

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 07, 2010
 Bayfield Co. Zoning Dept.

Application No.: 10-0061
 Date: _____
 Zoning District: RKB, Class 1
 Amount Paid: \$120
4/7/10 / mj

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.

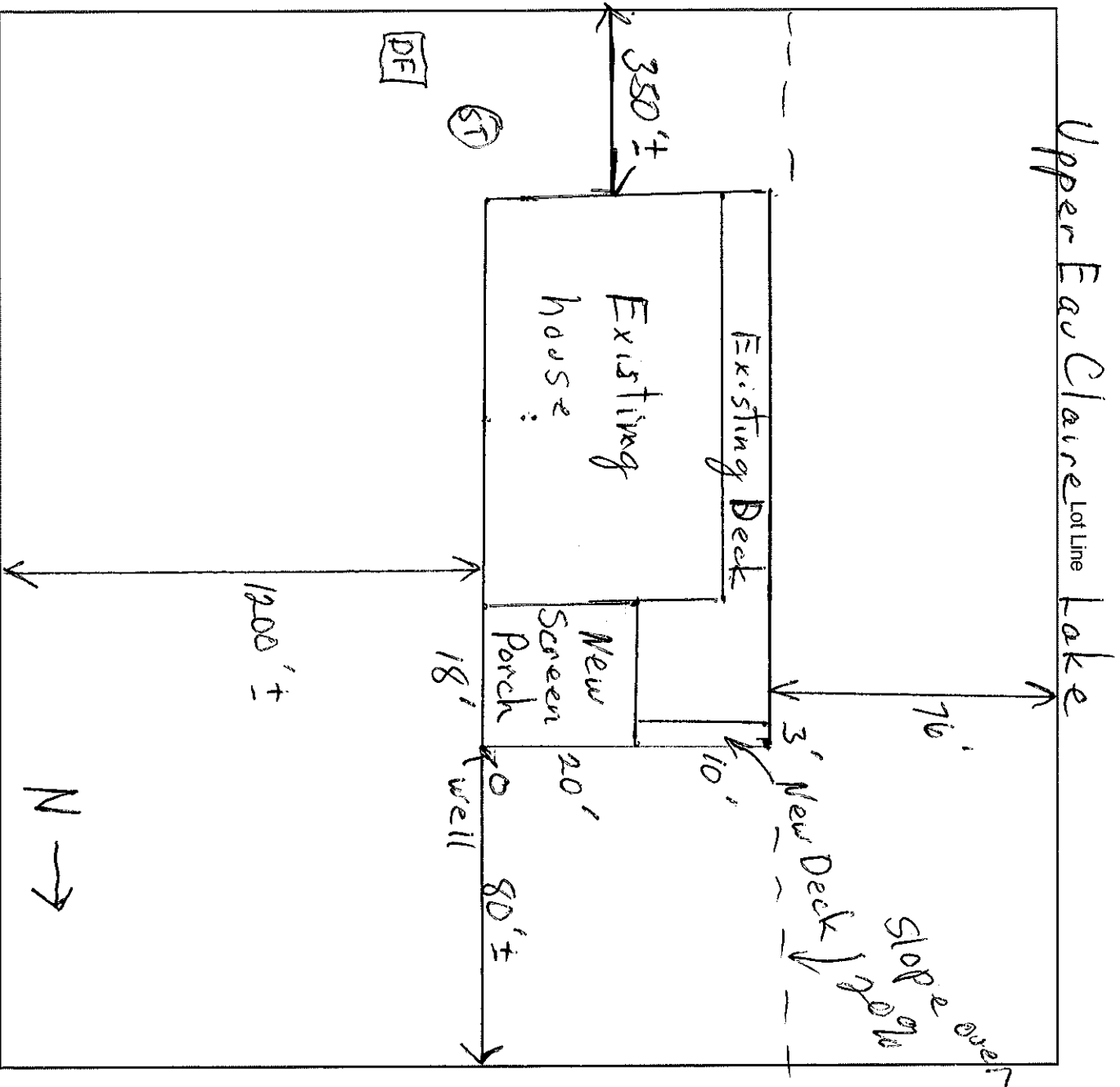
LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER _____
 Legal Description: NE 1/4 of S6L 1/4 of Section 11 Township 44 North, Range 9 West, Town of Barnes
 Gov't Lot 5 Lot 2 Block _____ Subdivision V.61 P.3 CSM # 862 Acreage 16.081
 Volume 633 Page 10 of Deeds _____ Parcel I.D. # 00410009002 Use Tax Statement for Legal Description _____
 Property Owner Paul Granggaard Contractor Ken LaCoy (Phone) 715/634-8609
 Address of Property 50195 Pease Rd. Plumber _____
Barnes, WI 54873 Authorized Agent Ken LaCoy (Phone) 715/634-8609

Telephone 612/942-8485 (Home) _____ (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 _____ Basement: Yes _____ No Number of Stories 1
 Estimated Cost of Construction \$40,000 Square Footage 360 Sanitary: New _____ Existing Privy _____ City _____
USE:
 * Residence of Principal Structure (# of bedrooms) _____ External Improvements to Principal Building (explain) _____
 Residence sq. ft. _____
 * Residence w/deck-porch (# of bedrooms) _____ Mobile Home (manufactured date) _____
 Residence sq. ft. _____ Porch sq. ft. _____
 Deck sq. ft. _____ Deck(2) sq. ft. _____
 * Residence w/attached garage (# of bedrooms) _____ Commercial Principal Building Addition (explain) _____
 Residence sq. ft. _____ Garage sq. ft. _____
 Residential Addition / Alteration (explain) Screened in porch Commercial Accessory Building Addition (explain) _____
 Residential Accessory Building (explain) _____ Commercial Other (explain) _____
 Residential Accessory Building Addition (explain) _____ Special/Conditional Use (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 4-6-10
 Address to send permit P.O. 781 Hayesville Wis 54873 Copy of Tax Statement ATTACH
 * See Notice on Back If you previously purchased the property Attach a Copy of Recorded Deed

APPLICANT — PLEASE COMPLETE REVERSE SIDE
 Permit Issued: _____ State Sanitary Number 282666 Date 9/3/96
 Date 4/7/10 Permit Number 10-0061 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Meets all setbacks. Property lines per owner's representations. By M. Fustak Date of Inspection 4-6-10
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: _____
 Signed Michael Fustak 4-7-10 Date of Approval
 Inspector _____ **Rec'd for Issuance**
 APR 7, 2010
 Secretarial Staff



Name of Frontage Road (Pease Rd)

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location, size and dimensions of the structure - (include any deck(s), porch or garage)
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. 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. Septic tank to closest lot line
 - e. Septic tank to building
 - f. Septic tank to well
 - g. Septic 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. Drain field to closest lot line
 - l. Drain field to building
 - m. Drain field to well
 - n. Drain field to lake, river, stream or pond.
 - o. Well to building

IMPORTANT
 DETAILED PLOT PLAN
 IS NECESSARY, FOLLOW
 STEPS 1-7 (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, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.