

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 10 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.

Application No: 11-0110
 Date: 5-10-11
 Zoning District: R-1, R-3, Class 3
 Amount Paid: \$15.00 PDOS
5/10/11



LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Use Tax Statement for Legal Description

Legal Description 3 1/4 of 3 1/4 of Section 9 Township 44 North, Range 9 West, Town of Barnes
 Gov't Lot 3 Lot 3 Block Subdivision Parcel I.D. 04-004-3-44-09-09-1-05-003-02000
 Volume 760 Page 1006 of Deeds Parcel I.D. 04-004-3-44-09-09-1-05-003-02000
 North, Range 9 West, Town of Barnes
 CSM # 011, 034, 715 Acreage 1.526

Property Owner Scott Wheeler Contractor SELF (Phone)

Address of Property 50930 Birk Lake Rd Plumber (Phone)

Barnes, WI 54873 Authorized Agent (Phone)

Telephone 795-2745 (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 Basement: Yes No Number of Stories 1

Fair Market Value \$15,000 Square Footage 896 sq ft Sanitary: New Existing Privy City

USE: 38' x 32' Type of Septic/Sanitary System COMU

* Residence or Principal Structure (# of bedrooms) Mobile Home (manufactured date)

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)

Residence sq. ft. Garage sq. ft. Special/Conditional Use (explain)

Residential Addition / Alteration (explain) External Improvements to Principal Building (explain)

Residential Accessory Building (explain) garage External Improvements to Accessory Building (explain)

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

Residential Other (explain) External Improvements to Accessory Building (explain)

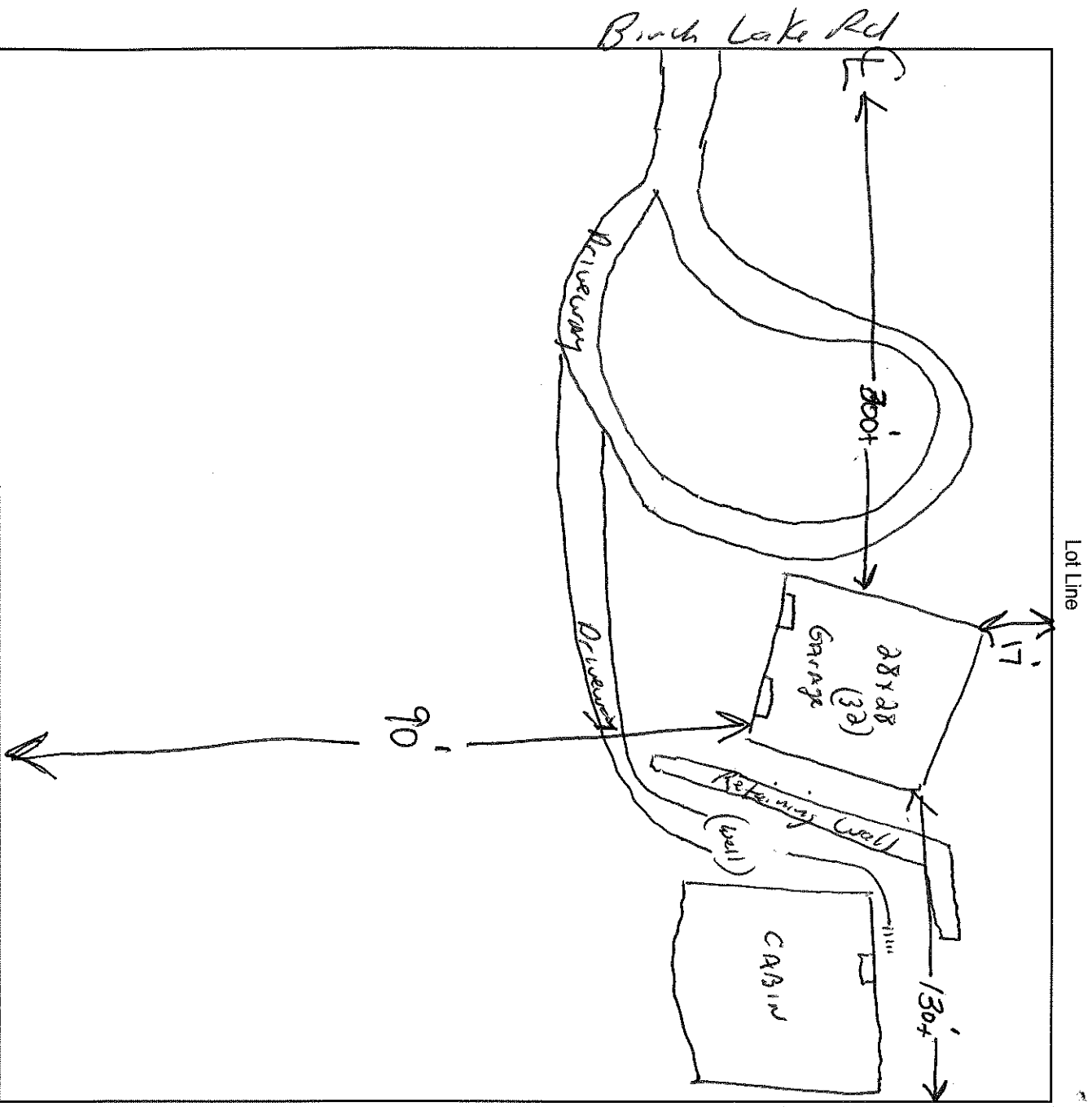
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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) [Signature] Date 5-10-11
 Address to send permit same as above
 ATTACH
 Copy of Tax Statement or
 Attach a Copy of Recorded Deed

APPLICANT - PLEASE COMPLETE REVERSE SIDE
 Permit Issued: 5-10-11 State Sanitary Number 11-0110 Date
 Date 5-10-11 Permit Number 11-0110 Permit Denied (Date)

Reason for Denial:
 Inspection Record: Well staked. Meets all setbacks. Property lines per owner's representations. By M. Fustak. Date of Inspection 5-10-11
 Mitigation Plan Required: Yes No Variance (B.O.A.) #
Sub-standard setbacks 6-30-09

Condition: Not to be used for human habitation. No water under pressure in structure.

Signed Michael Fustak Date of Approval 5-11-11
 Inspector



Name of Frontage Road (Birch Lake Rd.)

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:

<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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
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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.