

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County Zoning Department
 P.O. Box 58
 Washburn, WI 54891
 (715) 573-6138

**APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN**

RECEIVED
 JAN 19 2009
 Bayfield Co. Zoning Dept.

Application No.: 09-00210
 Date: _____
 Zoning District: A-1(-)
 Amount Paid: \$150.00 200
1/19/09 / APP
\$75 / \$75

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: SE 1/4 of SE 1/4 of Section 4 Township 48 North, Range 9 West, Town of OLLU
 Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 470

Volume 864 Page 622 of Deeds Parcel I.D. 038-1008-01
 Property Owner RICHARD BERK Contractor MATTHEW BUILDINGS (Phone) 715-200-371-9055

Address of Property IRON RIVER WIS 57847 Plumber _____
 Telephone 715 372-6047 (Home) _____ (Work) _____ Authorized Agent _____ (Phone) _____

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
 Fair Market Value 16,000 Square Footage 2520
 USE: Residential or Principal Structure (# of bedrooms) _____
 Mobile Home (manufactured date) _____

- 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) TRACTOR, IMPLEMENTS
- 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) _____
- External Improvements to Accessory Building (explain) _____

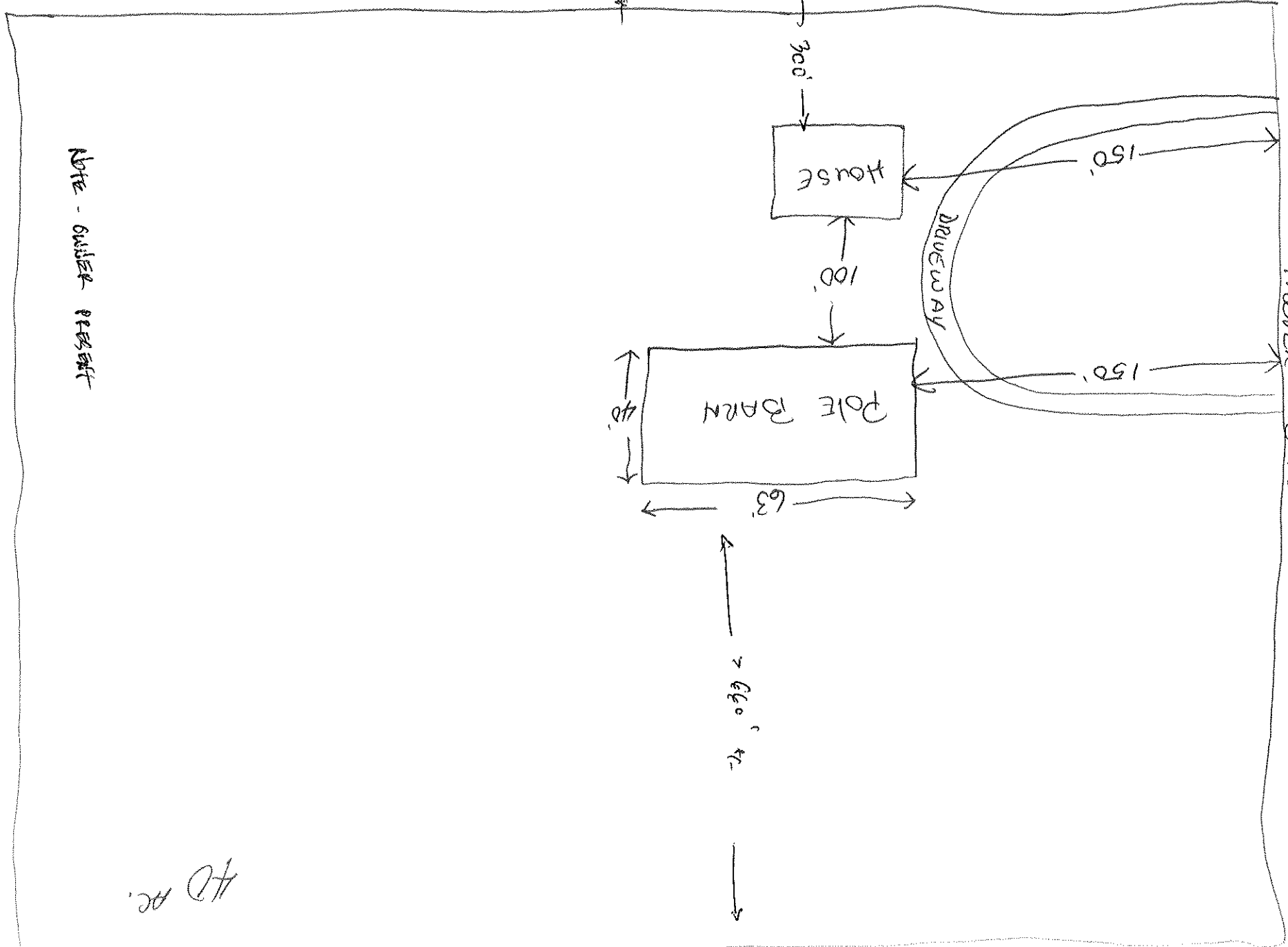
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES.
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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) [Signature] Date 1-19-09

Address to send permit SAME AS ABOVE ATTACH _____
 * See Notice on Back (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT — PLEASE COMPLETE REVERSE SIDE
 Permit Issued: _____ State Sanitary Number _____ Date _____
 Date 1/29/09 Permit Number 09-00210 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: QUICKER SERVICE/CONDITIONS AS REPRESENTED BY OWNER - AGREES TO BE GOE
AWARD BE ISSUED BY DRK DATE OF INSPECTION 1-28-09
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: _____

Signature [Signature] Inspector DRK Date of Approval 1-27-09
JUST LOSS FEES TO SIX(6) MONTHS
A.T.F.
 JAN 24 2009
 Secretarial Staff





oil's
for oil's

oil's
oil's

Note - SWIRE PRESENT

HOUSES BLDG LOCATIONS WILL DETERMINE

40 AC.