

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

REGULATORY
 APR 21 2009
 Bayfield Co. Zoning Dept

ENTERED
 1

Application No: 09-0159
 Date: 4/14/09
 Zoning District: F-1 (E-14/12 acres)
 Amount Paid: Res \$125 - 4/21/09 mg
Balance: TBA - 5/17/09/mg
\$175

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: SE 1/4 of SW 1/4 of Section 35 Township 46 North, Range 9 West, Town of Barnes
 Gov't Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage _____

Volume 937 Page 898 of Deeds Parcel I.D. 04-004-2-46-09-35-3 04-000-50000

Property Owner Michael W. O'Neil Contractor Self (Phone) _____

Address of Property 5635 E Eightmile Lake Rd Authorized Agent _____ (Phone) _____

Barnes WI 54873
Cell 507/696-2346
 Telephone 507/833-2644 (Home) 507/837-439 (Work)
 Written Authorization Attached: Yes No

Is your structure in a Shoreland Zone? Yes No If yes, _____

Structure: New Addition Existing
 Fair Market Value 3,500 Square Footage 144'
 USE: _____

* Residence or Principal Structure (# of bedrooms) _____
 Residence sq. ft. 144'

* Residence w/deck-porch (# of bedrooms) _____
 Residence sq. ft. _____ Porch sq. ft. _____

* Residence w/attached garage (# of bedrooms) _____
 Deck sq. ft. _____ Deck(2) sq. ft. _____

* Residential Addition / Alteration (explain) _____
 Residence sq. ft. _____ Garage sq. ft. _____

Residential Accessory Building (explain) _____

Residential Accessory Building Addition (explain) _____

Residential Other (explain) Room for cabin on skids
see photos

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 OF 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) Michael Wood Date 4/14/09

Address to send permit 562 7th St NE Waseca MN 56093 ATACH

* See Notice on Back Copy of Tax Statement or Attach a Copy of Recorded Deed

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number 486400 Date 11-4-06

Date 5/22/09 Permit Number 09-0159 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Meets all setbacks, well stocked, Property lines per owner's representations. By MM Furtak Date of Inspection 4-28-09

Mitigation Plan Required: Yes No Variance (B.O.A.) # _____

Condition: _____

Rec'd of Record Signed Michael Furtak Date of Approval 4-29-09

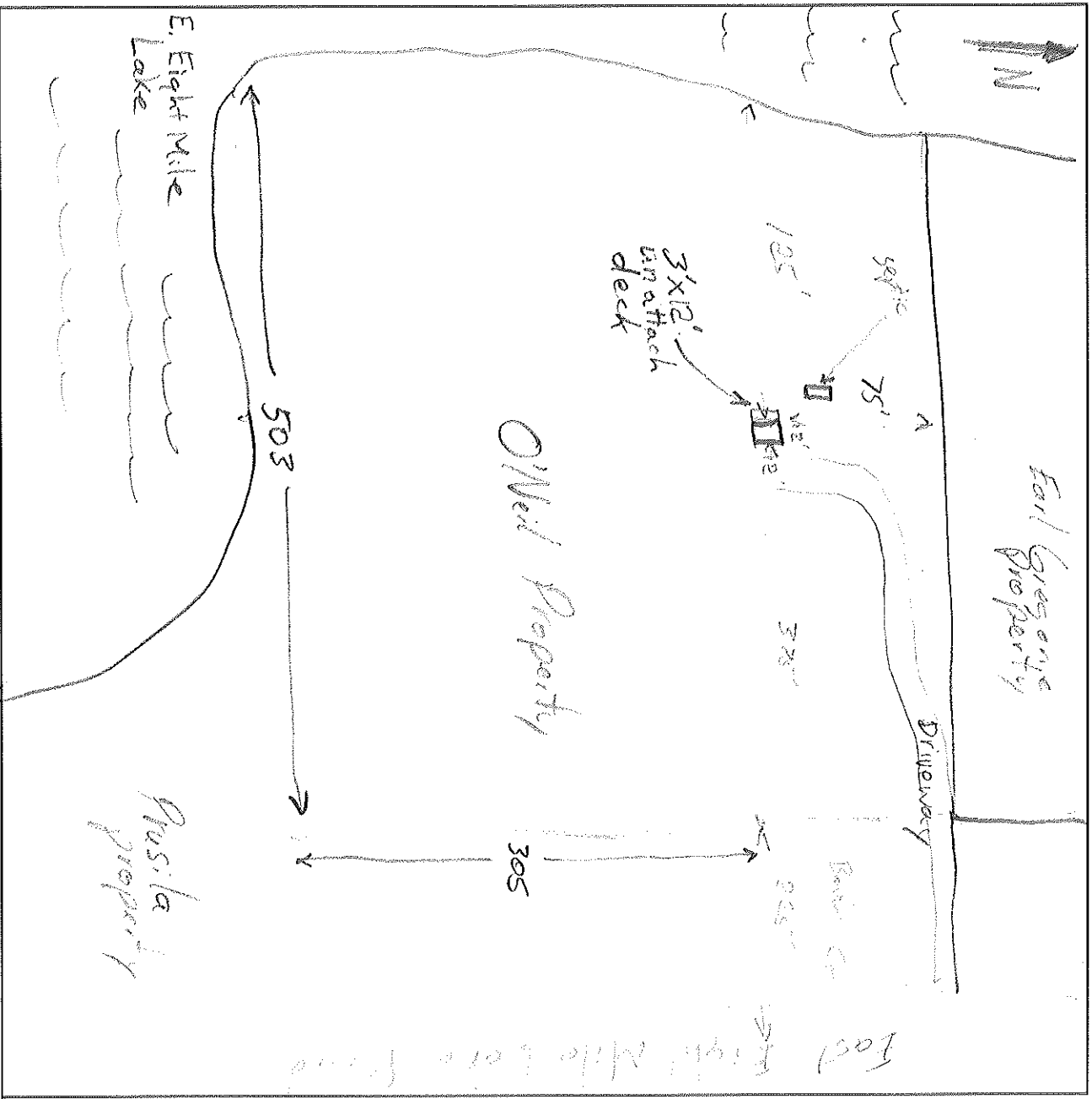
Acquired Rec'd for Issuance Inspector Michael Furtak Date of Approval _____

May 22, 2009 Rec'd for Issuance MAY 22, 2009

Secretarial Staff MAY 7, 2009 - Needs TBA

Secretarial Staff

Lot Line



Name of Frontage Road (E. Eight Mile 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.