

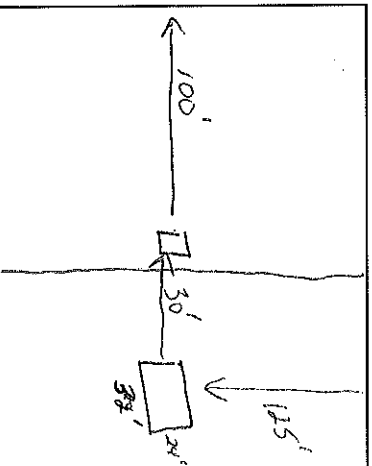
# BAYFIELD COUNTY SANITARY PERMIT APPLICATION

ENTERED

<b>I. APPLICATION INFORMATION</b> (Please Print All Information)		Soil Test No: <u>          </u>	County Permit No: <u>08-0315</u>
Property Owner's Name <u>Monte Chapman 376</u>		County: <u>JUN 16 2008</u>	<b>Bayfield</b>
Address of Property <u>Old 13</u>		Property Location: <u>NW 1/4 NE 1/4 S 07 T 49 N R 09 E (or) W</u>	
Property Owner's Mailing Address <u>7911 Oak St</u>		Township <u>Orient</u>	Gov. Lot #: <u>          </u>
City, State <u>Darabara WI</u>	Zip Code <u>54830</u>	Lot # <u>          </u>	Block #: <u>          </u>
<b>II. TYPE OF BUILDING:</b> (Check One)		Parcel ID <u>          </u>	Subdivision Name or CSM #: <u>          </u>
<input type="checkbox"/> State Owned <input type="checkbox"/> Public (Explain the use/purpose <u>          </u> ) <input checked="" type="checkbox"/> 1 or 2 Family Dwelling - No. of Bedrooms <u>2</u>		Tax Number(s): <u>01-036-3-49-09-07-1 01-000-10000</u>	
<b>III. TYPE OF PERMIT:</b> (Check only one box on line A. Check box on line B, if applicable)			
A) <input checked="" type="checkbox"/> New		<input type="checkbox"/> County Private Interceptor	
1. <input type="checkbox"/> Reconnection		2. <input type="checkbox"/> Repair	
3. <input type="checkbox"/> Revision		** <input type="checkbox"/> Transfer of Owner (List Previous Owner below)	
B) <input type="checkbox"/> A Sanitary Permit was previously issued. <b>Previous Permit Number:</b> <u>          </u>		Date Issued: <u>          </u>	
<b>IV. TYPE OF NON-PLUMBING SYSTEM:</b> (Check One) * Replacements need previous permit number and date filled out above			
C) <input type="checkbox"/> Pit Privy		<input checked="" type="checkbox"/> Vault Privy (Vault size: <u>250</u> gallons or <u>          </u> cubic yards)	
<input type="checkbox"/> Portable Privy (Temporary Use Only)		<input type="checkbox"/> Composting Toilets <input type="checkbox"/> Incinerating Toilet	
<b>V. ABSORPTION SYSTEM INFORMATION:</b>			
1. Gallons Per Day	2. Absorp. Area Required (Sq.Ft.)	3. Absorp. Area Proposed (Sq. Ft.)	4. Loading Rate (Gals. / Day / Sq.Ft.)
			5. Perc. Rate (Min. Inch)
			6. System Elev.(Feet)
			7. Final Grade Elev. (Feet)
<b>VI. TANK INFORMATION:</b>		Total Gallons	
Septic Tank or Holding Tank	Capacity In Gallons New Tanks	# of Existing Tanks	# of Tanks
Lift Pump Tank / Siphon Chamber			
		Manufacturer's Name	Prefab. Concrete
		Site Constructed	Steel
			Fiber-glass
			Plastic
			Exper. App.
<b>VII. RESPONSIBILITY STATEMENT:</b>			
I the undersigned, assume responsibility for installation of the onsite sewage system shown on the attached plans.			
Plumber's / Owner's Name: (Print)		Plumber's / Owner's Signature: (No Stamps) <u>MP/MPRSW No:</u>	
Plumber's Address: (Street, City State, Zip Code)		Home Phone: <u>          </u> Business Phone: <u>          </u>	
<b>VIII. COUNTY / DEPARTMENT USE ONLY</b>			
<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Sanitary Permit/Transfer Fee: <u>\$150.00</u>	Date Issued: <u>7/9/08</u>
	<input type="checkbox"/> Owner Given Initial Adverse Determination	<u>6/16/08</u>	Issuing Agent's Signature / Date: <u>[Signature] / 7-1-08</u>
<b>IX. CONDITIONS OF APPROVAL / REASONS FOR DISAPPROVAL:</b>			
<u>Rec'd for Issuance</u>			
<u>JUL 09 2008</u>			
<u>Secretarial Staff</u>			

Plot Plan on reverse side

Lot Line



← Name of Frontage Road ( Old 13 ) →

**IMPORTANT  
DETAILED PLOT PLAN  
IS NECESSARY, FOLLOW  
STEPS 1-7 COMPLETELY**

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location and size of the building.
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

**Submit To:** Bayfield County Zoning Department, PO Box 58, Washburn, WI 54891  
(715) 373-6138

u/forms/sanitaryapplication1  
June 2006