

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

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 BY APPLICANT. Dept Changes in plans must be approved by the Zoning Department.

RECEIVED
 MAR 16 2009

ENTERED

Application No.: 09-0199
 Date: _____
 Zoning District R-1
 Amount Paid: _____

LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER _____
 Legal Description: N 1/2 Lot 80, 1/4 of Section 18 Township 45 North, Range 9 West, Town of Barnes
 Gov't Lot 16 + 27 Block _____ Subdivision Edwards - Barnes Acreage 5.69
 Volume 959 Page 350 of Deeds Parcel I.D. # 04-004-1-45-09-18-4- Use, Tax Statement for Legal Description
 Property Owner DIANNE HESS Contractor 00-200-13000 (Phone) 100-1341-20000-100-200-19000
 Address of Property 55530 GEORGETOWN BARNES, WI 54873 Plumber _____ Authorized Agent _____ (Phone) _____

Telephone 763-572-9018 (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 _____
 Estimated Cost of Construction _____ Square Footage _____ Sanitary: New _____ Existing _____ Privy _____ City _____

- USE:
- * Residence of Principal Structure (# of bedrooms) _____
 - Residence sq. ft. _____
 - * Residence w/deck-porch (# of bedrooms) _____
 - Residence sq. ft. _____ Porch sq. ft. _____
 - Deck sq. ft. _____ Deck(2) 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) _____
 - Mobile Home (manufactured date) _____
 - Commercial Principal Building _____
 - Commercial Principal Building Addition (explain) _____
 - Commercial Accessory Building (explain) _____
 - Commercial Accessory Building Addition (explain) _____
 - Commercial Other (explain) _____
 - Special/Conditional Use (explain) Home Based Business
 - 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) Dianne Hess Date 3/10/09
 Address to send permit 4225 Merrill Ln #19 Plymouth, WI 55446 ATTACH Copy of Tax Statement

* See Notice on Back APPLICANT — PLEASE COMPLETE REVERSE SIDE If you previously purchased the property Attach a Copy of Recorded Deed

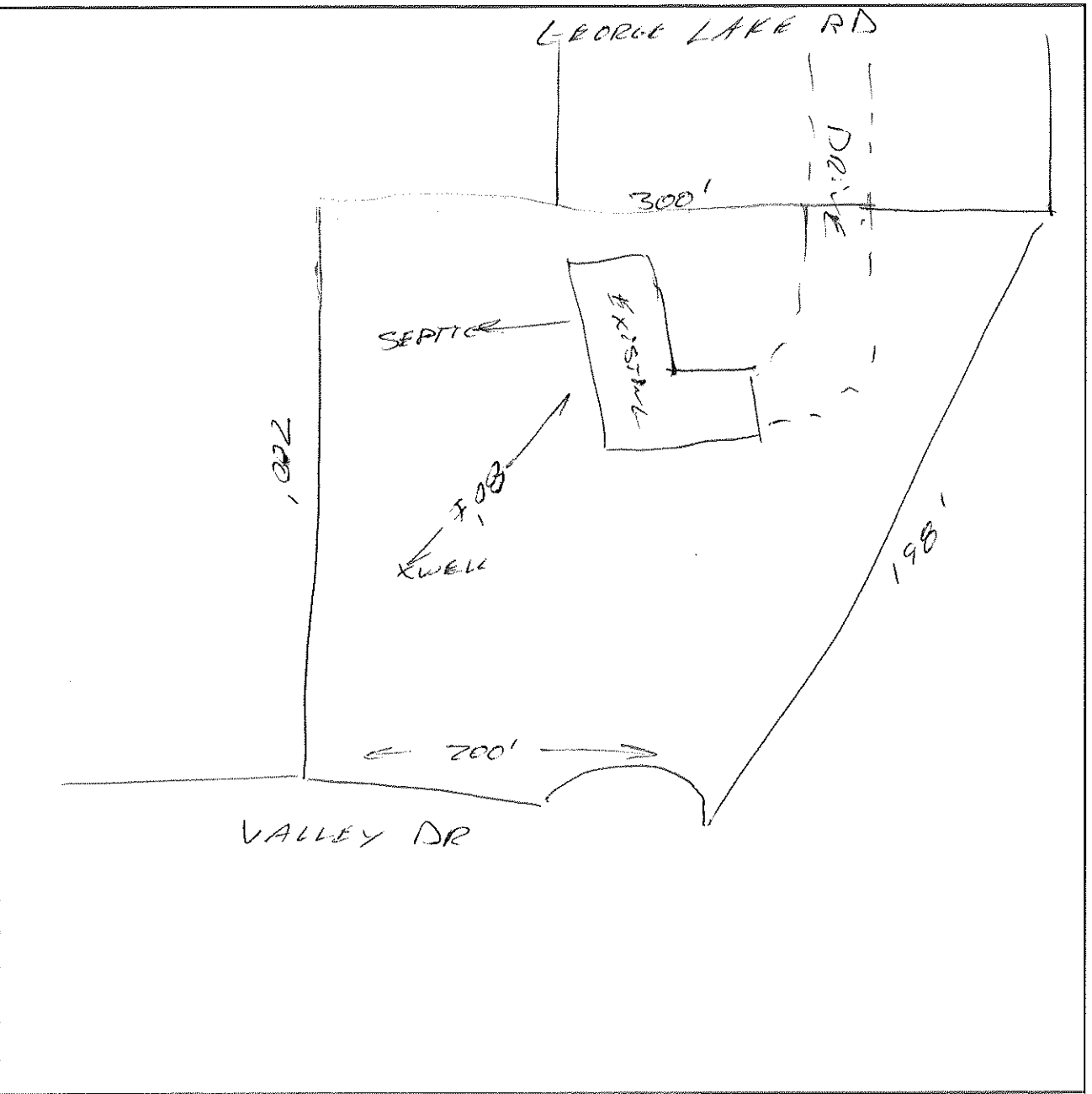
Permit Issued: _____ State Sanitary Number _____ Date _____
 Date 6/5/09 Permit Number 09-0199 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: Structures are existing. Date of Inspection 3-24-09
 By M. Funtok Variance (B.O.A.) # _____
 Mitigation Plan Required: Yes No
 Condition: See ZC decision and affidavit
 Signed Michael Funtok Date of Approval 5-27-09
 Inspector _____
 Rec'd for Issuance

SENT BY ZONING

JUN 9 2009

Secretarial Staff

Lot Line



Name of Frontage Road GEORGE 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 - (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:

<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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
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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.

