

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
 SEP 27 2011
 Bayfield Co. Zoning Dept.

Application No: 11-03882
 Date: 10/13/11
 Zoning District: A-1(-)
 Amount Paid: \$759.27
 with

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 22 Township 51 North, Range 4 West, Town of RUSSELL

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 10A

Volume _____ Page _____ of Deeds _____ Parcel I.D. 09-08-251-04-12-2 09-000-10000

Property Owner H. MICHAEL EPPERD - KATHERINE P. FITZELL Contractor SELF (Phone) 801-599-4023

Address of Property 3440 TWILPINE TRAIL Plumber _____

Telephone 715 779 5334 (Home) 801 599 4023 (Work) Written Authorization Attached: Yes No

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 \$8,000 - 12,000 Square Footage 456 Sanitary: New _____ Existing Privy _____ City _____

USE: * Residence or Principal Structure (# of bedrooms) _____ Type of Septic/Sanitary System _____

* Residence w/attached garage (# of bedrooms) _____ Mobile Home (manufactured date) _____

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

* Residence w/attached garage (# of bedrooms) _____ Commercial Principal Building Addition (explain) _____

* Residence w/attached garage (# of bedrooms) _____ Commercial Accessory Building (explain) _____

* Residence w/attached garage (# of bedrooms) _____ Commercial Accessory Building Addition (explain) _____

* Residence w/attached garage (# of bedrooms) _____ Residential Accessory Building (explain) _____

* Residence w/attached garage (# of bedrooms) _____ Residential Accessory Building Addition (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) M. Epperd Date 9/26/11
 Address to send permit 3335 GLENFINDIAN RD. BILLINGS, MT 59101 ATTACH _____

* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number _____ Date _____

Permit Number 11-03882 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: ROBERT SNOOPK, VICTORS & ANDREAS REPRESENTATIVE APPEARS TO BE GOD AWAKENED

Inspected by DDC Date of Inspection 10-13-11

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

Condition: _____

Rec'd for Issuance Signed [Signature] Inspector _____ Date of Approval 10-13-11

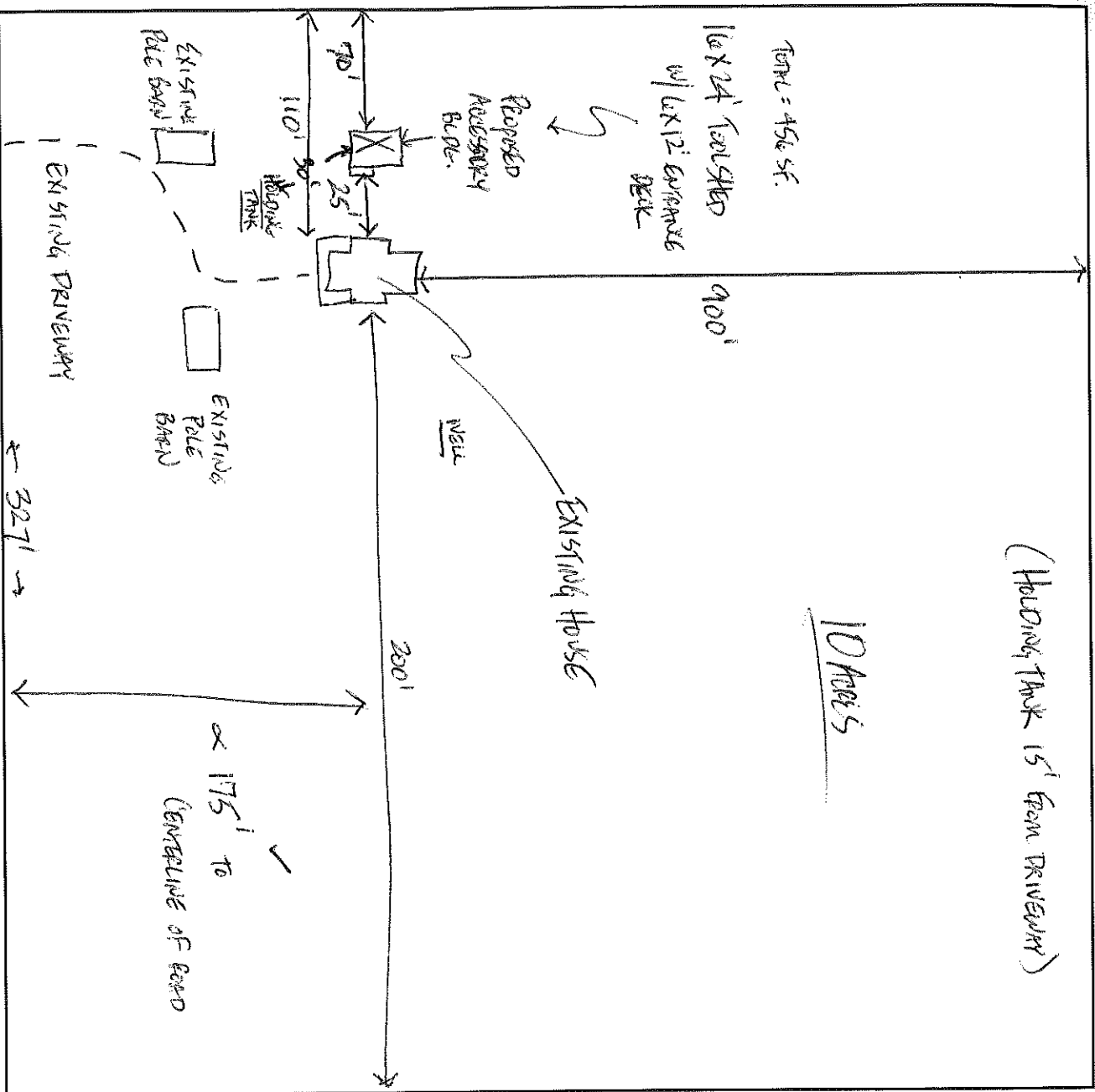
Secretary Verity Secretarial Staff



NORTH
Lot Line

(Holding Tank 15' from Driveway)

10 Acres



New - Body Site will be used at Name of Frontage Road (TULIP LANE)
inspections 1. Extra step

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. (w/)
6. Show the location of other existing structures.
7. Show the location of any wetlands or slopes over 20 percent. (w/)
8. Show dimensions in feet on the following:
 - a. Building to all lot lines
 - b. Building to centerline of road - 175'
 - c. Building to lake, river, stream or pond
 - d. Holding tank to closest lot line - 80'
 - e. Holding tank to building - 30'
 - f. Holding tank to well - 175'
 - 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 - 80'
 - l. Septic Tank and Drain field to building w/
 - m. Septic Tank and Drain field to well - 175'
 - n. Septic Tank, and Drain field to lake, river, stream or pond.
 - o. Well to building - 90'

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.