

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
 AUG 17 2011
 Bayfield Co. Zoning Dept.

Application No: 11-0312
 Date: 9/2/11
 Zoning District: R-1 Class 3
 Amount Paid: \$504.00
 8/17/11
 Received

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: NE 1/4 of lots 22, 23, 24 1998 45th North, Range 09W West, Town of Barnes
 Legal Description: NE 1/4 of lots 22, 23, 24 1998 45th North, Range 09W West, Town of Barnes
 Gov't Lot: 22-24 Block Subdivision: Patawatoni Estates CSM # _____ Acreage: 1.572

Volume _____ Page _____ of Deeds Parcel ID: 04-004-2-45-09-18-1 00-360-21000
 Property Owner: Duane + Bonnie Schroeder/Plm, Contractor: American Home Sales/Phone: 715-634-5222
 Address of Property: 55965 Island Dr., Plumber: UTisch Plumbing
 Barnes WI 57873 Authorized Agent: Travis Buffenfeld (Phone) _____

Telephone: 218-624-2123 (Home) 218-624-8210 (Work)
 Is your structure in a Shoreland Zone? Yes No If Yes, Distance from Shoreline: greater than 75' 75 to 40' less than 40'

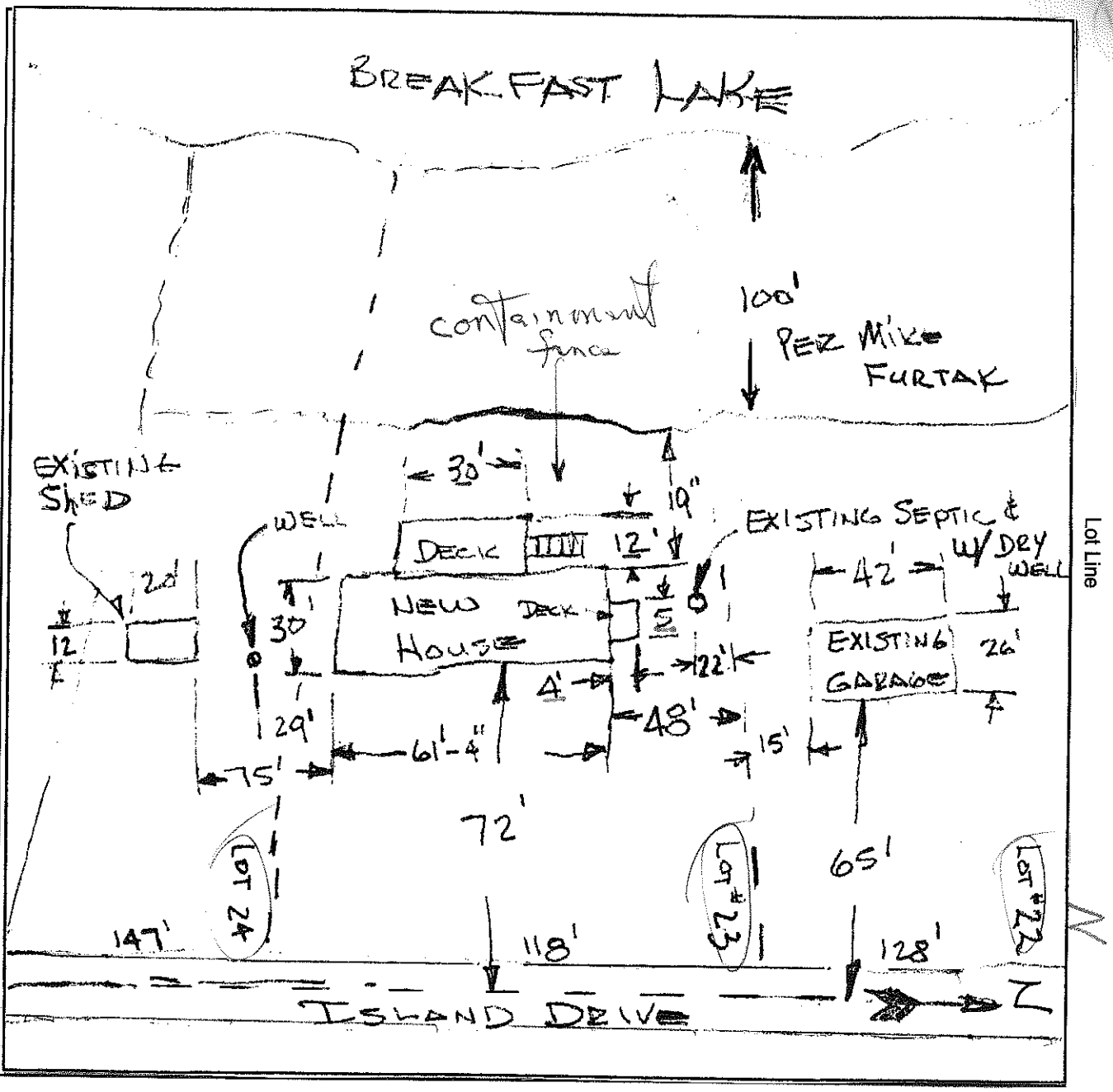
Structure: New Addition _____ Existing _____
 Fair Market Value _____ Square Footage _____
 Basement: Yes No _____ Number of Stories: 1
 Sanitary: New _____ Existing Privy _____ City _____
 Type of Septic/Sanitary System: Sifts
 Mobile Home (manufactured date) _____
 Written Authorization Attached: Yes No

Residence sq. ft. _____ Garage sq. ft. _____
 Residence w/deck-porch (# of bedrooms) 2
 Residence sq. ft. 1848 (30x10.4) Porch sq. ft. _____
 Deck sq. ft. 360 (30x12) Deck(2) sq. ft. (5x4) 20
 Residence w/attached garage (# of bedrooms) _____
 Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) _____
 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) _____

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) Shane McColme Date 8/13/11
 Address to send permit American Home Sales, 15328 State Road 27, WI 54883
 Copy of Tax Statement or ATTACH
 Attach a Copy of Recorded Deed

APPLICANT - PLEASE COMPLETE REVERSE SIDE
 Permit Issued: State Sanitary Number 24898 Date 9-17-09
 Date 9/2/11 Permit Number 11-0312 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Meets all standards. Well sited.
 By M. Furtak Date of Inspection 8-23-11
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: _____

Rec'd for Issuance SEP 1 2011 Signed Michelle Furtak Date of Approval 8-24-11
 Inspected Michelle Furtak
 Bayfield County Zoning Department
 Bayfield, WI



Name of Frontage Road Island Drive

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.