

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
SEP 15 2010
BY: Zoning

Application No.: 11-0074
Date: _____
Zoning District: RRB, Class 1
Amount Paid: \$75.00 PDS
4/25/11

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 _____ 1/4 of Section 07 Township 43 North, Range 05 West, Town of Nannakagon
Gov't Lot _____ Lot 4 Block 5 Subdivision Nannakagon Village # Acreage .2

Volume 544 Page 296 of Deeds Parcel I.D. Tax # 25187 PIN: 04-034-2-43-05-07-3 00-229-13000
Property Owner Judith Jacobs / Duane Kogner Contractor SELF (Phone) _____

Address of Property Cable, W1 54821 Plumber _____
Cable, W1 54821 Authorized Agent _____ (Phone) _____

Telephone 715-794-2727 (Home) _____ (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 garage Addition _____ Existing _____ Number of Stories 1
Fair Market Value \$20,000 Square Footage 576 Basement: Yes _____ No
Sanitary: New Existing _____ Privy _____ City _____
Type of Septic/Sanitary System holding tank, 2000 gal.

- * Residence or Principal Structure (# of bedrooms) _____
- Residence sq. ft. _____
- * 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) Garage 24'x24'
- Residential Accessory Building Addition (explain) _____
- Residential Other (explain) _____
- Commercial Principal Building _____
- 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) garage
- 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) Judith M. Jacobs / Duane Kogner Date 9-9-10
Address to send permit McKinney Kelly, PO Box 97, Cable, WI 54821 ATTACH 4-25-11

* See Notice on Back
APPLICANT - PLEASE COMPLETE REVERSE SIDE
Copy of Tax Statement or Attach a Copy of Recorded Deed

Permit Issued: _____ State Sanitary Number 10-1105 Date 9-29-10
Date 4-27-11 Permit Number 11-0074 Permit Denied (Date) _____

Reason for Denial: _____
Inspection Record: Well started Property Lines process representative
Michael Jacobs/Duane Kogner BY MM Funtal Date of Inspection 4-25-11
Mitigation Plan Required: Yes No Variance (B.O.A.) # 10-09B
Condition: see BOA decision & approval

Signed Michael Jacobs Date of Approval 4-25-11
Inspector _____
Rec'd for Issuance _____
APR 26 2011

Secretarial Staff