

**SUBMIT - COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:**  
 Bayfield County  
 Planning and Zoning Depart.  
 PO Box 58  
 Washburn, WI 54891  
 (715) 373-6138

**Class A**  
**APPLICATION FOR PERMIT**  
 BAYFIELD COUNTY, WISCONSIN  
**RECEIVED**  
 Date: MAR 27 2012  
 Bayfield Co. Zoning Dept.

Permit #:	12-0076
Date:	4-20-12
Amount Paid:	4/17/12 \$175.00 PDS
Refund:	

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.  
 HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/ass)

**TYPE OF PERMIT REQUESTED:**  LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER

Owner's Name: Brett Gilmore Mailing Address: 2338 130th St. Albion, IA 50005 Telephone: (641) 750-0162 cell

Address of Property: 45750 Co Hwy D City/State/Zip: Albion, IA 50005 Cell Phone: 750-0162 cell

Contractor: BMW Builders, Inc Contractor Phone: 794-2126 Plumber: Cable WI 54821 Pumper Phone:

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Bill Walsh Agent Phone: 794-2126 Agent Mailing Address (include City/State/Zip):  Written Authorization Attached  Yes  No

PROJECT LOCATION: SE 1/4, NE 1/4 Gov't Lot: 2 Lot(s): 7 CSM:  Vol & Page:  Lot(s) No.:  Block(s) No.:  Subdivision:  Recorded Document: (i.e. Property Ownership) 1058 Page(s) 891

Section 2, Township 43 N, Range 6 W Town of: Nawakagon

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?  If yes---continue -->

Is Property/Land within 1000 feet of Lake, Pond or Flowage  If yes---continue -->

Distance Structure is from Shoreline:  feet  
 Distance Structure is from Shoreline:  feet

Is Property in Floodplain Zone?  Yes  No  
 Are Wetlands Present?  Yes  No

Value at Time of Completion * include donated time & material	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
\$	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: <u></u>	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (exists) Specify Type: <u></u>	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> No Basement	<input type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/> Privy (Priv) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant to it) Length:  Width:  Height:

Proposed Construction: Length:  Width:  Height:

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	( <u></u> X <u></u> )	
<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.) with Loft	( <u></u> X <u></u> )	
<input type="checkbox"/>	with a Porch	( <u></u> X <u></u> )	
<input checked="" type="checkbox"/>	Residential Use with (2 <sup>nd</sup> ) Porch with a Deck with (2 <sup>nd</sup> ) Deck with Attached Garage	( <u>70 x 60</u> )	<u>4,200</u>
<input type="checkbox"/>	Commercial Use Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( <u></u> X <u></u> )	
<input type="checkbox"/>	Mobile Home (manufactured date) <u></u>	( <u></u> X <u></u> )	
<input type="checkbox"/>	Addition/Alteration (specify) <u></u>	( <u></u> X <u></u> )	
<input type="checkbox"/>	Accessory Building (specify) <u></u>	( <u></u> X <u></u> )	
<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) <u></u>	( <u></u> X <u></u> )	
<input checked="" type="checkbox"/>	Special Use: (explain) <u>Shoreland grading</u>	( <u>12 x 65</u> )	<u>780</u>
<input type="checkbox"/>	Conditional Use: (explain) <u></u>	( <u></u> X <u></u> )	
<input type="checkbox"/>	Other: (explain) <u></u>	( <u></u> X <u></u> )	

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(s): W.D. Gilmore Date 3-27-12  
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: W.D. Gilmore Date 3-27-12  
 Record for Issuance: 4590 Only Hwy D, Cable ID# 54821  
 Address to send permit 4590 Only Hwy D, Cable ID# 54821 Attach Copy of Tax Statement  
 APR 20 2012 Rick Or 79 If you recently purchased the property send your Recorded Deed 15501 4/20/12  
 Secretarial Staff APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE