

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
 MAR 31 2009
 Bayfield Co. Zoning Dept.

ENTERED

Application No. 09-0077
 Date: _____
 Zoning District R-144
 Amount Paid: \$525 4-1-09
mq

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 _____
 Legal Description: S-5 T49 1/4 of Section R9W Township Oriente North, Range _____ West, Town of Okeana
 Gov't Lot 2 Lot 1 Block _____ Subdivision _____ CSM # 1214 Acreage 3.45D
 Volume 7 Page 303 of Deeds 304 Parcel I.D. # 036-1038-02-001 Use Tax Statement for Legal Description _____
 Property Owner Robert A and Kathleen M Olmsted Contractor Economy Garages (Phone) 800-582-3600
 Address of Property Address being applied for Plumber Shil Seletching Plumber
Okeana Lake Rd Authorized Agent N/A (Phone) _____
 Telephone 952-974-0001 (Home) 952-239-1701 (Work) _____
 Is your structure in a Shoreland Zone? Yes No If yes, _____
 Structure: New Addition _____ Existing _____ Basement: Yes _____ No Number of Stories 2
 Estimated Cost of Construction 175,000 Square Footage 2600 Sanitary: New Existing _____ Privy _____ City _____
 USE: _____
 * Residence or Principal Structure (# of bedrooms) _____
 * Residence w/deck-porch (# of bedrooms) _____
 Residence sq. ft. _____ Porch sq. ft. 440
 * Residence w/attached garage (# of bedrooms) _____
 Residence sq. ft. 182 Deck(2) sq. ft. _____
 Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) _____

Residence sq. ft. _____ Garage sq. ft. _____
 Mobile Home (manufactured date) _____
 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) _____
 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) Robert A Olmsted Kathleen Olmsted Date 3/29/09

Address to send permit 8283 Marsh Drive Chanhassen, MN 55317 ATTACH Copy of Tax Statement

* See Notice on Back APPLICANT -- PLEASE COMPLETE REVERSE SIDE If you previously purchased the property Attach a Copy of Recorded Deed

Permit Issued: _____ State Sanitary Number 01-092-5 Date 2007
 Date 4-13-09 Permit Number 09-0077 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: STRUCTURE SEPARATE CONDITIONS AS REPRESENTED BY OWNER - AGREES TO BE CODE COMPLIANT & PERMIT MAY BE ISSUED By DPL Date of Inspection 4-5-09
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: A UNIFORM PRELIMINARY CODE (UD) PERMIT MUST BE OBTAINED PRIOR TO THE START OF CONSTRUCTION FROM THE COUNTY CONTRACTED UDC INSPECTION AGENCY
 Signed [Signature] Inspector [Signature] Date of Approval 4-3-09

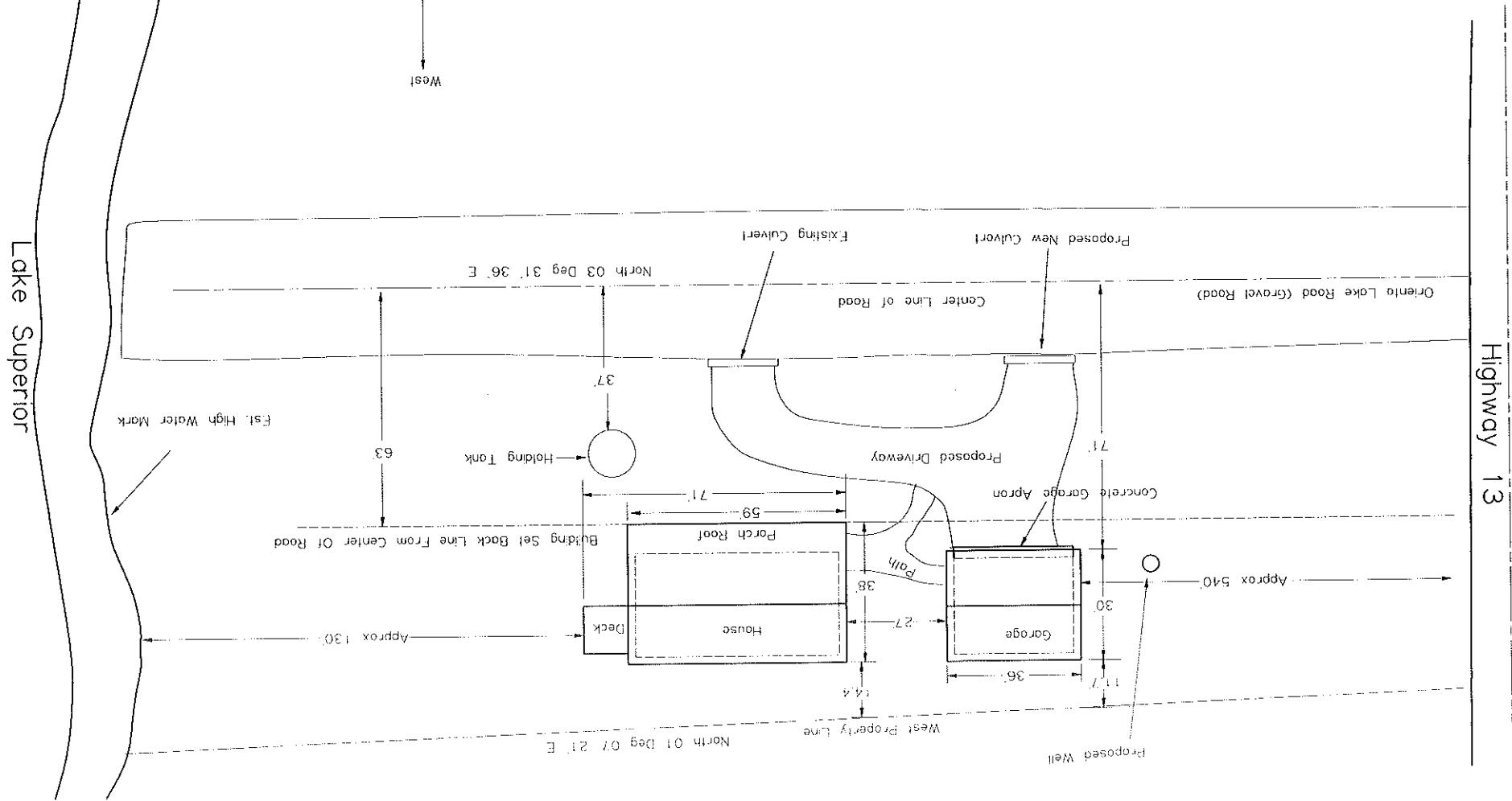
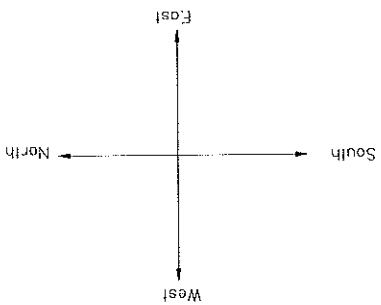
APR 13, 2009

Secretarial Staff

Drawn By: Bob Olmsted

Lot 1 of Certified Survey Map No. 1214
Recorded in Volume 7 of CSM's on Pages 303 and 304

Olmsted Proposed Building Layout March 2009
Lot 101 CSM #1214 Filed in V.7 of CSM P.303 Located in Govt Lot 2 in V.922 P.16



Lake Superior

Highway 13