

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 24 2011

\$125 + \$175 = \$300
 ENTERED

Application No.: 11-0209
 Date: 7-8-11
 Zoning District: A-1
 Amount Paid: \$300.00
 7/5/11

INSTRUCTIONS: No permits will be issued until all fees are paid to Bayfield Co. Zoning Dept. 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 _____
 Use Tax Statement for Legal Description

Legal Description NW 1/4 of SW 1/4 of Section 10 Township 46 North, Range 6 West Town of Mason
 Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____
 Volume 804 Page 95 of Deeds Parcel I.D. 04-033-2-46-06-10-3 02-000-20000

Property Owner Nathan Hittal
 Contractor self
 Address of Property 22085 Becker Rd
 Plumber _____
 Mason, WI. 54856

Telephone 715-252-2120 (Home) SAME (Work)
 Authorized Agent _____ (Phone) _____
 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
 Fair Market Value \$15,000 Square Footage 1196 sq ft Sanitary: New _____ Existing _____ Privy _____ City _____
 USE: _____

* Residence or Principal Structure (# of bedrooms) 3 into residence (26 x 28) = (198 sq ft.)
 * Residence wideck-porch (# of bedrooms) 3 bedrooms
 Residence sq. ft. _____
 Porch sq. ft. _____
 Deck sq. ft. _____ Deck(2) sq. ft. _____

* Residence w/attached garage (# of bedrooms) _____
 Residence sq. ft. _____ Garage sq. ft. _____
 Residential Addition / Alteration (explain) 18' x 26' = 468 sq ft (Kitchen, Living Room)
 Residential Accessory Building (explain) 2 to residence
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) _____
 Commercial Principal Building Addition (explain) _____
 Commercial Accessory Building (explain) _____
 Commercial Accessory Building Addition (explain) _____
 Commercial Principal Building _____
 Commercial Accessory Building Addition (explain) _____
 Commercial Accessory Building (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) Nathan Hittal Date 6-24-11
 Address to send permit 3907 Summit Rd. Ashland WI. 54806
 ATTACH

* See Notice on Back
 APPLICANT - PLEASE COMPLETE REVERSE SIDE
 (If you recently purchased the property Attach a Copy of Recorded Deed)

Permit Issued: State Sanitary Number 425045 Date 9-26-03
 Date 7-8-11 Permit Number 11-0209 Permit Denied (Date) _____

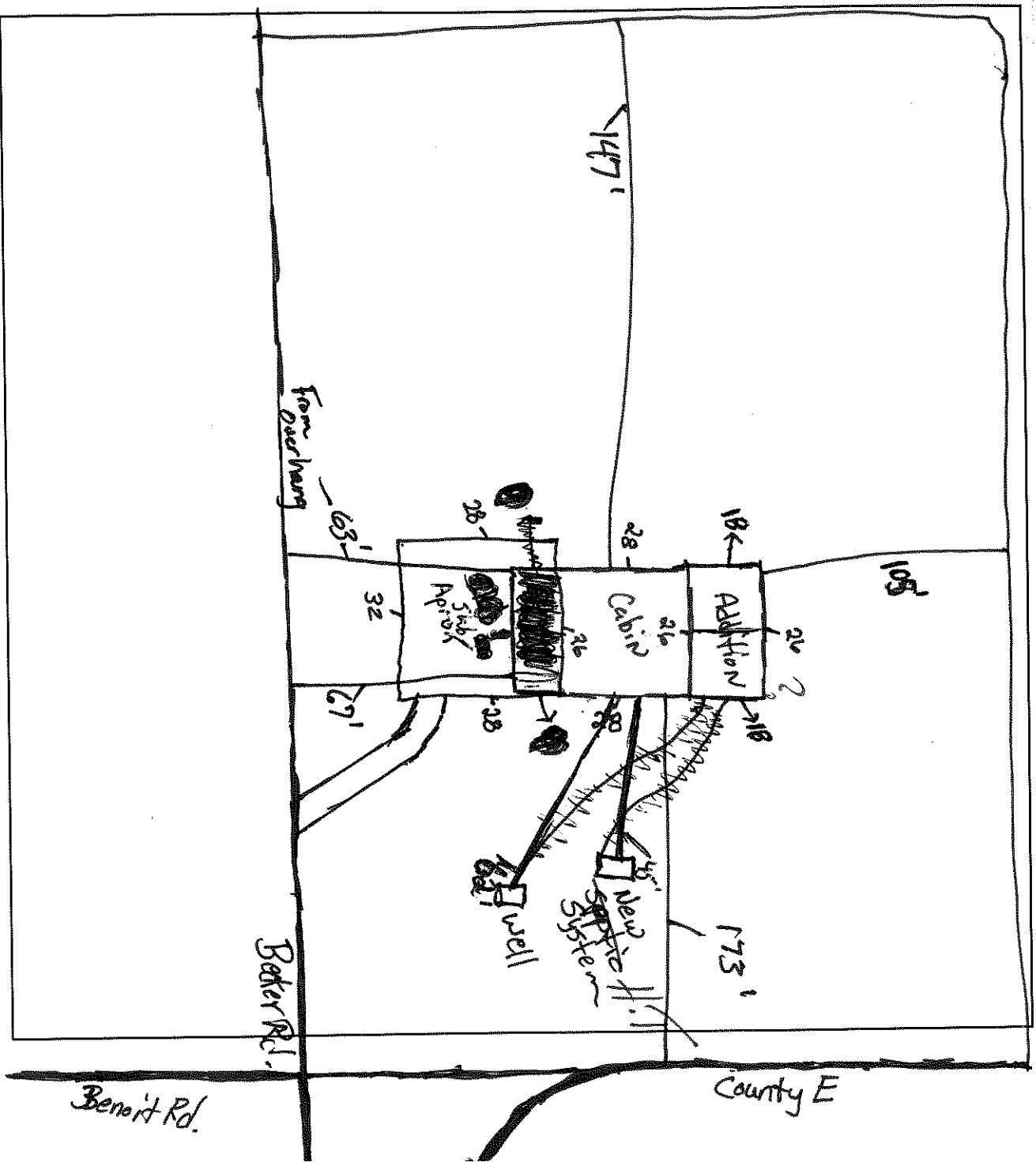
Reason for Denial: _____
 Inspection Record: Metals all outdoors Structure is existing.
 By M. Funtak Date of Inspection 6-29-11

Mitigation Plan Required: Yes No
 Condition: No screen porch on North side of structure.
 Variance (B.O.A.) # _____

Substandard lot V-327 Signed Michael Funtak 7-1-11
 P. 109 Inspector

Mike estimated the fair market value should be \$46,000
 7-8-11

Lot Line



Name of Frontage Road (_____)

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.