

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

RECEIVED  
FEB 20 2009  
Bayfield Co. Zoning Dept.

Application No.: 09-0042  
Date: \_\_\_\_\_  
Zoning District: A-1/3  
Amount Paid: \$75 cash mg  
2/26/09 \$50. - cash 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.

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

Use Tax Statement for Legal Description East of the Iron River

Legal Description NE 1/4 of SW 1/4 of Section 19 Township 48 North, Range 8 West, Town of Tripp

Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ Acreage 17

Volume 977 Page 900 of Deeds Parcel I.D. 04-048-2-48-08-19-3 01-006-11000

Property Owner Dennis, Dean, Gene Lake Contractor \_\_\_\_\_ (Phone) 715-372-5480

Address of Property Rangeline Rd Plumber \_\_\_\_\_

Iron River WI 54847 Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 772-5480 (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

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

Structure: New  Addition  Existing  Basement: Yes  No  Number of Stories 1

Fair Market Value 1000<sup>00</sup> Square Footage 480 Sanitary: New  Existing  Privy  City

USE:  Residence of Principal Structure (# of bedrooms) storage Type of Septic/Sanitary System NONE

Residence sq. ft. \_\_\_\_\_  Mobile Home (manufactured date) \_\_\_\_\_

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

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

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

Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_

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

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

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

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

Residential Other (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) Dean Lake Date 2/20/09

Address to send permit PO Box 491 Iron River WI 54847 ATTACH \_\_\_\_\_

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

APPLICANT - PLEASE COMPLETE REVERSE SIDE

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

Date 2/26/09 Permit Number 09-0042 Permit Denied (Date) \_\_\_\_\_

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

Inspection Record: Structural Setbacks/Conditions as represented by owner appears to be code compliant & permit may be issued per conditions

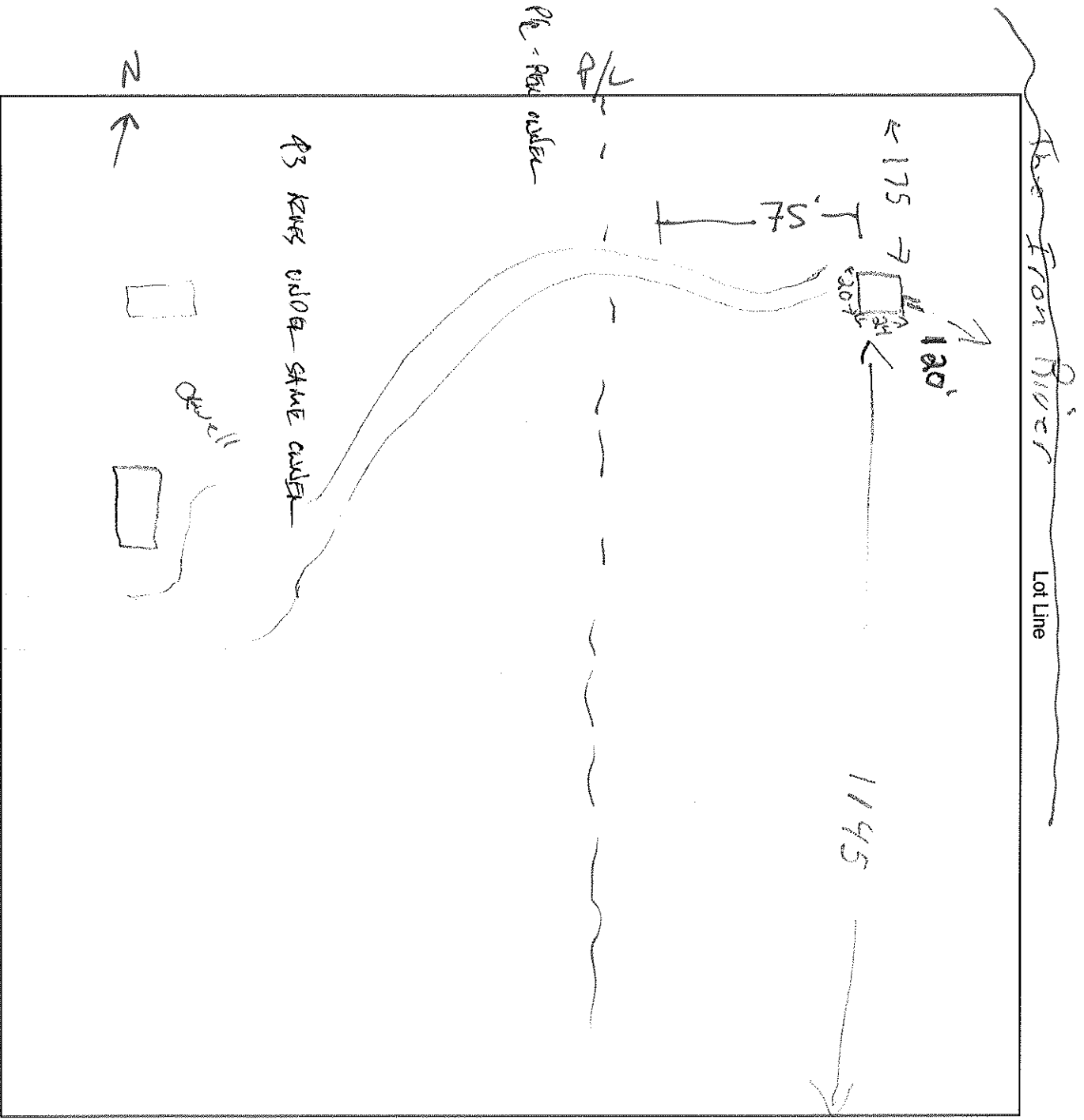
Date of Inspection 2-19-09

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

Condition: Structure may not be used for domain habitation or for living space unless all applicable zoning, sanitary, or other building codes are fully met.

Signed [Signature] Inspector \_\_\_\_\_

Date of Approval 2-20-09



Name of Frontage Road (Range line rd)

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.