

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  
 APR 20 2011

Bayfield Co. Zoning Dept.

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.

ENTERED  
 Application No.: 11-0063  
 Date: \_\_\_\_\_  
 Zoning District: RRB, Class 2  
 Amount Paid: 75  
 4-21-11/mjg

\$75

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

Use Tax Statement for Legal Description

Legal Description \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section 4 Township 44 North, Range 9 West, Town of Barnes

Gov't Lot 3 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 15.692

Volume 753 Page 121 of Deeds Parcel I.D. 04-004-2-44-09-01-2 05-003-01000

Property Owner Ann Broedel Contractor self (Phone) \_\_\_\_\_

Address of Property 51840 Birch Lake Rd Plumber \_\_\_\_\_ (Phone) \_\_\_\_\_

Barnes, WI 54873 Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 795-2935 (Home) \_\_\_\_\_ (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 \_\_\_\_\_ Number of Stories 1

Fair Market Value \$10,000 Square Footage 964 Sanitary: New \_\_\_\_\_ Existing  Pny \_\_\_\_\_ City \_\_\_\_\_

USE: Type of Septic/Sanitary System Csw

Residence or Principal Structure (# of bedrooms) 8x13'

Residence sq. ft. \_\_\_\_\_ Commercial Principal Building \_\_\_\_\_

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

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

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

Residence w/attached garage (# of bedrooms) \_\_\_\_\_ Commercial Other (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) \_\_\_\_\_

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) Ann J. Broedel Date 4-19-11

Address to send permit SCW & S above ATTACH Copy of Tax Statement or (If you recently purchased the property Attach a Copy of Recorded Deed)

\* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

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

Date 4-21-11 Permit Number 11-0063 Permit Denied (Date) \_\_\_\_\_

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

Inspection Record: Well Staked. Meets all attached Property Line per revised representations By M. Fuchs Date of Inspection 4-19-11

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

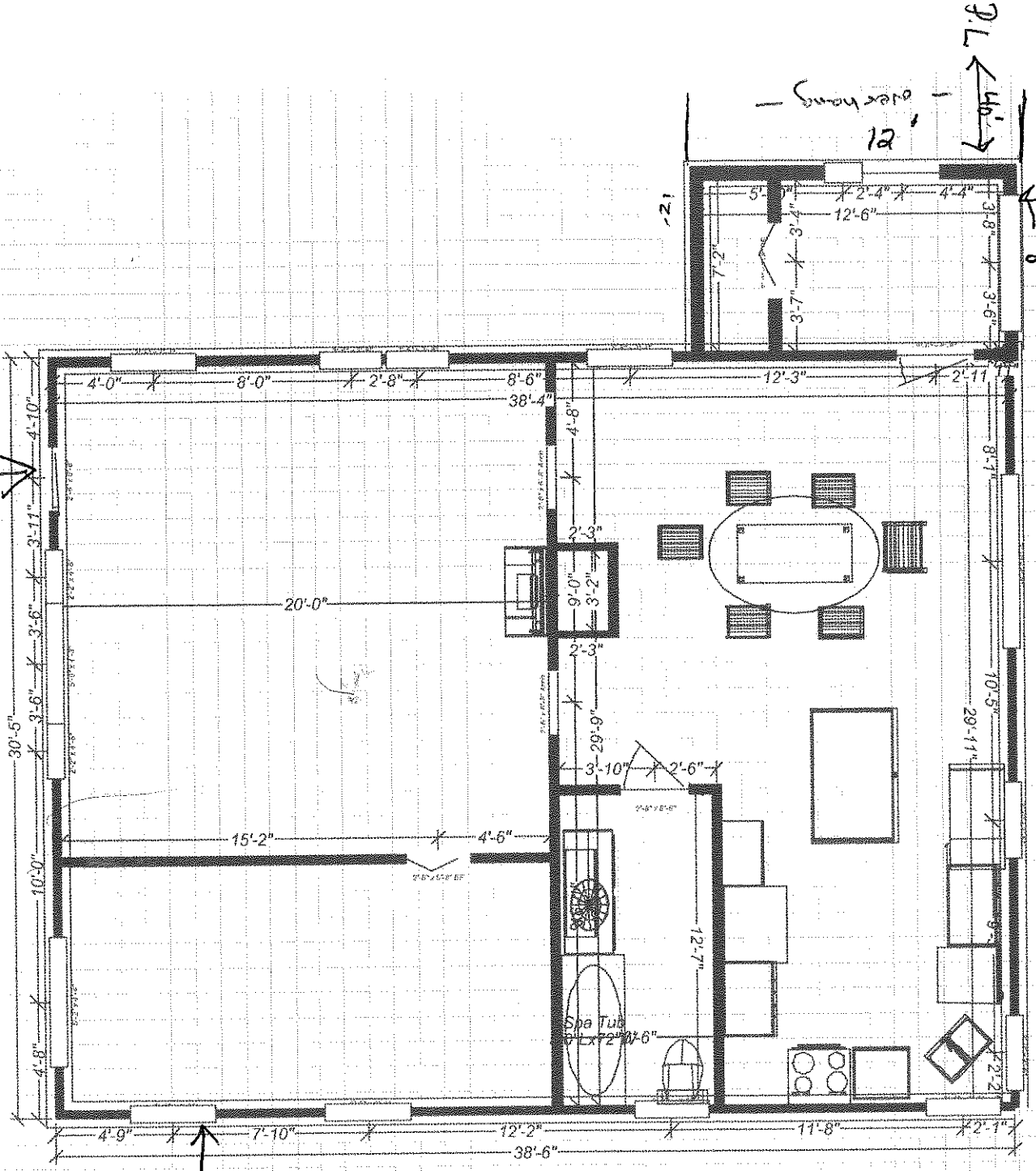
Condition: \_\_\_\_\_

Signed \_\_\_\_\_ 4-20-11  
 Inspector \_\_\_\_\_  
 Record for Issuance of Approval

APR 21, 2011  
 Secretarial Staff

06-0484

85' N E Birch Lake Rd  
 Tom & Ann Brouald  
 51840 Birch Lake Rd  
 Barnes, WI 54813



Robinson  
 Lake OHWM

180'

mapped wetland > Raars  
 130'