

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 30 2010

Application No: 10-0407
 Date: _____
 Zoning District: F-1 / DCLASS 3
 Amount Paid: 125.00 10/1/10

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: S10 1/4 of N1/2 1/4 of Section 9 Township 48 North, Range S West, Town of WASHBURN

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

Volume 1107 Page 519 of Deeds Parcel I.D. 14-050-2-4B-05-09-2-03-000-10000

Property Owner JAMES & LIWSEY HUDACK Contractor SELF (Phone) (715) 209 1589

Address of Property 1/4 MILE SOUTH ON GREEN LAKE RD Plumber _____

(FROM INTERSECTION OF LONG LAKE RD) Authorized Agent _____ (Phone) _____

Telephone (715) 209 1589 (Home) SAME (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 _____

Fair Market Value ~ \$10,000 Square Footage ~ 1,000 Sanitary: New _____ Existing _____ Privy _____ City _____

USE: * Residence or Principal Structure (# of bedrooms) 1 - 1000 Type of Septic/Sanitary System _____

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) _____ External Improvements to Principal Building (explain) _____

Residential Accessory Building Addition (explain) _____ External Improvements to Accessory Building (explain) _____

Residential Other (explain) _____

Owner or Authorized Agent (Signature) Jaime Hudack Date 9/29/10

Address to send permit 1522 10th AVE WEST, ABULANO WI 54806 ATTACH _____

ATTN: JAIME HUDACK Copy of Tax Statement or _____

* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE Attach a Copy of Recorded Deed _____

Permit Issued: _____ State Sanitary Number _____ Date _____

Date 10/8/10 Permit Number 10-0407 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Successive Sanitary/Address AS FORMERLY BY OWNER APPEARS TO BE CORRECT

CONDUIT ETC. PERMIT MAY BE BY TDC Date of Inspection 10-5-10

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

Condition: Successive maps not be used for human habitation ALL DUMP SPACE UNLESS ALL

APPLICABLE ETC. ZONING & SANITARY CODES ARE FULLY MET.

Signed Jaime Hudack Inspector _____ Date of Approval 10-5-10

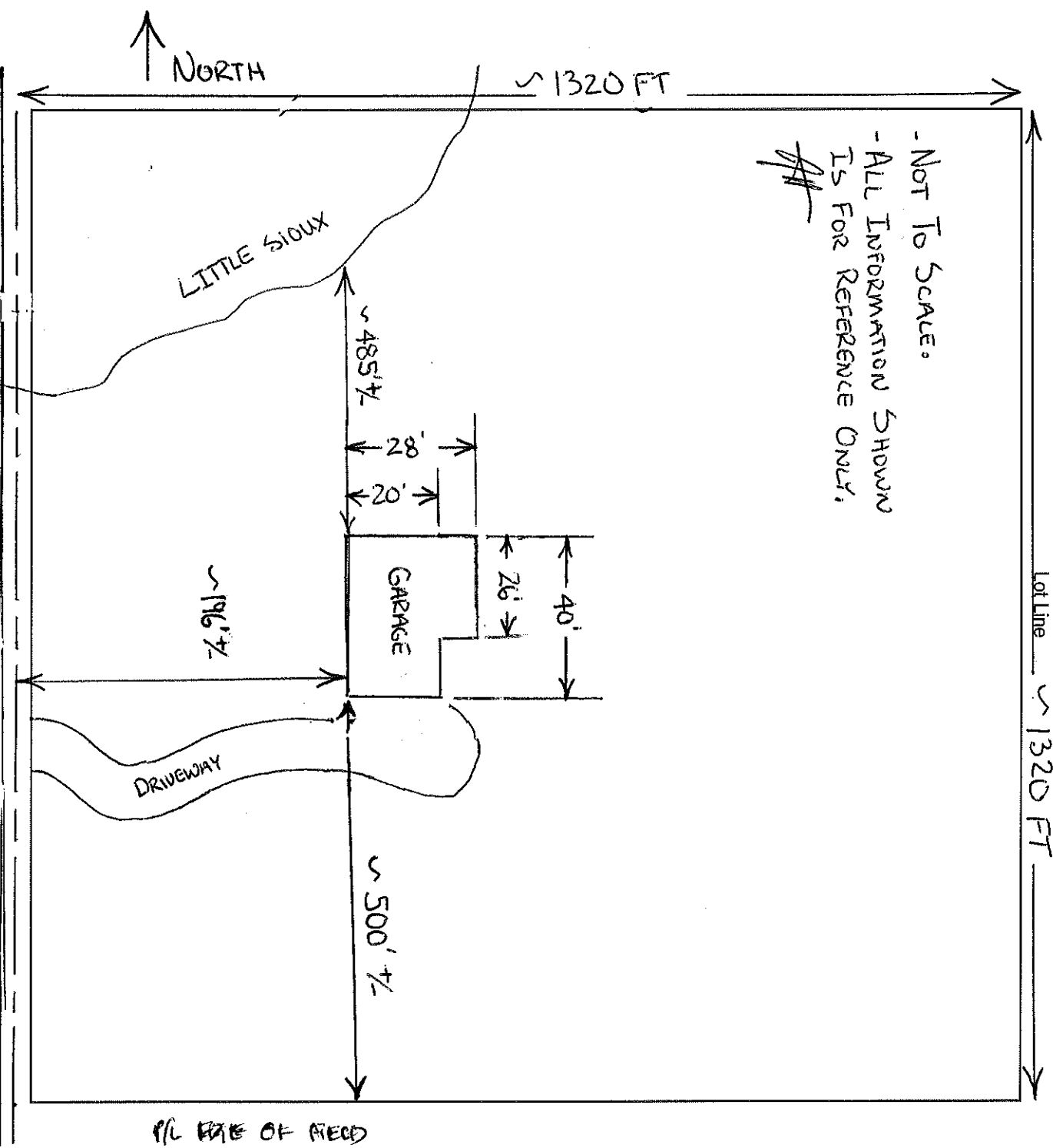
Rec'd for Issuance _____

Secretary Staff _____

DATE: OCT 8 2010

SECRETARY STAFF _____

-NOT TO SCALE.
 -ALL INFORMATION SHOWN
 IS FOR REFERENCE ONLY.



RD 16510 ~~RD 16510~~ ~~RD 16510~~ - ~~DRIVEWAY~~ ~~DRIVEWAY~~ ~~DRIVEWAY~~ - Name of Frontage Road (RD 16510)
 SITE ~~IS~~ ~~NOT~~ ~~DETAILED~~ ~~AT~~ ~~INSPECTOR'S~~ DISCRETION.

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.