

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department
P.O. Box 58
Washburn, WI 54891
(715) 375-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED

JUL 30 2010

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 5100' of N 1313'

Legal Description 1 1/4 of Section 9 Township 43 North, Range 6 West, Town of Namalakagon

Gov't Lot 1 Lot Block Subdivision CSM # 49 Acreage 1.49

Volume 561 Page 230 of Deeds Parcel I.D. 04-034-2-43-06-09-1 05-001-08000

Property Owner Darwin Thier

Contractor self

Address of Property 44755 Bear Pt. Rd. Plumber Scott Haen

Cable, WI 54821

Telephone 556-5956 (Home) 563 451-7683 (Cell)

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 \$9,600 Square Footage 399.75 roof

Sanitary: New Existing Privy City

USE: * Residence or Principal Structure (# of bedrooms) new slab 5' x 17.5' = 87.5

Type of Septic/Sanitary System Conv

Mobile Home (manufactured date)

* Residence w/deck-porch (# of bedrooms) _____

Commercial Principal Building

Residence sq. ft. _____

Commercial Principal Building Addition (explain) _____

Residence sq. ft. _____

Commercial Accessory Building (explain) _____

Deck sq. ft. _____

Commercial Accessory Building Addition (explain) _____

* Residence w/attached garage (# of bedrooms) _____

Commercial Other (explain) _____

Residence sq. ft. _____

Special/Conditional Use (explain) _____

Residential Addition / Alteration (explain) _____

Residential Accessory Building (explain) Replace shed roof /

External Improvements to Principal Building (explain) _____

Residential Accessory Building Addition (explain) _____

External Improvements to Accessory Building (explain) _____

Residential Other (explain) change roof pitch / slab / shed roof / new door

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) Norman E Thier Date 7-29-10

Copy of Tax Statement or ATTACH

Address to send permit 2228 Dunham Ct, Dubuque, IA 52001

(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 _____ Date _____

Permit Number 10-0274 Permit Denied (Date) _____

Date 8/2/10

Reason for Denial: _____

Inspection Record: Non-conforming structure 43' from OHM.

By M. Fustak Date of Inspection 7-29-10

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

Condition: No expansion of structures footprint. Must implement mitigation plan. (4 prints) (w/ as determined by Bay-Co. Zoning pt permit #03-0225.

Signed Michael Fustak 7-30-10

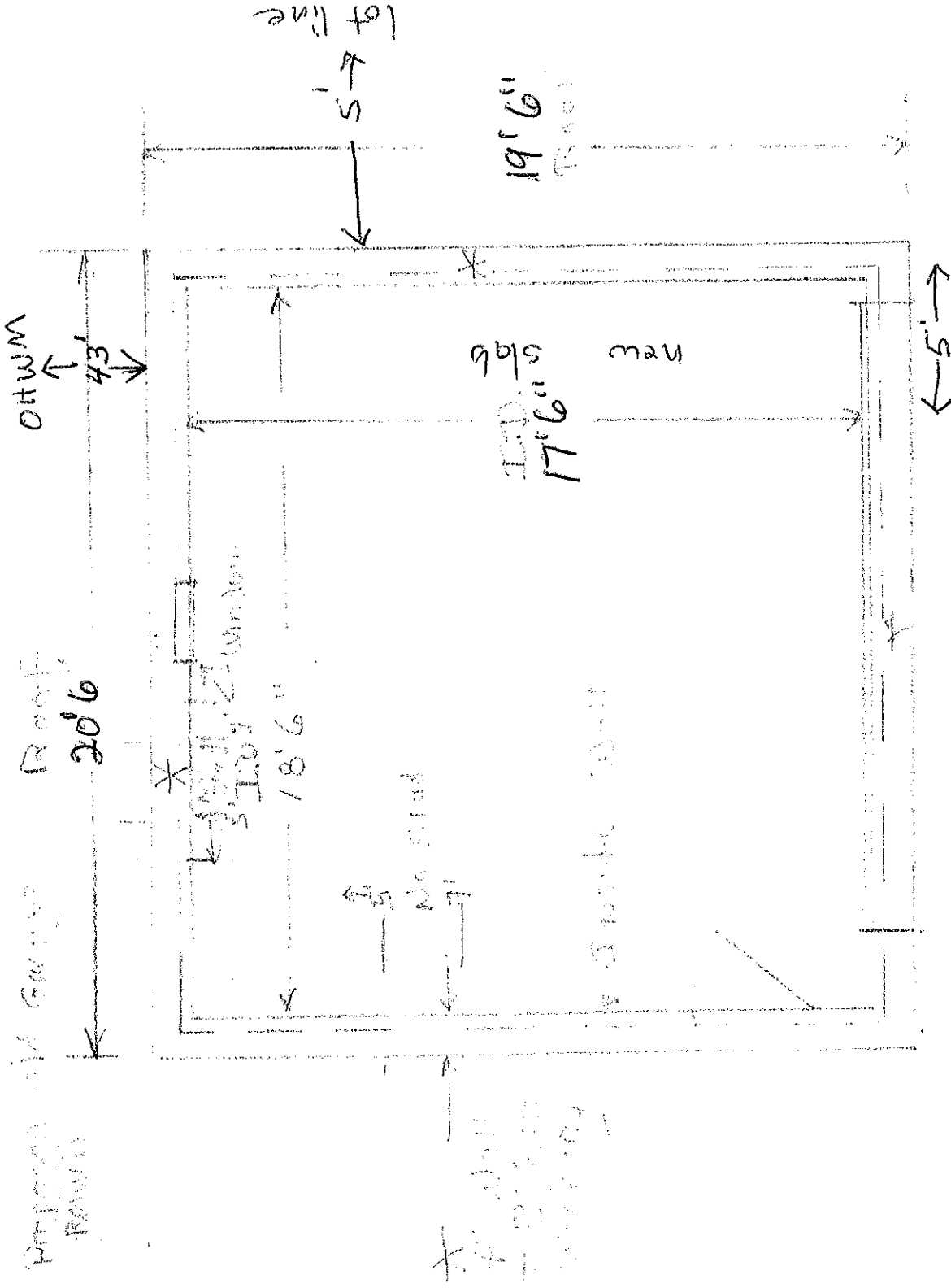
Date of Approval _____

Inspector _____

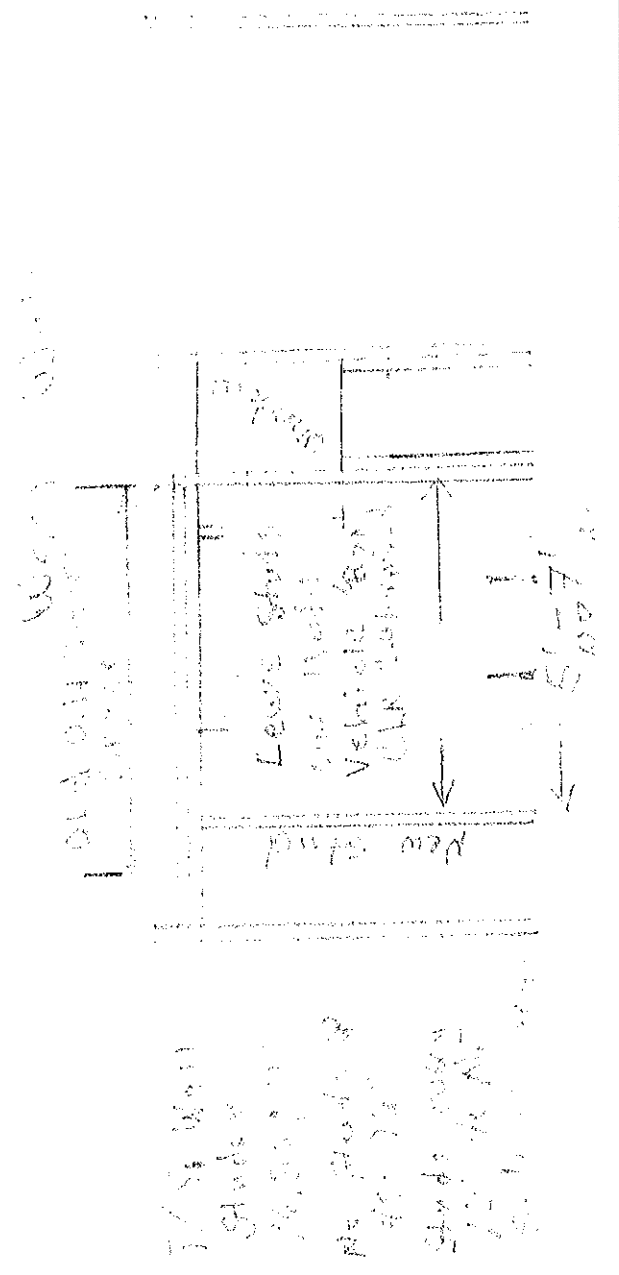
Rec'd for Issuance July 2 2010

Secretary _____

Secretarial Staff _____



South Roof
 width = 8'
 as close to North shed
 as possible



South Roof
 width = 8'
 as close to North shed
 as possible