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\$75

ENTERED

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
JUN 07 2011

Bayfield Co. Zoning Dept.

Application No.: 11-0185
Date: 6-22-11
Zoning District: R-3 Class 1
Amount Paid: \$75.00 PDS
6/7/11

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.

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 _____ Township _____ 44 North Range _____ 9 West Town of _____ Barnes
Gov't Lot _____ 1 Lot _____ 1 Block _____ Subdivision _____ V.2, P.152 CSM # _____ 1.756

Volume 315 Page 170 of Deeds Parcel I.D. 04-004-2-44-01-01-2, 05-001-30000
Property Owner THOMAS + SYNTHIA STORM Contractor ECONOMY GARAGES (Phone) 218-729-5106
Address of Property 6270 SMITH LAKE RD Plumber NONE (Phone) 1-800-582-3600

Telephone 218-728-6368 218-355-8429 Cell 218-724-9832
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 \$24,000 Square Footage 1,200 Sanitary: New _____ Existing _____ Privy _____ City _____
Type of Septic/Sanitary System Conv.

Residence or Principal Structure (# of bedrooms) _____
Residence sq. ft. _____
Mobile Home (manufactured date) _____

Residence w/deck-porch (# of bedrooms) _____
Residence sq. ft. _____ Porch sq. ft. _____
Commercial Principal Building Addition (explain) _____

Deck sq. ft. _____ Deck(2) sq. ft. _____
Commercial Accessory Building (explain) _____
Residence w/attached garage (# of bedrooms) _____
Commercial Accessory Building Addition (explain) _____

Residence sq. ft. _____ Garage sq. ft. _____
Commercial Other (explain) _____
Residential Addition / Alteration (explain) _____
Special/Conditional Use (explain) _____

Residential Accessory Building Addition (explain) _____
External Improvements to Principal 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) Thomas C Storm Date 6/6/11
Address to send permit 1906 W. Keur Rd Duluth MN 55812 ATTACH
* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE (If you recently purchased the property Attach a Copy of Recorded Deed)

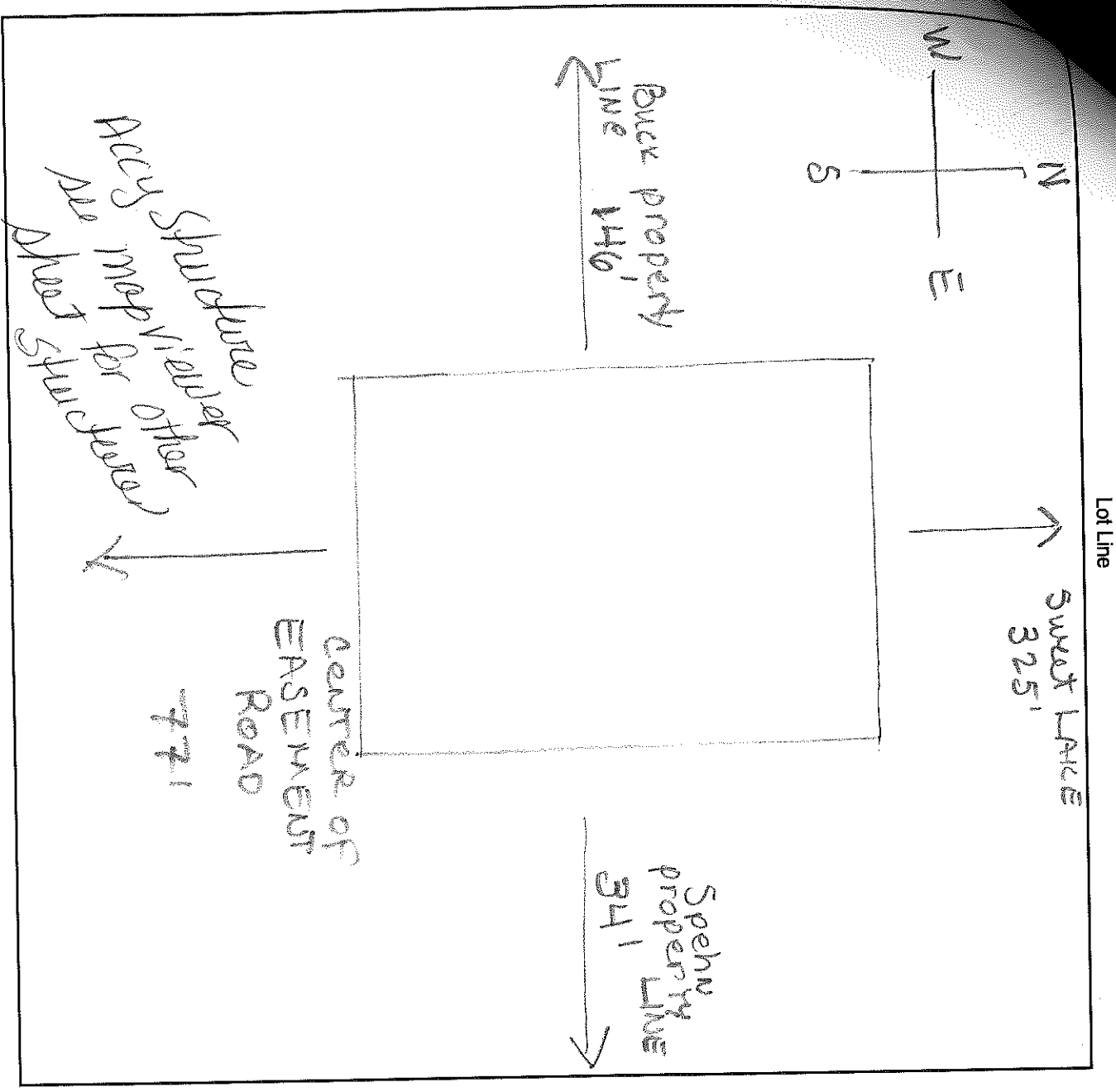
Permit Issued: _____ State Sanitary Number _____ Date _____
Date 6-22-11 Permit Number 11-0185 Permit Denied (Date) _____

Reason for Denial: _____
Inspection Record: Well staked. Metered setbacks. Property lines per owners representations. BY M. Furbak Date of Inspection 6-14-11

Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: No water under pressure in structure.

Signed Michael Furbak 6-15-11
Inspector _____ Date of Approval _____

Principal Structure - If not show other structures



Name of Frontage Road (SMITH 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:
 - 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.