

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
MAY 04 2011

\$100



Application No.: 11-0101
Date: 5-10-11
Zoning District: R-1, Class 3
Amount Paid: \$ 100.00 PDS
5/4/11

INSTRUCTIONS: No permits will be issued until all fees are paid Bayfield Co. Zoning Dept.
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: 1/4 of 1/4 of Section 18 Township 45 North, Range 9 West, Town of Barnes
Gov't Lot: Lot 34 Block _____ Subdivision: Meehock Add. to Abnaskom Estates SSM # _____ Acreage: 1.77

Volume: 1046 Page 588 of Deeds Parcel I.D. 04-004-2-45-09-18-3 00-223-22000
Property Owner: Kevin & Amy Hornz Contractor: self (Phone) _____

Address of Property: Barnes, WI 54873 Plumber: _____
Telephone: (715) 392-3831 (Home) (715) 817-1278 (Work) Authorized Agent: _____ (Phone) _____
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 _____
Fair Market Value: \$2,000 Square Footage: 100 sq ft
Basement: Yes _____ No _____ Number of Stories: _____
Sanitary: New _____ Existing _____ Privy City _____
Type of Septic/Sanitary System: _____
Mobile Home (manufactured date) _____
Commercial Principal Building _____
Commercial Principal Building Addition (explain) _____
Commercial Accessory Building (explain) _____
Commercial Accessory Building Addition (explain) _____
Commercial Other (explain) _____
Special/Conditional Use (explain) _____
External Improvements to Principal Building (explain) _____
External Improvements to Accessory Building (explain) _____

Residence sq. ft. _____
Residence w/deck-porch (# of bedrooms) _____
Residence sq. ft. _____ Porch sq. ft. _____
Deck sq. ft. _____ Deck(2) sq. ft. _____
Residence sq. ft. _____ Garage sq. ft. _____
 Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) Stairway to lake
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES.

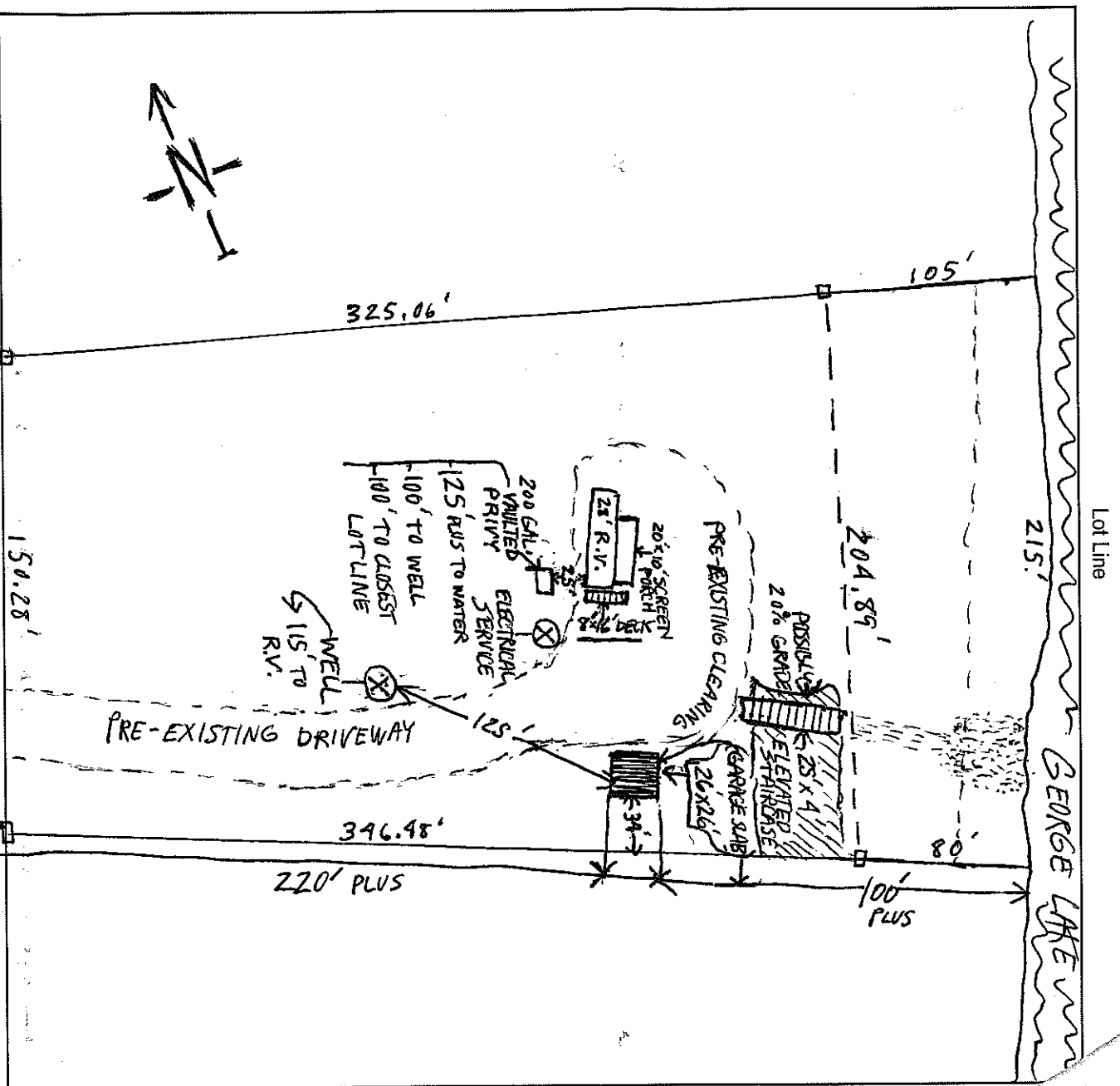
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) 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): [Signature] Date: 4-25-11
Address to send permit: 904 E. 5th Superior, WI 54880

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

Permit Issued: _____ State Sanitary Number: _____ Date: _____
Date: 5-10-11 Permit Number: 11-0101 Permit Denied (Date): _____

Reason for Denial: _____
Inspection Record: Meehock required setbacks Property lines per owner's representations By M. Tustala Date of Inspection: 5-3-11
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: Not to exceed 4' in width

Signed: [Signature] Michael Tustala 5-4-11
Inspector: _____ Date of Approval: _____



Name of Frontage Road Silver DOLF Dr. STILVERWOLF DR. CENTER

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.