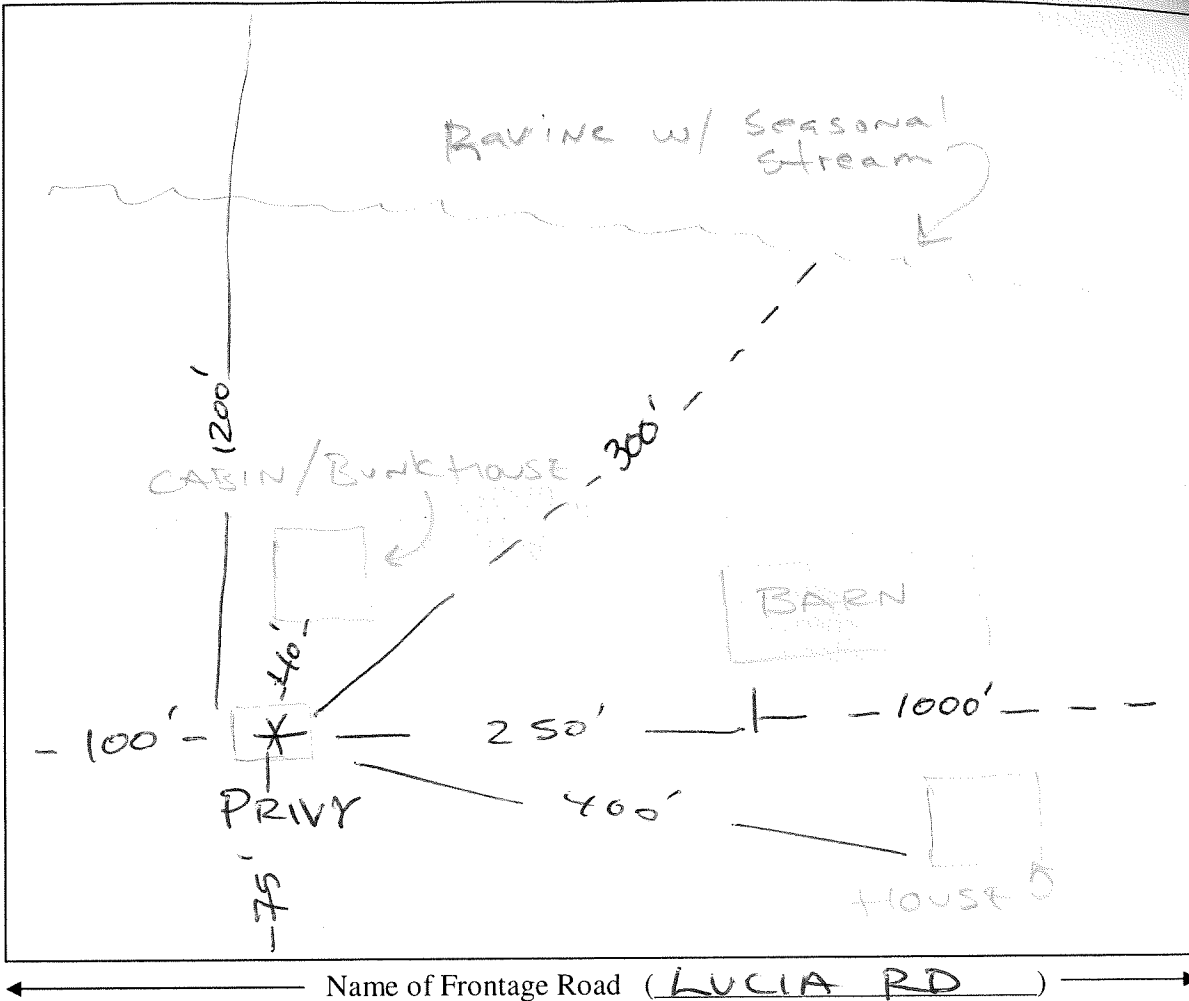


# BAYFIELD COUNTY SANITARY PERMIT APPLICATION



<b>I. APPLICATION INFORMATION</b> (Please Print All Information)		Soil Test No: <u>NA</u>	County Permit No: <u>18-0432</u>
Property Owner's Name <u>LAURA PARMENTIER</u>		County: <b>Bayfield</b>	
Address of Property <u>28365 LUCIA RD.</u>		Property Location: <u>NE 1/4 NW 1/4, S03 T48 N R 205 E (or W)</u>	
Property Owner's Mailing Address <u>28365 LUCIA RD.</u>		Township	Gov. Lot #:
City, State <u>WASHBURN, WI</u>	Zip Code <u>54891</u>	Phone Number <u>715-730-0706</u>	Lot #
		Block #:	Subdivision Name or CSM #:
<b>II. TYPE OF BUILDING:</b> (Check One)			
<input type="checkbox"/> State Owned		Parcel ID <u>04050248050320100010000</u>	
<input type="checkbox"/> Public (Explain the use/purpose _____)		Tax Number(s): <u>30592</u>	
<input checked="" type="checkbox"/> 1 or 2 Family Dwelling - No. of Bedrooms <u>1</u>			
<b>III. TYPE OF PERMIT:</b> (Check only one box on line A. Check box on line B, if applicable)			
A) <input checked="" type="checkbox"/> New		<input type="checkbox"/> Replacement <input type="checkbox"/> County Private Interceptor	
1. <input type="checkbox"/> Reconnection		2. <input type="checkbox"/> Repair 3. <input type="checkbox"/> Revision ** <input type="checkbox"/> Transfer of Owner (List Previous Owner below)	
B) <input type="checkbox"/> A Sanitary Permit was previously issued. Previous Permit Number: _____ Date Issued: _____		RECEIVED OCT 02 2018 Bayfield Co. Zoning Dept.	
<b>IV. TYPE OF NON-PLUMBING SYSTEM:</b> (Check One) * Replacements need previous permit number and date filled out above			
C) <input type="checkbox"/> Pit Privy		<input checked="" type="checkbox"/> Vault Privy (Vault size: <u>200</u> gallons or _____ cubic yards)	
<input type="checkbox"/> Portable Privy (Temporary Use Only)		<input type="checkbox"/> Composting Toilets <input type="checkbox"/> Incinerating Toilet	
<b>V. ABSORPTION SYSTEM INFORMATION:</b>			
1. Gallons Per Day	2. Absorp. Area Required (Sq.Ft.)	3. Absorp. Area Proposed (Sq. Ft.)	4. Loading Rate (Gals. / Day / Sq.Ft.)
			5. Perc. Rate (Min. Inch)
			6. System Elev.(Feet)
			7. Final Grade Elev. (Feet)
<b>VI. TANK INFORMATION:</b>		Capacity In Gallons	Total Gallons
		New Tanks	# of Tanks
		Existing Tanks	Manufacturer's Name
Septic Tank or Holding Tank		<u>200</u>	<u>200</u>
Lift Pump Tank / Siphon Chamber			<u>1</u>
			<u>Ag Tanks Inc.</u>
<b>VII. RESPONSIBILITY STATEMENT:</b>			
I the undersigned, assume responsibility for installation of the onsite sewage system shown on the attached plans.			
Plumber's / Owner's Name: (Print) <u>LAURA PARMENTIER</u>		Plumber's / Owner's Signature: (No Stamps) <u>Laura Parmentier</u>	
Plumber's Address: (Street, City State, Zip Code) <u>see above</u>		MP/MPSRW No: <u>NA</u>	
Home Phone: <u>608-695-3287</u>		Business Phone: <u>-</u>	
<b>VIII. COUNTY / DEPARTMENT USE ONLY</b>			
<input checked="" type="checkbox"/> Approved		Sanitary Permit/Transfer Fee: <u>\$150 10-15-18</u>	
<input type="checkbox"/> Disapproved		Date Issued: <u>10-15-18</u>	
<input type="checkbox"/> Owner Given Initial Adverse Determination		Issuing Agent's Signature / Date: <u>[Signature]</u> <u>10/8/2018</u>	
<b>IX. CONDITIONS OF APPROVAL / REASONS FOR DISAPPROVAL:</b>			

Lot Line



← Name of Frontage Road (LUCIA RD) →

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location and size of the building.
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:

**IMPORTANT  
DETAILED PLOT PLAN  
IS NECESSARY, FOLLOW  
STEPS 1-7 COMPLETELY**

- |   |   |
|---|---|
| a. Building to all lot lines 100' - N                   | i. Privy to building                          |
| b. Building to centerline of road 70'                   | j. Privy to lake, river, stream or pond       |
| c. Building to lake, river, stream or pond              | k. Drain field to closest lot line            |
| d. Septic / holding tank to closest lot line            | l. Drain field to building                    |
| e. Septic/holding tank to building                      | m. Drain field to well                        |
| f. Septic / holding tank to well                        | n. Drain field to lake, river, stream or pond |
| g. Septic / holding tank to lake, river, stream or pond | o. Well to building                           |
| h. Privy to closest lot line 100'                       |   |

**Submit To:** Bayfield County Zoning Department, PO Box 58, Washburn, WI 54891  
(715) 373-6138

117 E 5th St.

u/forms/sanitaryapplication1  
June 2006