ft. Commercial Other (explain)

Residential Addition / Alteration (explain) Special/Conditional Use (explain)

Residential Accessory Building (explain) External Improvements to Principal Building (explain)

Residential Accessory Building Addition (explain) External Improvements to Accessory Building (explain)

Residential Other (explain) External Improvements to Accessory Building (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) Martin Hansen Chairman Date 10/16/09

Address to send permit Susan Hiatt 60020 Hanson Rd MASON WI 54856 ATACH

* See Notice on Back Copy of Tax Statement of

APPLICANT — PLEASE COMPLETE REVERSE SIDE Attach a Copy of Recorded Deed

Permit Issued: State Sanitary Number Date

Date 1/18/10 Permit Number 10-0008 Permit Denied (Date)

Reason for Denial:

Inspection Record: Proposed Town bldg was staked and property corners were identified from recent survey. Proposed location appears to meet all required setbacks. Requires Special Use Class B By Travis Tubowatky Date of Inspection 12/04/2009 Permit

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

Condition: Per recorded Affidavit. (No conditions placed x Z.C.)

Signed Travis Tubowatky Inspector Date of Approval 12/29/2009

Date of Approval 12/29/2009

\$125.00

PAID

Application No.: 10-0008
Date:
Zoning District: AG-1
Amount Paid: 125-12/17/09

Class B B.O.A. OTHER

RECEIVED
JAN 13 2009
Bayfield Co. Zoning Dept.

SENT BY ZONING

