

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
P E R M I T
 JUL 08 2011
 Bayfield Co. Zoning Dept.

Application No.: 11-0432
 Date: 11/08/11
 Zoning District: A-1
 Amount Paid: \$580.00 POS
7/14/11

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 SW 1/4 of NW 1/4 of Section 8 Township T51 North, Range 4 West, Town of Russe 11

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

Volume 1032 Page 14 of Deeds Parcel ID 04-046-2-51-04-08-2-03-000-10000

Property Owner Gerald W. Fletcher Contractor Campbell Const. (Phone) 715-682-0075

Address of Property Bayfield, WI Big Bay Rd Plumber _____

Telephone (907)443-3178 (Home) (907)443-2241 (Work) Authorized Agent Bruce Campbell (Phone) 715-682-0075

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 135,000 Square Footage 1574 Sanitary: New Existing _____ Privy _____ City _____

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

Residence sq. ft. _____ Garage sq. ft. _____ Commercial Principal Building _____

* Residence w/deck-porch (# of bedrooms) 3 Commercial Principal Building Addition (explain) _____

Residence sq. ft. 1232(14x13) Porch sq. ft. 182(14x13) Commercial Accessory Building (explain) _____

Deck sq. ft. 160(10x16) Deck(2) sq. ft. _____ Commercial Accessory Building Addition (explain) _____

Residence sq. ft. _____ Commercial Other (explain) _____

Residential Addition / Alteration (explain) _____ Special/Conditional Use (explain) _____

Residential Accessory Building (explain) Garage 30x30 AW External Improvements to Principal Building (explain) _____

Residential Other (explain) _____ External Improvements to Accessory Building (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) Gerald W. Fletcher Rd Campbell Date 11/5/10

Address to send permit 1118 75 St W Ashland WI 54806 ATTACH _____

* See Notice on Back Copy of Tax Statement or Property (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number 11-435 Date 8-8-11

Date 11/08/11 Permit Number 11-0432 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Structural capacity/condition is warranted by other permit articles to the code

Amendment will amount why be BY SAINTY OR Date of Inspection 7-18-11/7-2-11

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

Condition A Utility Obstruction Code Permit (one) from the localy authority was submitted along

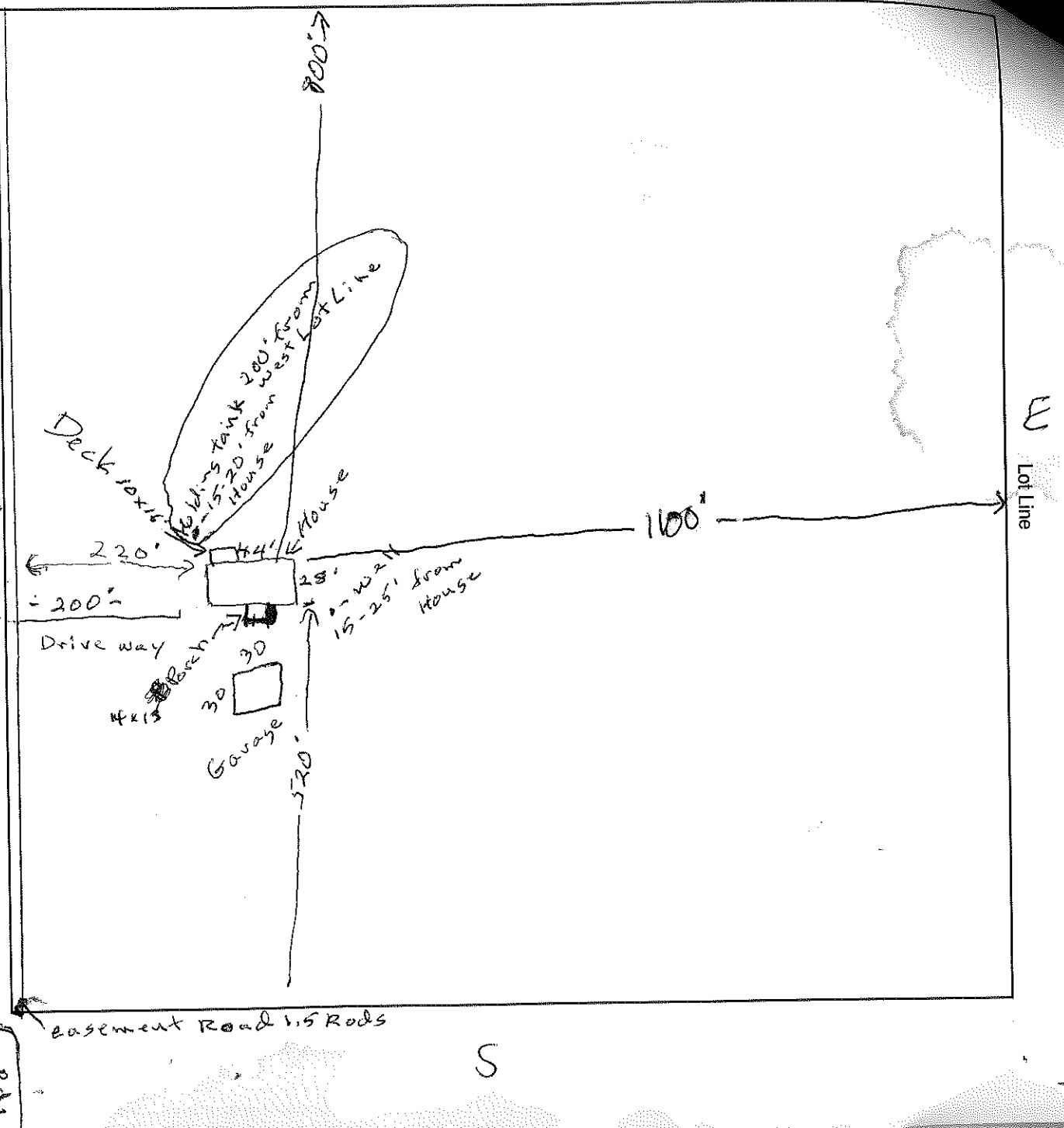
with BE OBTAINED prior to the start of construction

no further work will be done Signed [Signature] Date of Approval 7-10-11/7-2-11

Red for issuance Inspector _____ Date of Approval _____

Secretarial Staff

\$ 405 + \$175 **PAID**



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

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 N/A
 - c. Building to lake, river, stream or pond N/A
 - d. Holding tank to closest lot line 200'
 - e. Holding tank to building 15'-20'
 - f. Holding tank to well 40'-50'
 - g. Holding tank to lake, river, stream or pond N/A
 - h. Privy to closest lot line N/A
 - i. Privy to building N/A
 - j. Privy to lake, river, stream or pond N/A
 - k. Septic Tank and Drain field to closest lot line N/A
 - l. Septic Tank and Drain field to building N/A
 - m. Septic Tank and Drain field to well N/A
 - n. Septic Tank, and Drain field to lake, river, stream or pond. N/A
 - o. Well to building 15'-25'

*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.