

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**

Application No. 10-0063
 Date: _____
 Zoning District R-1, R-3
 Amount Paid: \$100
#4710 mg

RECEIVED
APR 07, 2010

INSTRUCTIONS: No permits will be issued until all fees are paid to 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 part of 1/4 of Section 5 Township 44 North, Range 9 West, Town of Barnes
 Gov't Lot 4 Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 2.757
 Volume 855 Page 435 of Deeds Parcel I.D. 04-004-2-44-09-05-1 05-004-17000

Property Owner Thomas Fankell Contractor SELF (Phone) _____
 Address of Property 2875 Bony Lake Rd Plumber _____
715 Barnes, WI 54873 Authorized Agent _____ (Phone) _____
 Telephone 723-1775 (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 _____
 Fair Market Value \$ Square Footage 1404 Sanitary: New Existing Privy _____ City _____
USE: 4' x 35' Type of Septic/Sanitary System Conv
 * Residence or Principal Structure (# of bedrooms) _____
 Residence sq. ft. _____
 * Residence w/deck-porch (# of bedrooms) _____
 Residence sq. ft. _____ Porch sq. ft. _____
 Deck sq. ft. _____
 * Residence w/attached garage (# of bedrooms) _____
 Residence sq. ft. _____ Garage sq. ft. _____

Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) walkway 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) Thomas Fankell Date 4-6-10
 Address to send permit 16138 81st Ave, Chippewa Falls, WI 54729 ATTACH
 * See Notice on Back (If you recently purchased the property Attach a Copy of Recorded Deed)

Permit Issued: _____ State Sanitary Number _____ Date _____
 Date 4/7/10 Permit Number 10-0063 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Meets all requirements.
 By M. Funtak Date of Inspection 4-6-10 Variance (B.O.A.) # _____
 Mitigation Plan Required: Yes No

Condition: Must use best management practices to prevent erosion and for siltation of lake.
 Signed Michael Funtak 4-7-10 Date of Approval _____
 Inspector _____
 Rec'd for Issuance _____

APR 7, 2010

Bayfield County

