

BAYFIELD COUNTY

SANITARY PERMIT (#04)-08-111S

STATE SANITARY PERMIT

OWNER: KENNY REV TRUST AGREEMENT

GOV'T LOT: LOT: BLK: 0

CSM:

SUBDIVISION:

NW 1/4 SW 1/4 SEC: 34, T 51 N, R 7 W

TOWNSHIP: CLOVER

SOIL TEST: 119-08

REPLACEMENT SYSTEM

SYSTEM TYPE: Holding Tank

PLUMBER: DENNIS BACHAND

CECE TESKY

Authorized Issuing Officer

DATE: 8/6/2008

CHAPTER 145.135(2) WISCONSIN STATUTES

- a. The purpose of the sanitary permit is to allow installation of the private sewage system described in the permit.
- b. The approval of the sanitary permit is based on regulations in force on the date of approval.
- c. The sanitary permit is valid and may be renewed for specified period.
- d. Changed regulations will not impair the validity of a sanitary permit.
- e. Renewal of the sanitary permit will be based on regulations in force at the time renewal is sought, and that changed regulations may impede renewal.
- f. The sanitary permit is transferable.

History: 1977 c. 168; 1979 c. 34,221; 1981 c. 314

Note: If you wish to renew the permit, or transfer ownership of the permit, please contact the county authority.

PREVIOUS PERMIT #:

LICENSE: # 221446

Condition: SUBJECT TO CONDTIIONS ON APPROVAL LETTER

THIS PERMIT EXPIRES 8/6/2010

POST IN PLAIN VIEW

MUST BE VISIBLE FROM ROAD FRONTING THE LOT DURING CONSTRUCTION

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
 JUL 2 4 2008
 Bayfield Co. Zoning Dept.

Application No.: 08-0381
 Date: _____
 Zoning District: A-1/-
 Amount Paid: \$7500 RDS
7/25/08

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 NW 1/4 of Section 3 Township 51 North, Range 04 West, Town of Russell

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 40 acres

Volume _____ Page _____ of Deeds _____ Parcel I.D. 040462510408207000 10000

Property Owner David Johnson Contractor David Johnson (Phone) (715) 774-5882

Address of Property c/o county k Plumber Eo Niobleski

Telephone (715) 774-5882 (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 _____ Basement: Yes _____ No Number of Stories 1
 Fair Market Value 20,000.00 Square Footage 1500 sq ft Sanitary: New Existing City _____
USE: Type of Septic/Sanitary System

- * Residence or Principal Structure (# of bedrooms) _____
- 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) Garage
- Residential Accessory Building Addition (explain) _____
- Residential Other (explain) _____

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.

Owner or Authorized Agent (Signature) David G. Johnson Date July 24, 2008

Address to send permit P.O. Box 1151 Bayfield WI 54914 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 7/31/08 Permit Number 08-0381 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Structural Services/Calculations AS PERMITTED BY OWNER AGREES TO ACCEPT CODE
LAWS + PERMIT MAY BE ISSUED BY DDC Date of Inspection 7-28-08

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

Condition: _____

Signed [Signature] Inspector _____ Date of Approval 7-28-08

23 ✓

Rec'd for Issuance

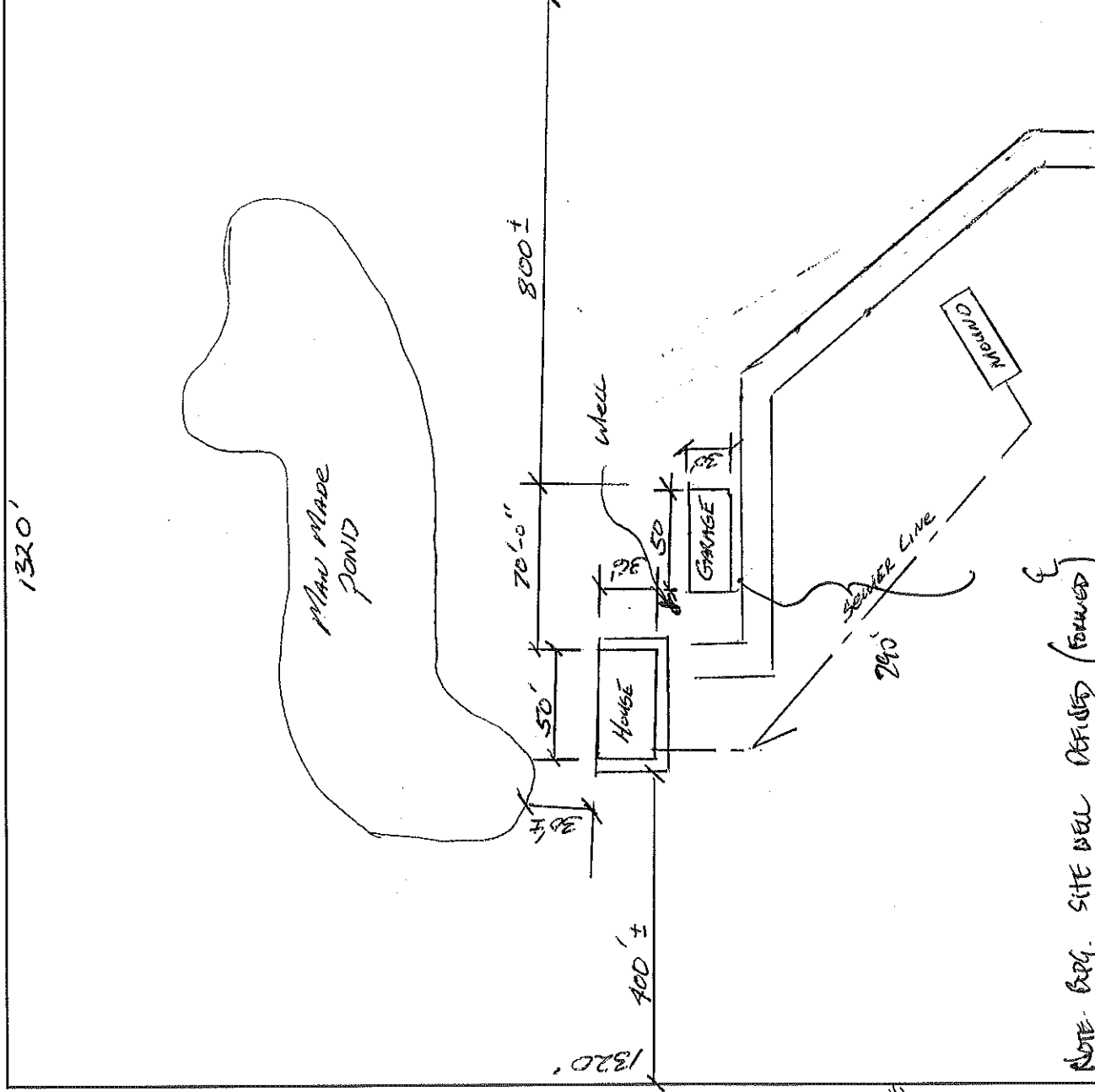
tx st. w/ other AP.

JUL 31 2008

23

Lot Line

1320'



9/2 TREE
SIDE
REPRESENTED

NOTE: BLDG. SITE WELL REFUSED (FORWARD)

Name of Frontage Road (OLD CEMETERY K)

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:
 - 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

- 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

*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.

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

Application No. 08-0391
Date: _____
Zoning District A-1/-
Amount Paid: \$125.00 ROS
7/28/08

RECEIVED
JUL 28 2008

INSTRUCTIONS: No permits will be issued until all fees are paid to Bayfield Co. Zoning Dept.
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 W 1/2 NE NE 1/4 of Hwy 13 1/4 of Section 26 Township S1N North, Range 4W West, Town of Russell
Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 6.05
Volume _____ Page _____ of Deeds Parcel I.D. 04-046-2-51-04-26-1 01-000-40000

Property Owner Maynard Franks
Address of Property 35800 St Hwy 13
Bayfield, WI 54814
Contractor Maynard Franks (Phone) _____
Plumber None
Authorized Agent None (Phone) _____

Telephone 779-3415 (Home) Same (Work) _____
Is your structure in a Shoreland Zone? Yes No **if yes.**

Structure: New Addition _____ Existing _____
Fair Market Value 8,000 Square Footage 1,600
USE: _____
 * Residence or Principal Structure (# of bedrooms) _____
 * Residence w/attached garage (# of bedrooms) _____
 * Residence w/deck-porch (# of bedrooms) _____
 * Residential Addition / Alteration (explain) _____
 * Residential Accessory Building (explain) _____
 * Residential Accessory Building Addition (explain) _____
 * Residential Other (explain) _____

Residence sq. ft. _____ Porch sq. ft. _____
Deck(2) sq. ft. _____
Residence sq. ft. _____ Garage sq. ft. _____
 Commercial Principal Building
 Commercial Principal Building Addition (explain)
 Commercial Accessory Building (explain) Quonset for equipment storage
 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
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Owner or Authorized Agent (Signature) Maynard Franks Date 07-25-2008
Address to send permit 35800 St Hwy 13, Bayfield, WI 54814 ATACH
Copy of Tax Statement or Attach a Copy of Recorded Deed

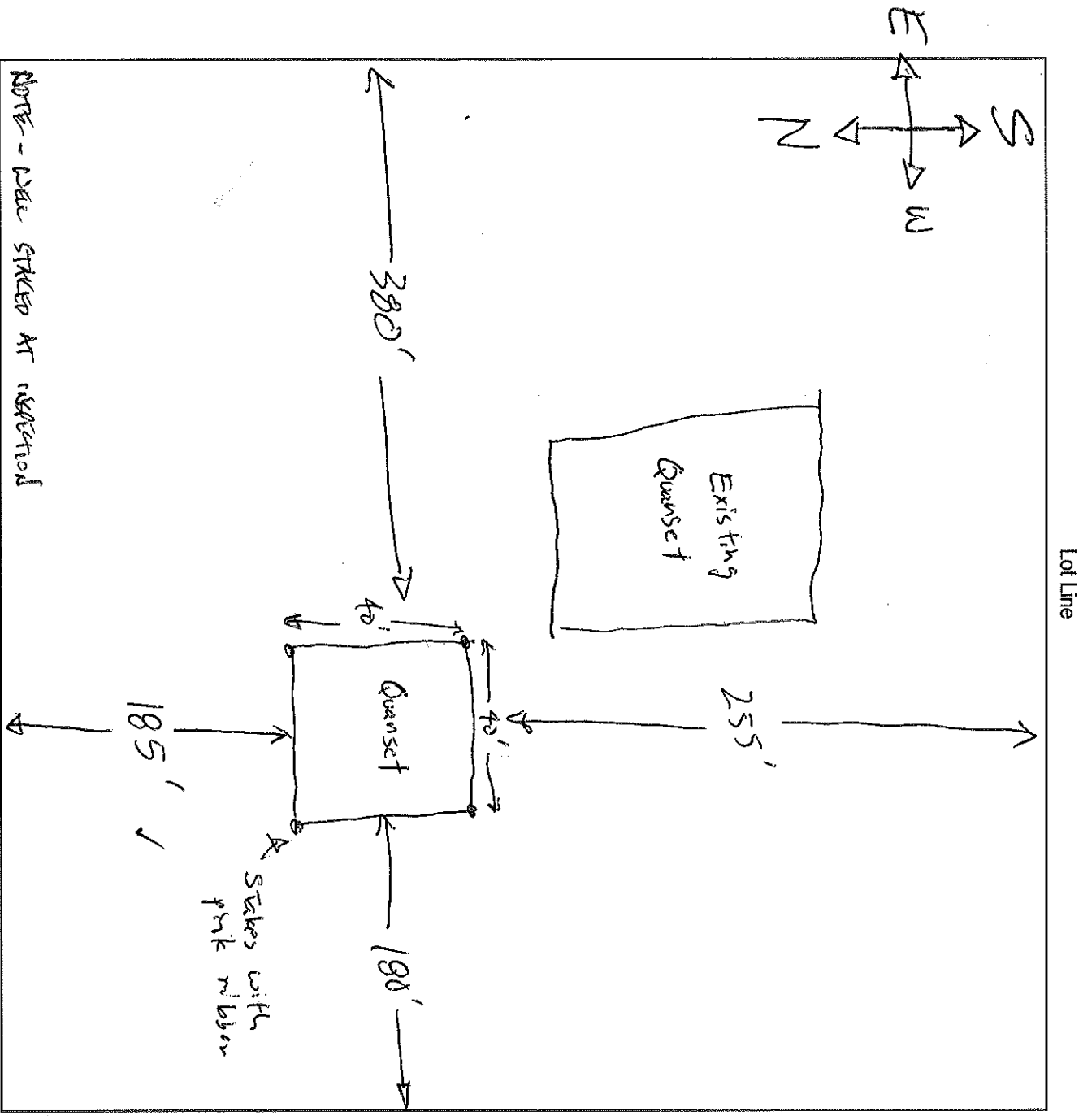
* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit issued: _____ State Sanitary Number _____ Date _____
Date 8/6/08 Permit Number 08-0391 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: Structural Swikes/conditions as represented by asst - agrees to be code compliant & permit may be issued By DC Date of inspection 8-1-08
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: _____
Signed [Signature] Inspector _____ Date of Approval 8-1-08
Rec'd for Issuance
MANUELA

AUG 05 2008

23



Name of Frontage Road (ST. HUBY 13)

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.

ENTERED

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

RECIVED
JUL 15 2008
Bayfields Co. Zoning Dept.

Application No.: 08-0397
Date: R-RB/-
Zoning District: R-RB/-
Amount Paid: \$75.00 RAS
7/15/08

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
Legal Description NW 1/4 of SE 1/4 of Section 33 Township 52 North, Range 4 West, Town of Russell
Gov't Lot 524 Lot 13 Block 33 Subdivision 34 CSM # 34 Acreage 34
Volume 524 Page 13 of Deeds 33 Parcel I.D. # 04-016-2-52-01-33-4-02-600-1000 Use Use Tax Statement for Legal Description
Property Owner Aron T. Cote Contractor Bruce Geibel (Phone) 715-595-4888
Address of Property 94480 Little Sand Bay Rd Plumber None
Bayfield Authorized Agent _____ (Phone) _____

Telephone 715-559-4633 (Home) 715-595-4633 (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 Basement: Yes No Number of Stories 1
Estimated Cost of Construction 15,000 Square Footage 256 Sanitary: New Existing Privy City
USE: privy tank

* Residence or Principal Structure (# of bedrooms) _____
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) air lock entry
Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) _____

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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 7-17-08
Address to send permit 28514 230th Ave Holcombe WI 54745 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

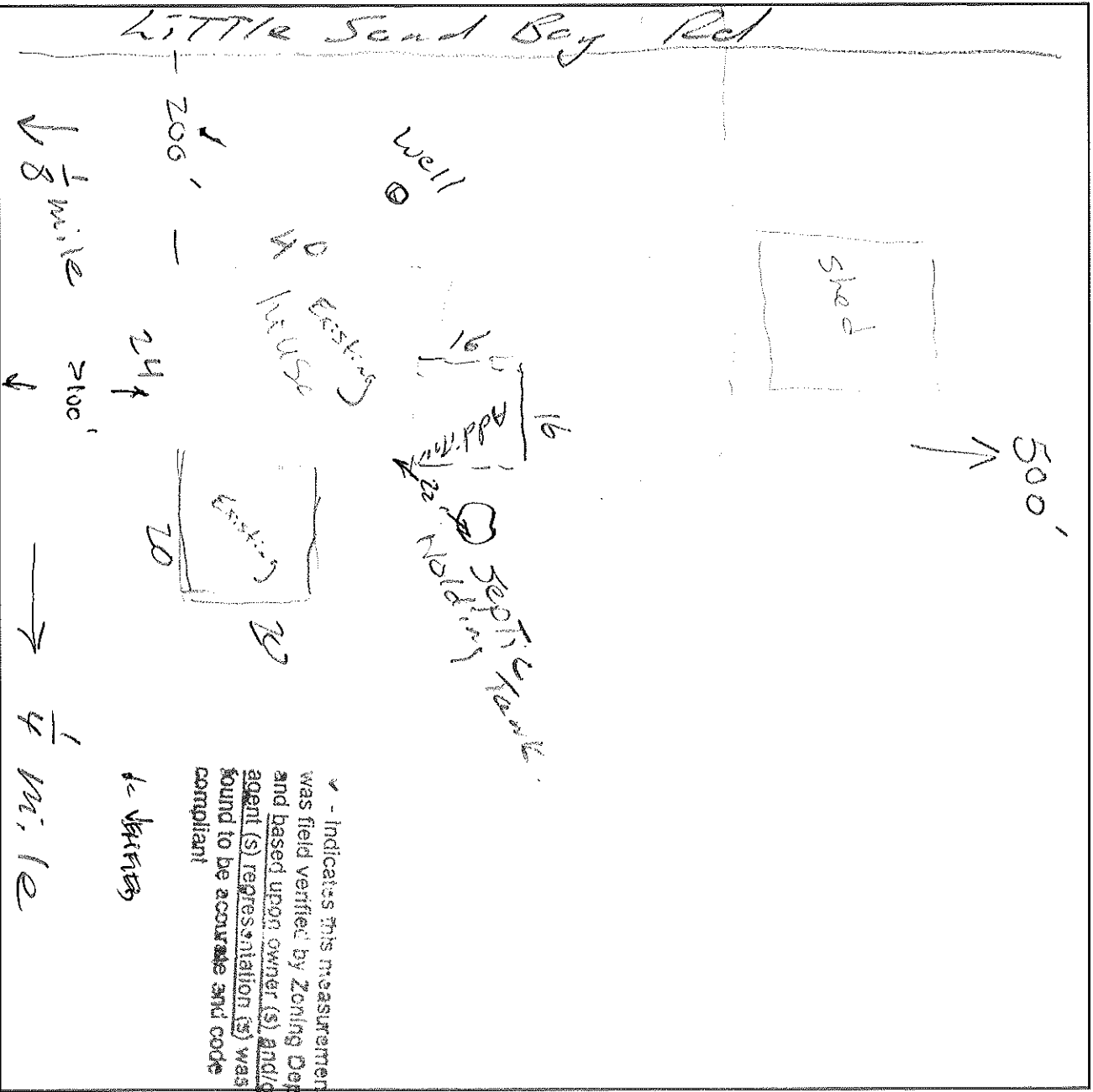
Permit Issued: _____ State Sanitary Number 254745 Date 1975
Date 8-7-08 Permit Number 08-0397 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: SIGNATURE SHEETS/CONDITIONS AS REPRESENTED BY OWNER APPEARS TO MEET CODE
REQUIREMENTS P.L. PERMIT MAY BE BY DC Date of Inspection 8-4-08
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: _____

Signed [Signature] Inspector [Signature]
Date of Issuance 8-4-08
Date of Approval 8-4-08
Previous Permits?
1974-1975

Secretarial Staff

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Lot Line



NOTE - Revised Aerial Map
 Name of Frontage Road (Little Sand Bay Rd)
 PL = ?

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 - (include any deck(s), porch or garage)
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
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 - 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

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