

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

Application No: 10-0126  
Date: \_\_\_\_\_  
Zoning District A-1(-)  
Amount Paid: 45-  
5/10/10 mg

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.

**RECEIVED**  
MAY 06 2010

LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER \_\_\_\_\_

Use Tax Statement for Legal Description

Legal Description W-16 NW 1/4 of SE 1/4 of Section 49 Township 49 North, Range 8 West, Town of Port Wing

Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 21.10

Volume \_\_\_\_\_ Page \_\_\_\_\_ Parcel I.D. 66-06-2-49-08 of 02-000-2000

Property Owner John M + Kathleen M Barden Contractor Self (Phone) \_\_\_\_\_

Address of Property Port Wing, WI 54865 Plumber \_\_\_\_\_

Telephone 715-774-3771 (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_ Written Authorization Attached: Yes  No

Distance from Shoreline: greater than 75'  75' to 40'  less than 40'

Structure: New \_\_\_\_\_ Addition \_\_\_\_\_ Existing  Basement: Yes \_\_\_\_\_ No  Number of Stories ( \_\_\_\_\_ )

Fair Market Value 1,000.00 Square Footage 80 Sanitary: New \_\_\_\_\_ Existing  Privy \_\_\_\_\_ City \_\_\_\_\_

USE: \_\_\_\_\_ Type of Septic/Sanitary System ft.

\* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_  Mobile Home (manufactured date) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_  Commercial Principal Building \_\_\_\_\_

\* Residence w/deck-porch (# of bedrooms) \_\_\_\_\_  Commercial Principal Building Addition (explain) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_ Porch sq. ft. \_\_\_\_\_  Commercial Accessory Building (explain) \_\_\_\_\_

Deck sq. ft. \_\_\_\_\_ Deck(2) sq. ft. \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_

\* Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_ Garage sq. ft. \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_

Residential Addition / Alteration (explain) Det  Special/Conditional Use (explain) \_\_\_\_\_

Residential Accessory Building (explain) \_\_\_\_\_  External Improvements to Principal Building (explain) \_\_\_\_\_

Residential Accessory Building Addition (explain) \_\_\_\_\_  External Improvements to Accessory Building (explain) \_\_\_\_\_

Residential Other (explain) \_\_\_\_\_  External Improvements to Accessory Building (explain) \_\_\_\_\_

Owner or Authorized Agent (Signature) Kathleen M Barden Date 5/10/10

Address to send permit P.O. Box 203, Port Wing, WI 54865 ATTACH \_\_\_\_\_  
Copy of Tax Statement or \_\_\_\_\_  
(If you recently purchased the property Attach a Copy of Recorded Deed)

\* See Notice on Back APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_

Date 5/10/10 Permit Number 10-0126 Permit Denied (Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Inspection Record: Structural Services/Individuals As Requested By Owner Appears to be code compliant

A.C.W. Permit only be issued. By DC Date of Inspection 5-7-10

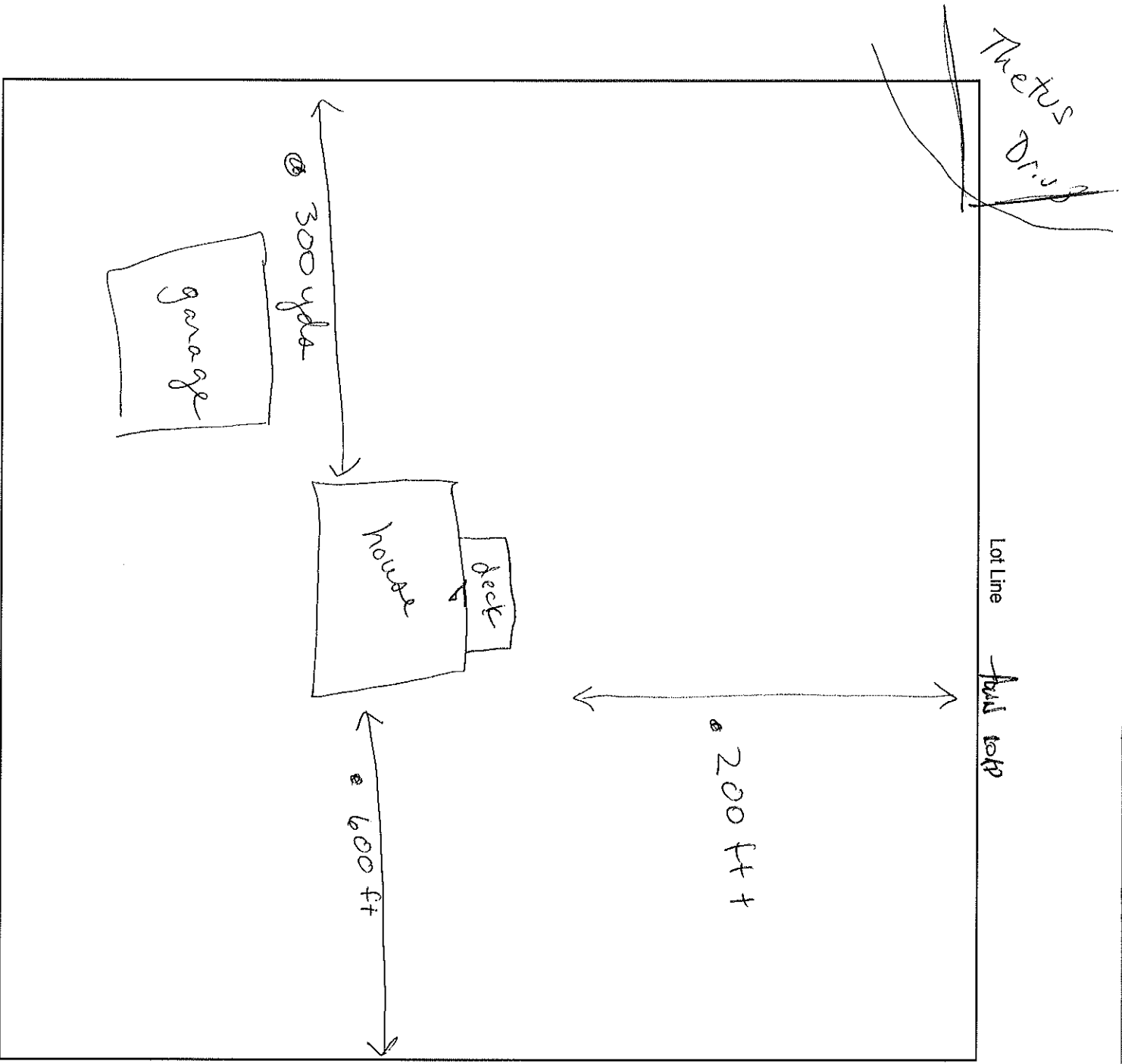
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_

Condition: \_\_\_\_\_

Signed [Signature] Date of Approval 5-7-10  
Inspector \_\_\_\_\_ Rec'd for Issuance \_\_\_\_\_

MAY 10 2010

Secretarial Staff



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.