

ENTERED

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
OCT 03 2008
Bayfield Co Zoning Dept

Application No.: 08-0650
Date: _____
Zoning District: A9-1/-
Amount Paid: \$500.00 RDS
10/6/08

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 SE 1/4 of SE 1/4 of Section 23 Township 50 North, Range 8 West, Town of Post Wing
Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____
Volume _____ Page _____ of Deeds Parcel I.D. 042-1052-02

Property Owner Glen Fladeboe & Stephanie McLeary Contractor _____ (Phone) _____
Address of Property 11780 N. Sherman Road Plumber _____
Post Wing, WI Authorized Agent _____ (Phone) _____

Telephone (651-288-3262) (Home) (651-208-3262) (Work)

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 \$5,700 Square Footage 288

USE: * Residence or Principal Structure (# of bedrooms) _____
Residence sq. ft. Hunting Shack w 288 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) _____

Residential Accessory Building Addition (explain) _____

Residential Other (explain) _____

Owner or Authorized Agent (Signature) Glen Fladeboe Date 9/30/08

Address to send permit 4151 40th Ave South, Minneapolis MN 55406

* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number 716 Date 1975

Date 12/19/08 Permit Number 08-0650 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: SEWERAGE SEPARATORS/CONDITIONS AS REPRESENTED BY OWNER ATRENS TO BE COE COMPUTED & PERMIT MAY BE ISSUED PENDING CONDITIONS & SANITARY BY DOC

Mitigation Plan Required: Yes No

Condition: A UNIFORM DISBURSING CODE (UOC) PERMIT MAY BE OBTAINED FROM THE WORKING CONTRACTED UOC INSPECTION AGENCY PRIOR TO THE START OF CONSTRUCTION.

Signed [Signature] Inspector _____

Date of Approval 10-8-08/10-21-08

Rec'd for Issuance

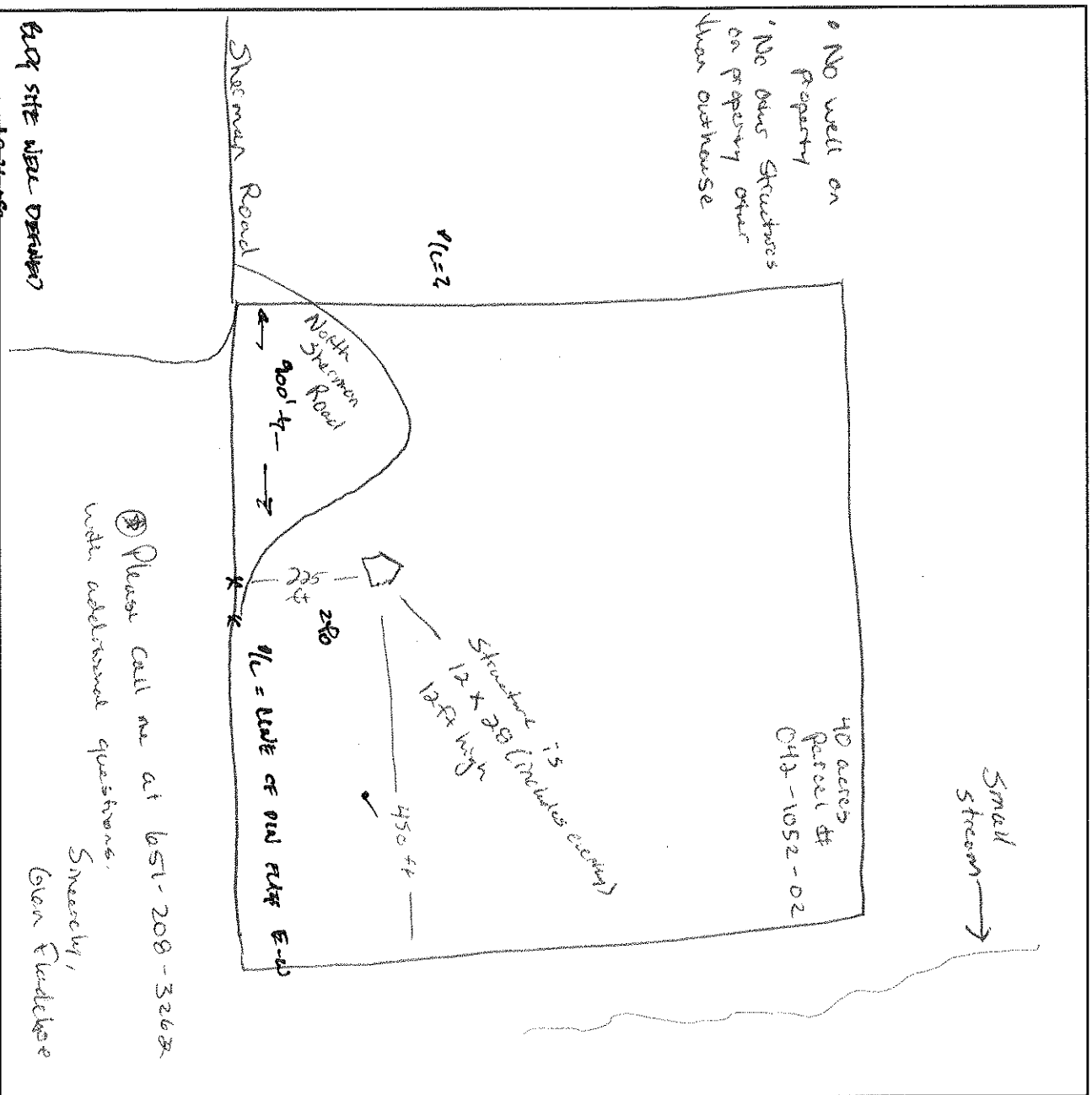
Rec'd for Issuance

DEC 18 2008
Secretarial Staff

FAILURE TO OBTAIN A PERMIT OF 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.

Copy of Tax Statement or Attach a Copy of Recorded Deed

Lot Line



Name of Frontage Road (Sherman Road)

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the location, size and dimensions of the structure.
3. Show the location, size and dimensions of attached deck(s), porch(s) or garage.
4. Show the location of the well, holding tank, septic tank and drain field.
5. Show the location of any lake, river, stream or pond if applicable.
6. Show the location of other existing structures.
7. Show the location of any wetlands or slopes over 20 percent.
8. 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. Holding tank to closest lot line
 - e. Holding tank to building
 - f. Holding tank to well
 - g. Holding 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. Septic Tank and Drain field to closest lot line
 - l. Septic Tank and Drain field to building
 - m. Septic Tank and Drain field to well
 - n. Septic Tank, and Drain field to lake, river, stream or pond.
 - o. Well to building

IMPORTANT
 DETAILED PLOT PLAN
 IS NECESSARY, FOLLOW
 STEPS 1-8 (a-o) COMPLETELY.

*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits.

Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.