

7500

ENTERED

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
 OCT 17 2008

Application No.: 08-0596
 Date: _____
 Zoning District: R-1, Class 1
 Amount Paid: \$75.00 RDS
10/20/08

INSTRUCTIONS: No permits will be issued until all fees are paid. 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
 Legal Description: E 200' of W 400' 1/4 of Section 10 Township 43 North, Range 6 West. Town of Nama Kagon
 Gov't Lot 1 Lot 2 Block _____ Subdivision _____
 Volume 762 Page 344 of Deeds Parcel I.D. # 034-1056-10 990 Use Tax Statement for Legal Description
 Property Owner Keith & Sheri Henry Contractor _____ (Phone) _____
 Address of Property 45010 Bear Point Rd. Plumber _____
Cable, Wisconsin Authorized Agent _____ (Phone) _____
 Telephone 715-798-2218 (Home) 608-219-5109 (Work)

Is your structure in a Shoreland Zone? Yes No If yes, _____
 Structure: New Addition Existing Written Authorization Attached: Yes No
 Estimated Cost of Construction \$2000.00 Square Footage 576 Sanitary: New Existing Privy _____ City _____
 USE: * Residence or Principal Structure (# of bedrooms) _____ Basement: Yes _____ No Number of Stories 1
 * Residence w/deck-porch (# of bedrooms) _____ Mobile Home (manufactured date) _____
 Residence sq. ft. _____ Commercial Principal Building _____
 Deck sq. ft. _____ Porch sq. ft. _____ Commercial Principal Building Addition (explain) _____
 Deck(2) sq. ft. _____ Commercial Accessory Building (explain) _____
 Residence w/attached garage (# of bedrooms) _____ Commercial Accessory Building Addition (explain) _____
 Residence sq. ft. _____ Garage sq. ft. _____ Commercial Other (explain) _____
 Residential Addition / Alteration (explain) _____ Special/Conditional Use (explain) _____
 Residential Accessory Building (explain) garage External Improvements to Principal Building (explain) _____
 Residential Accessory Building Addition (explain) _____ External Improvements to Accessory Building (explain) _____
 Residential Other (explain) _____

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

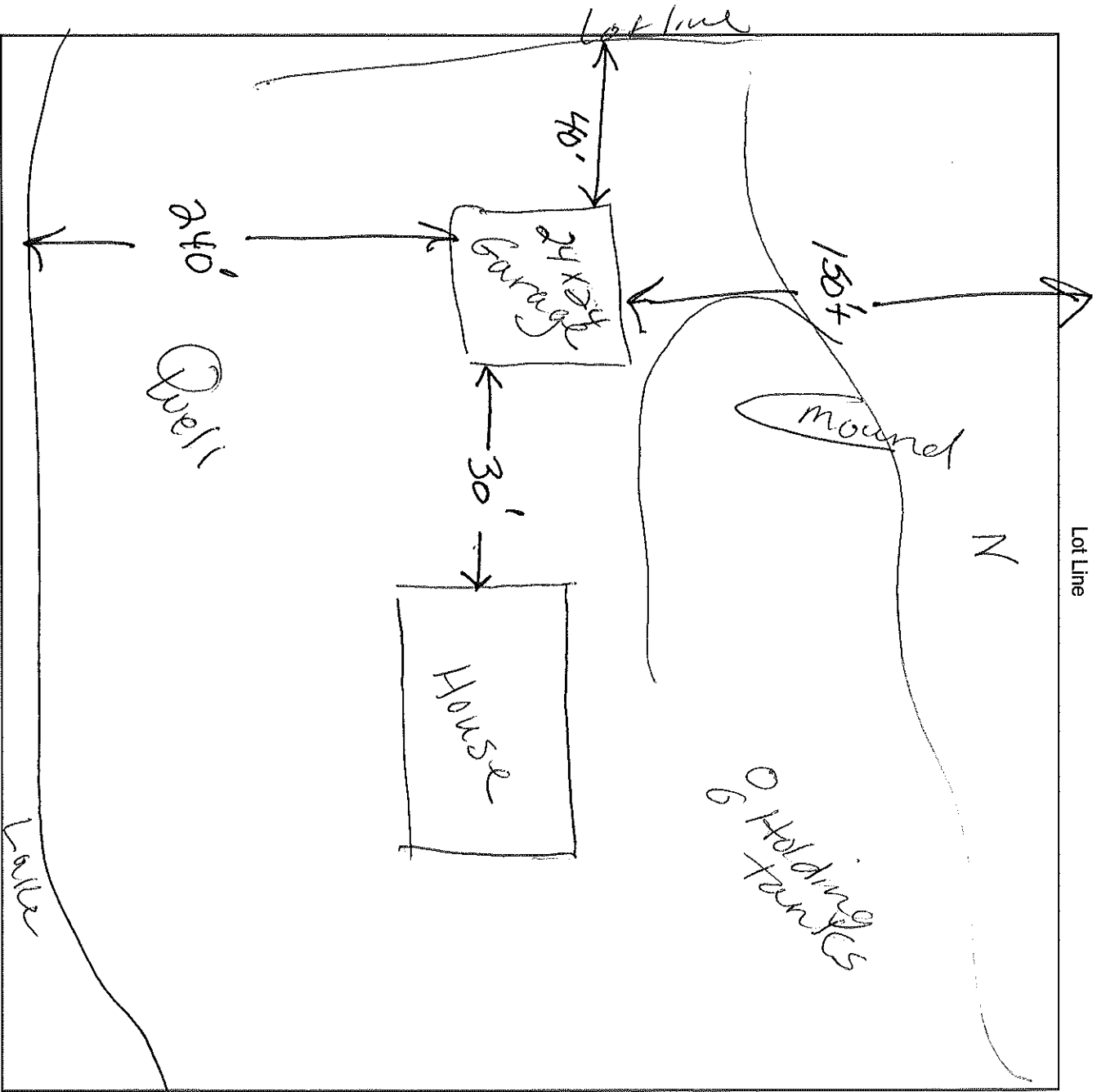
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) 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) Shari L. Henry Date 10/17/08
 Address to send permit 45010 Bear Point Rd Chole, WI 54806 ATTACH
 Copy of Tax Statement
 If you previously purchased the property Attach a Copy of Recorded Deed

* See Notice on Back APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number _____ Date _____
 Date 10/29/08 Permit Number 08-0596 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Meets all setbacks. Property lines per owner's representations. By M. Fuitak Date of Inspection 10-24-08
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: Not to be used for human habitation.
 Signed Michael Fuitak Inspector
 Date of Approval 10-25-08
 Rec'd for Issuance
 OCT 29 2008
 Secretarial Staff

Bear Pt. Rd.



Name of Frontage Road (Bear Pt. 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 - (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.

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

RECEIVED
OCT 15 2008
Bayfield County Zoning Dept.

Application No.: 08-0595
Date: _____
Zoning District: R-1, Class 2
Amount Paid: \$1,500.00 RPS
10/16/08

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 _____

Use Tax Statement for Legal Description

Legal Description 1/4 of 35 1/4 of Section 35 Township 43 North, Range 5 West, Town of NAMAKAGON
Gov't Lot 7 Lot 1+2 Block _____ Subdivision _____
Volume 997 Page 63 of Deeds Parcel I.D. 034-1036-02 970 CSM # _____ Acreage 14.0

Property Owner HERB PILHOFFER Contractor TWORZEK CONST, INC. (Phone) 715-634-3002
Address of Property XXX BUFFALO LAKE RD Plumber LINING WATER PLUMBING & HEATING
Clam Lake, WI 54517 Authorized Agent DAVID TWORZEK (Phone) 715-634-3002

Telephone 651-450-5456 (Home) 651-769-4118 (Work) Written Authorization Attached: Yes No
Is your structure in a Shoreland Zone? Yes No If yes, _____

Structure: New Addition _____ Existing _____
Fair Market Value \$500,000.00 Square Footage 1700 sq. ft.
USE: _____

- * Residence or Principal Structure (# of bedrooms) 3
- Residence sq. ft. 1700
- * Residence w/deck-porch (# of 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) _____
- Residential Accessory Building (explain) _____
- 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) [Signature] Date 10/13/08

Address to send permit 15333 W STATE RD 77, HAYWARD, WI 54843 ATTACH _____
Copy of Tax Statement or _____
(If you recently purchased the property Attach a Copy of Recorded Deed)

* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit issued: State Sanitary Number 08-775 Date 7-1-08
Date 10/29/08 Permit Number 08-0595 Permit Denied (Date) _____

Reason for Denial: _____
Inspection Record: Well staked. Meets all setbacks. Property lines per owners/comptrolors representations. By M. Furtak Date of inspection 10-23-08
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____

Condition: _____
Signed Michael Furtak 10-24-08 Date of Approval _____
Inspector _____
Rec'd for Issuance _____

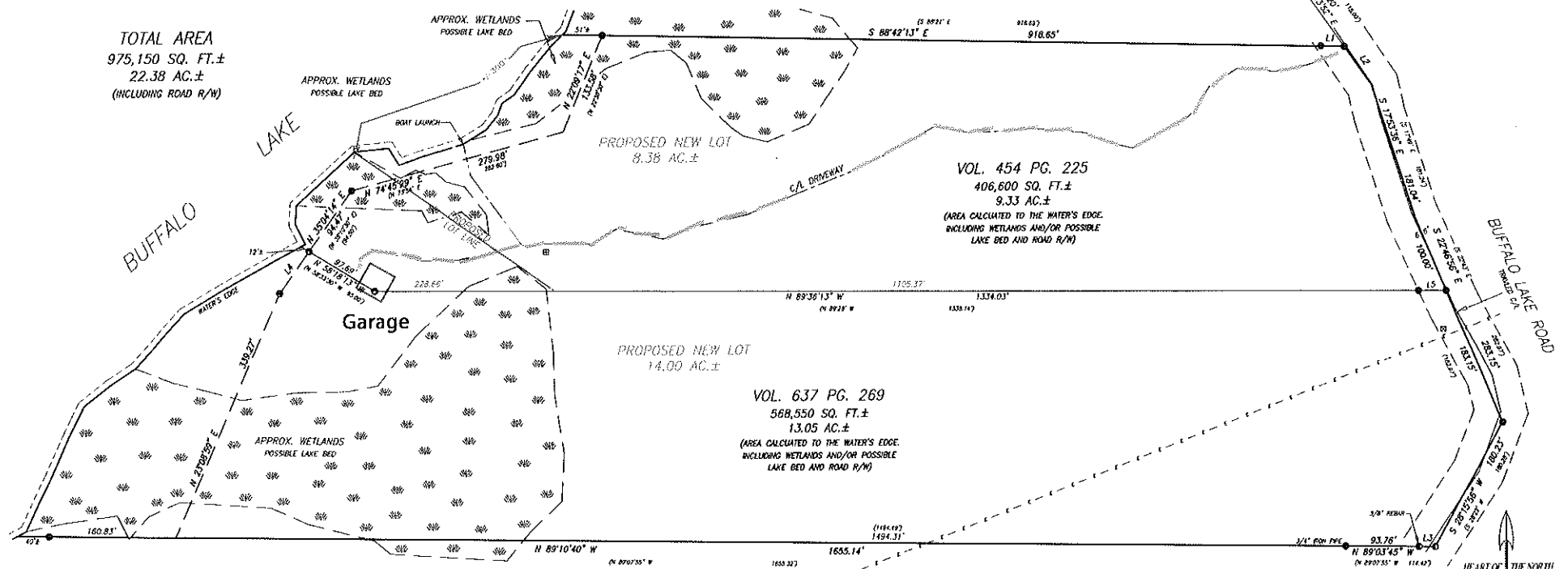
MAP OF SURVEY

PART OF GOV'T. LOT 7, SECTION 35, T. 43 N., R. 5 W., IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN.

LINE	BEARING	DISTANCE	RECORDED DATA
L1	S 08°03'45" E	29.03	S 88°01' E, 30.00
L2	S 35°13'52" E	60.24	S 35°09' E, 60.24
L3	N 89°29'38" W	20.69	N 89°07'55" W
L4	N 35°08'40" E	65.22	S 35°10'30" E, 65.00
L5	N 89°31'56" W	33.00	N 89°28' W, 35.00

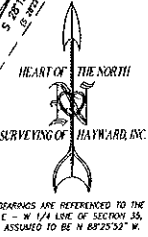
Note:
 Pilhofer owns both lots
 New survey is in process
 Garage dimensions : 34x32 incl Roof overhangs

TOTAL AREA
 975,150 SQ. FT.±
 22.38 AC.±
 (INCLUDING ROAD R/W)



SURVEYOR'S CERTIFICATE
 I, LARRY T. NELSON, REGISTERED LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFY:
 THAT ON THE ORDER OF HERB PILHOFER, I HAVE SURVEYED AND MAPPED A PARCEL OF LAND LOCATED IN GOV'T. LOT 7, SECTION 35, T. 43 N., R. 5 W., IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN.
 THAT THIS MAP IS A TRUE REPRESENTATION OF SAID SURVEY, AND THAT SAID SURVEY AND MAP ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NOTE: WETLAND LOCATIONS ARE APPROXIMATE AND FOR INFORMATIONAL PURPOSES ONLY. CONTACT BAYFIELD COUNTY ZONING DEPARTMENT AND WI DNR FOR ACCURATE WETLAND AND SETBACK BOUNDARIES.



BEARINGS ARE REFERENCED TO THE E - W 1/4 LINE OF SECTION 35, ASSUMED TO BE N 88°25'52" W.

PRELIMINARY

LARRY T. NELSON RLS - 1276

LEGEND	
● FOUND 1" IRON PIPE, UNLESS NOTED	--- O.H. ELEC. LINE
() RECORDED DATA	
WETLANDS	
TELE. PED.	
ELEC. PED.	

CLIENT: HERB PILHOFER

JOB: H08/038
 SCALE: 1" = 100'
 DRAFTED BY: JRN

FILE: T43N43W/SEC35
 FILE: H08_038
 NO. 0-19/PG.46
 SHEET 1 OF 1

**HEART OF THE NORTH
 SURVEYING OF HAYWARD, INC.**

10339 N. DUFFY ROAD HAYWARD, WISCONSIN 54843
 PH: 715/831-2442 FAX: 715/831-8444 E-MAIL: INFO@HONTHSURVEYING.COM