

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Dept.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN
 Date Stamp (received)
 JUN 04 2014
 Bayfield Co. Zoning Dept.

ENTERED

Permit #:	150115
Date:	5-16-15
Amount Paid:	350.00 cash + 30 to R.O.P. #1089024
Refund:	

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. HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

TYPE OF PERMIT REQUESTED: LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: Jacob Obletz Mailing Address: 29230 Eid red Hasen WI 54856 City/State/Zip: Hasen WI 54856 Telephone: 715-365-4104

Address of Property: 29230 Eid red City/State/Zip: Hasen WI 54856 Contractor Phone: 715-378-3456

Contractor: Jde Walker plumber: Superior Plumbing Written Authorization: Yes No

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Jde Walker Agent Mailing Address (include City/State/Zip): 29230 Eid red Hasen WI 54856 Attached: Yes No

PROJECT LOCATION: SE 1/4, NW 1/4 Legal Description: (Use Tax Statement) PLN: (23 digits) 04-0202410052020300010006 04-0202410052020400030000 Recorded Document (i.e. Property Ownership) Volume: 265 Page(s): 662

Gov't Lot: SE 1/4, NW 1/4 Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivisions: 265 Lot Size: 41 Acreage: 41

Section 26, Township 46 N, Range 05 W Town of: Kelly

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If Yes--continue Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes--continue

Distance Structure is from Shoreline: feet Is Property in Floodplain Zone? Yes No

Distance Structure is from Shoreline: feet Yes No

Are Wetlands Present? Yes No

Value at Time of Completion * Include donated time & material	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
\$ <u>10,000</u>	<input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property <input checked="" type="checkbox"/> Mobile Home XXXXXX	<input checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Tank</u> <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 50 Width: 14 Height:

Proposed Construction: Length: 50 Width: 14 Height:

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2 nd) Deck with Attached Garage	(<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>)	<u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>
<input type="checkbox"/> Commercial Use	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(<u> </u>)	<u> </u>
<input type="checkbox"/> Municipal Use	Mobile Home (manufactured date) <u>1983</u>	(<u>14</u> x <u>50</u>)	<u>700</u>
<input type="checkbox"/> Rec'd for Issuance	Addition/Alteration (specify) <u>with 1983 mobile home</u>	(<u> </u>)	<u>48</u>
<input type="checkbox"/> Accessory Building	Accessory Building (specify) <u> </u>	(<u> </u>)	<u> </u>
<input type="checkbox"/> Accessory Building Addition/Alteration	Accessory Building Addition/Alteration (specify) <u> </u>	(<u> </u>)	<u> </u>
<input type="checkbox"/> Special Use: (explain) <u> </u>	Special Use: (explain) <u> </u>	(<u> </u>)	<u> </u>
<input checked="" type="checkbox"/> Conditional Use: (explain) <u>MULTIPLE ORNAMENT BUILDINGS</u>	Conditional Use: (explain) <u>MULTIPLE ORNAMENT BUILDINGS</u>	(<u> </u>)	<u> </u>
<input type="checkbox"/> Other: (explain) <u> </u>	Other: (explain) <u> </u>	(<u> </u>)	<u> </u>

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(s): Jacob Obletz Date: 6-4-2014
 (If there are Multiple Owners listed on the Deed, all owners must sign on letter(s) of authorization must accompany this application.)
 Authorized Agent: Jde Walker Date: 6-4-2014
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application.)
 Address to send permit: 29230 Eid red Hasen WI 54856
 (If you recently purchased the property send your Recorded Deed to Zoning)

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE



