

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
 AUG 28 2008
 Bayfield Co. Zoning Dept.

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 NE 1/4 of Section 34 Township 51 North, Range 4 West, Town of RUSSEA

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 5

Volume 881 Page 977 of Deeds Parcel I.D. 046-1052-07-940

Property Owner CITIZENS TRUST Contractor SEEF (Phone) 715-779-3472

Address of Property 88575 WINDYFORK Plumber _____

Bayfield, WI 54814 Authorized Agent _____ (Phone) _____

Telephone 715-779-3472 (Home) _____ (Work) _____

Is your structure in a Shoreland Zone? Yes No **if yes.**

Structure: New _____ Addition Existing _____

Fair Market Value 3000 Square Footage 352

USE: * Residence or Principal Structure (# of bedrooms) _____

Residence sq. ft. _____

* Residence w/deck-porch (# of bedrooms) _____

Residence sq. ft. _____ Porch sq. ft. _____

Deck sq. ft. _____

* Residence w/attached garage (# of bedrooms) _____

Residence sq. ft. _____ Garage sq. ft. _____

Residential Addition / Alteration (explain) DECK (FRONT)

Residential Accessory Building (explain) _____

Residential Accessory Building Addition (explain) _____

Residential Other (explain) _____

Owner or Authorized Agent (Signature) James E. Rustinen Date 8-28-08

Address to send permit SAME

* See Notice on Back

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit issued: State Sanitary Number _____ Date _____

Date 9-11-08 Permit Number 08-0492 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: STRUCTURAL SPEAKERS CONDITIONS AS REPRESENTED BY ASSESS APPEAL TO BE CODE

PERMIT - PLAN MAY BE ISSUED BY DOC

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

Condition: _____

Signed [Signature] Inspector _____

Rec'd for Issuance _____ Date of Approval _____

Rec'd for Issuance _____ Date of Approval _____

SEP 11 2008

Secretarial Staff

SEP 08 2008

Secretarial Staff

Rec'd - needs to start deed

ENTERED

Application No: 08-0492

Date: _____

Zoning District A1-

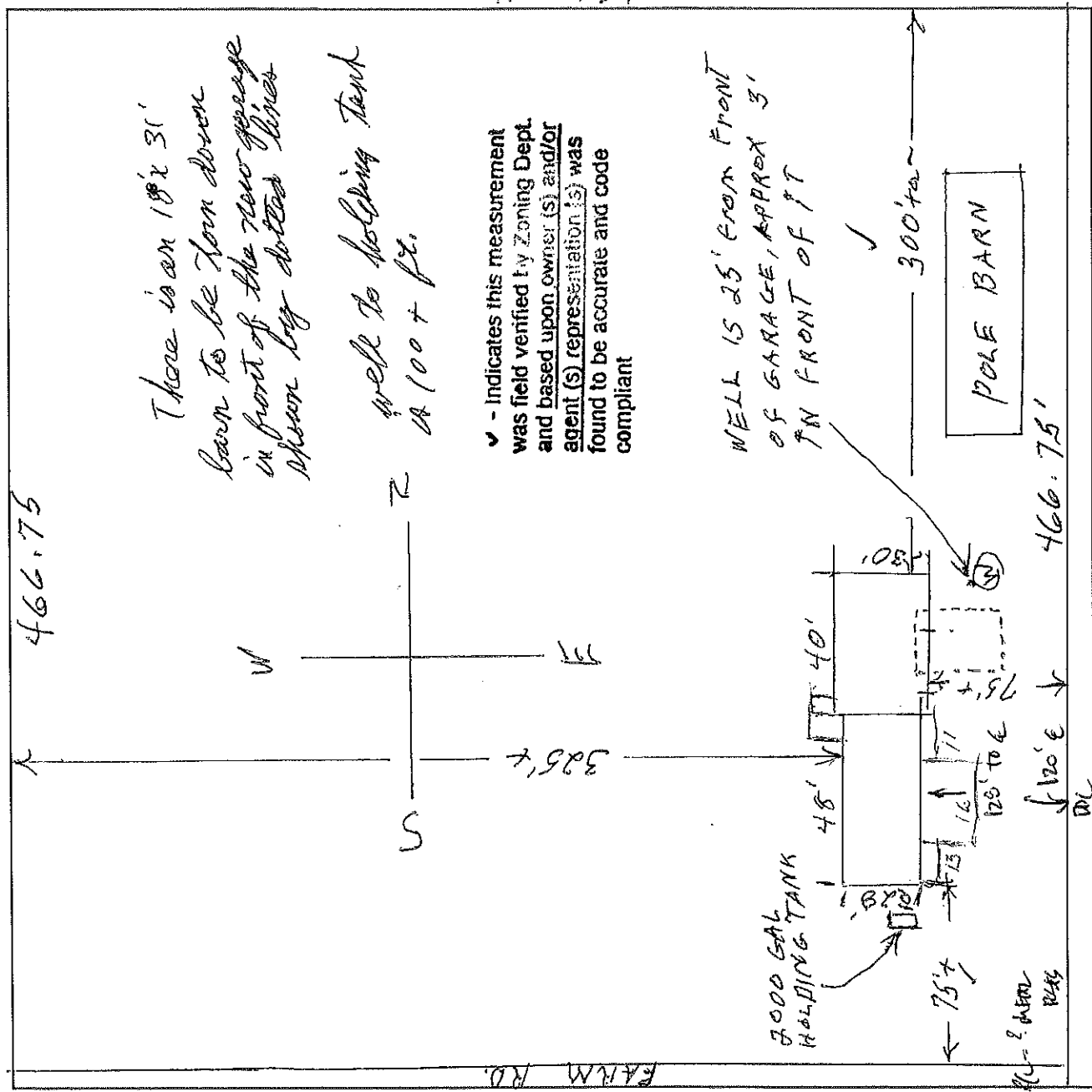
Amount Paid: \$75.00 P.O.S

9/2/08

ATTACH

Copy of Tax Statement or
 (If you recently purchased the property
 Attach a Copy of Recorded Deed)

Lot Line



There is an 18' x 31' barn to be torn down in front of the new garage shown by dotted lines

well to holding tank is 100 + ft.

✓ - Indicates this measurement was field verified by Zoning Dept. and based upon owner (S) and/or agent (S) representation (s) was found to be accurate and code compliant

WELL IS 25' FROM FRONT OF GARAGE, APPROX 3' IN FRONT OF IT ✓

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate 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
 - b. Building to centerline of road
 - 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

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY. FOLLOW
STEPS 1-7 (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, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.

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Application No: 08-0491
 Date: _____
 Zoning District: A-C
 Amount Paid: \$75.00 PDS
9/2/08

LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER _____

Use Tax Statement for Legal Description

Legal Description SE 1/4 of NE 1/4 of Section 34 Township 51 North, Range 4 West, Town of Russell

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 5

Volume 881 Page 977 of Deeds Parcel I.D. 046-102-07-950 2

Property Owner CAROLANNE NEW TRUST Contractor SELF (Phone) 715-779-3472

Address of Property BAYFIELD WI 54814 Plumber _____

Telephone 715-779-3472 (Home) _____ (Work) _____ Authorized Agent _____ (Phone) _____

Is your structure in a Shoreland Zone? Yes No If yes, _____

Structure: New _____ Addition Existing _____

Fair Market Value \$2000 Square Footage 256

USE: * Residence or Principal Structure (# of bedrooms) _____

Residence sq. ft. _____ (Work) _____

* 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) DECK (BACK)

Residential Accessory Building (explain) _____

Residential Accessory Building Addition (explain) _____

Residential Other (explain) _____

Owner or Authorized Agent (Signature) James E. Christian Date 8-28-08

Address to send permit SAME 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 9-11-08 Permit Number 08-0491 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: SEVERAL SETBACKS/CONDITIONS AS MENTIONED BY OWNER APPEARS TO BE CORE CONCRETE & W. PERMIT MAY BE ISSUED By DC Date of Inspection 8-5-08

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

Condition: _____

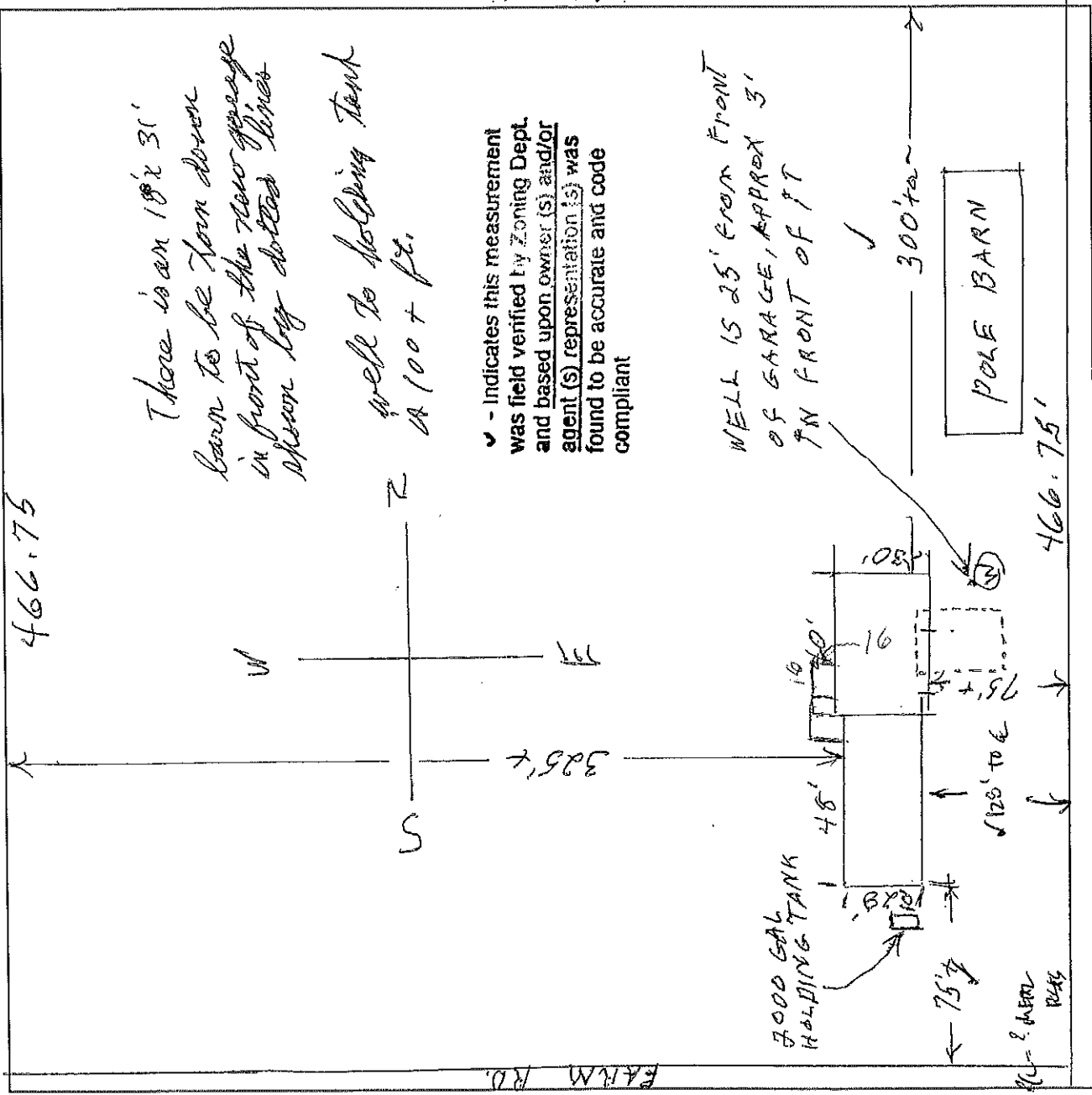
Signed [Signature] Inspector _____ Date of Approval 9-5-08

Rec'd for Issuance Rec'd for Issuance

SEP 17 2008 SEP 08 2008

Secretarial Staff Secretarial Staff

Lot Line



466.75
FARM RD.

466.75

There is an 18' x 31' barn to be torn down in front of the new garage shown by dotted lines

✓ - Indicates this measurement was field verified by Zoning Dept. and based upon owner(s) and/or agent(s) representation(s) was found to be accurate and code compliant

WELL IS 25' FROM FRONT OF GARAGE, APPROX 5' IN FRONT OF IT ✓

POLE BARN

Staked at inspection

9-5-08 Name of Frontage Road (WEIDINGER)

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate 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.
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 - 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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