

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
 JUN 22 2011

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: 11-0204
 Date: 7-8-11
 Zoning District: A-1
 Amount Paid: \$90.00 EDS
612314



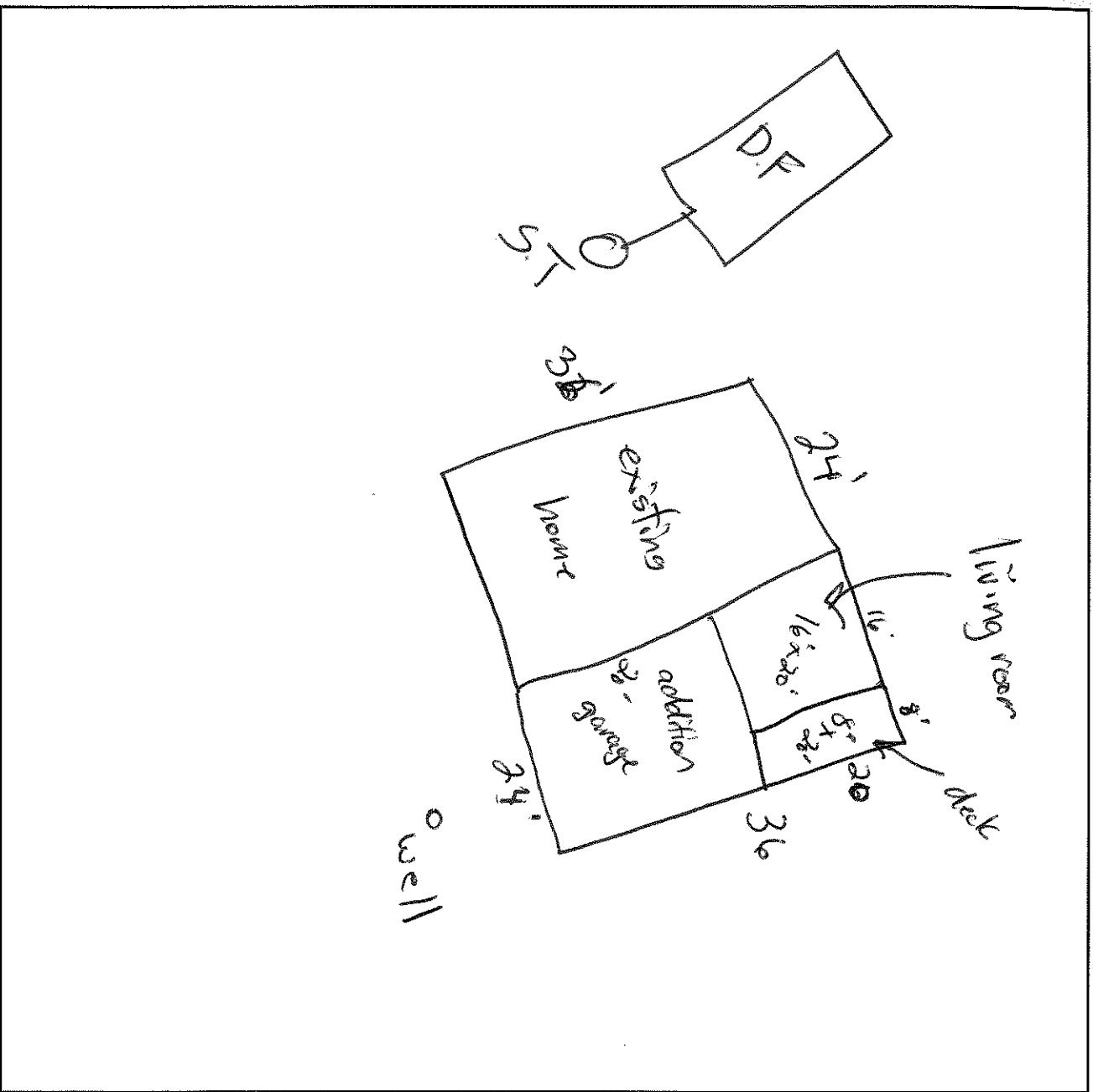
LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER
 Use Tax Statement for Legal Description less V.177, P107
 Legal Description NW 1/4 of SE 1/4 of Section 22 Township 46 North, Range 6 West, Town of Mason
 Gov't Lot 585 Lot 118 Block 118 Subdivision 04-032-2-46-06-22-4 CSM # 02-000-10000 Acreage 39
 Volume 585 Page 118 of Deeds Parcel I.D. 04-032-2-46-06-22-4 02-000-10000
 Property Owner Kit Hill Contractor Dale Alvin (Phone) 763-3110
 Address of Property 22645 Faith Church Rd Plumber _____
Mason, WI 54856 Authorized Agent _____ (Phone) _____
 Telephone 765-4503 (Home) _____ (Work) _____
 Written Authorization Attached: Yes No

Is your structure in a Shoreland Zone? Yes No If Yes: _____
 Structure: New Addition Existing
 Fair Market Value \$30,000 Square Footage 320 sq ft 490 sq ft
 USE: 9'00" x 24' - garage 2-1/2' x 4'
 * Residence or Principal Structure (# of bedrooms) 16' x 20' - living room
 Residence sq. ft. _____ Deck(2) sq. ft. 8' x 30' - deck
 * Residence w/deck-porch (# of bedrooms) _____
 Residence sq. ft. _____ Porch sq. ft. _____
 * Residence w/attached garage (# of bedrooms) _____
 Deck sq. ft. _____
 Residential Addition / Alteration (explain) garage, living room
 Residential Accessory Building (explain) 480 sq ft - 320 sq ft
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) _____
 External Improvements to Accessory Building (explain) _____
 External Improvements to Principal Building (explain) _____
 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) Dale Alvin Date 6-20-11
 Address to send permit Dale Alvin, 20405 S Sweden Rd, Grand View, WI 54839 ATTACH _____
 * See Notice on Back Copy of Tax Statement or _____
 (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT - PLEASE COMPLETE REVERSE SIDE
 Permit Issued: State Sanitary Number 235481 Date 6-20-95
 Date 7-8-11 Permit Number 11-0204 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: will stipend Metcalf attached Property Lines per records
revisions By M. Furtak Date of Inspection 6-20-11
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: _____
 Rec'd for Issuance Signed M. Furtak Date of Approval 6-22-11
JUN -28 2011 Inspector _____
 Secretarial Staff Ken Reader - 1998 Sehracks Ferguson

Lot Line



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.