

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Application No. 09-0320 ENTERED
Date: _____
Zoning District R-3 Class 2
Amount Paid: 75 7/31/09 mg

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County Zoning Department
P.O. Box 58
Washburn, WI 54891
(715) 373-6138

RECEIVED
JUL 30 2009

INSTRUCTIONS: No permits will be issued until all fees are paid to the Bayfield County Zoning Department. 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 4 1/4 of Section 2 Township 44 North, Range 9 West, Town of Barnes

Gov't Lot 4 Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 2.6666

Volume 327 Page 226 of Deeds Parcel I.D. 04-004-2-44-09-02-3 05-004-02000

Property Owner Robbin Larson Contractor self (Phone) _____

Address of Property 5149 S Smith Lake Rd Plumber _____

Barnes, WI 54873 Authorized Agent _____ (Phone) _____

Telephone 497-3979 (Home) _____ (Work) _____ Written Authorization Attached: Yes No

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

Fair Market Value \$6,000 Square Footage 1,200 ft Sanitary: New _____ Existing Privy _____ City _____

USE: _____ Type of Septic/Sanitary System CONV

* Residence or Principal Structure (# of bedrooms) _____ Mobile Home (manufactured date) _____

Residence sq. ft. _____ Commercial Principal Building _____

* Residence w/deck-porch (# of bedrooms) _____ Commercial Principal Building Addition (explain) _____

Residence sq. ft. _____ Porch sq. ft. _____ Commercial Accessory Building (explain) _____

Deck sq. ft. _____ Deck(2) sq. ft. _____ Commercial Accessory Building Addition (explain) _____

* Residence w/attached garage (# of bedrooms) _____ Commercial Other (explain) _____

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

Residential Accessory Building (explain) garage Special/Conditional Use (explain) _____

Residential Accessory Building Addition (explain) _____ External Improvements to Principal Building (explain) _____

Residential Other (explain) _____ External Improvements to Accessory Building (explain) _____

Owner or Authorized Agent (Signature) Robbin Larson Date 7-28-09

Address to send permit 225 40th St, Clear Lake, WI 54005 ATTACH _____

* See Notice on Back Copy of Tax Statement or (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number _____ Date _____

Date 08/07/09 Permit Number 09-0320 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Well staked. Meets all setbacks. Property lines per

town's representations By M. Fustak Date of Inspection 7-30-09

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

Condition: Not to be used for human habitation.

Record for Issuance Signed Michael Fustak 7-30-09 Date of Approval _____

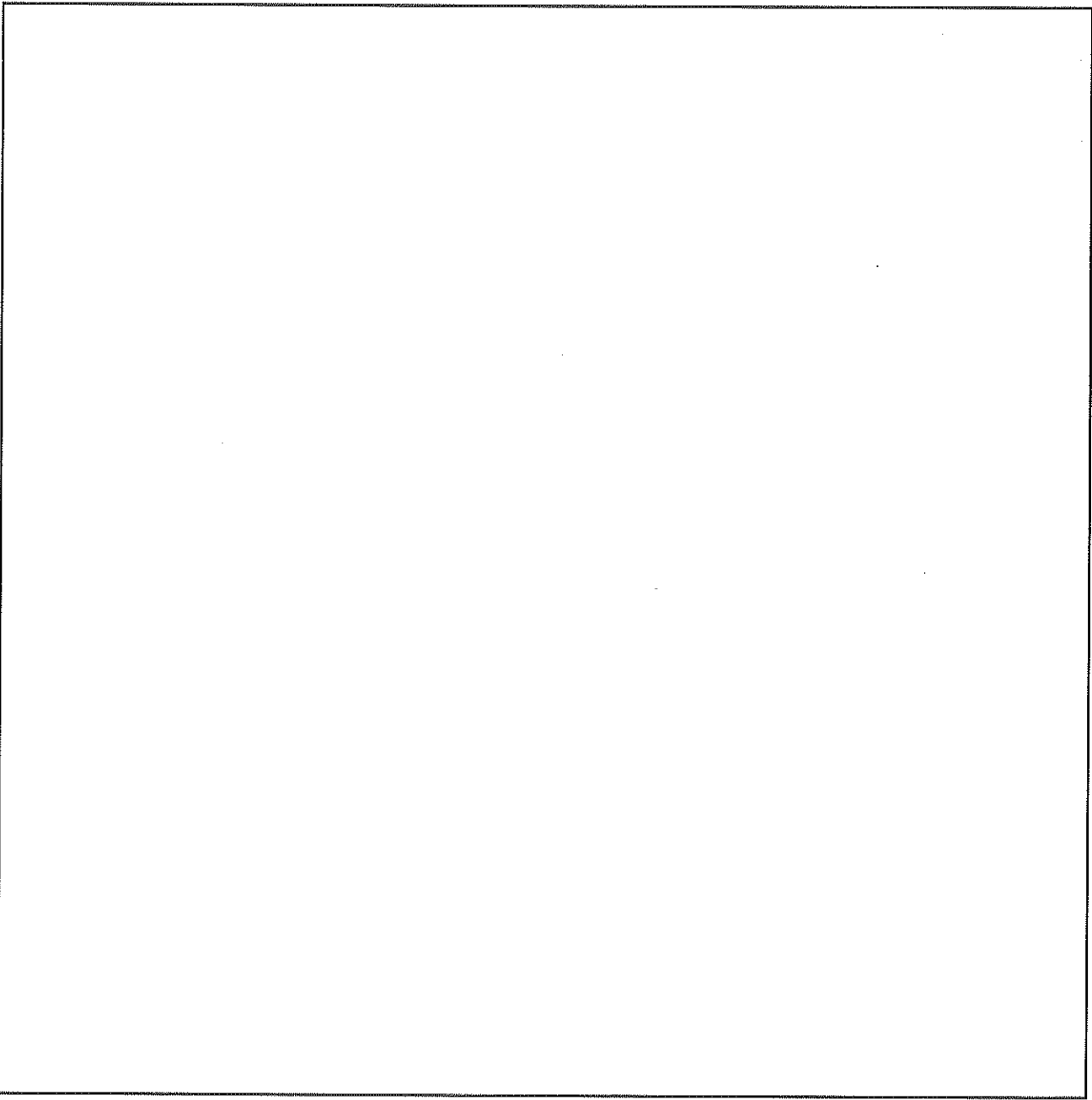
Inspector Michael Fustak Rec'd for Issuance _____

JUL 31 2009

Re'd to MF for F.M.V. Secretarial Staff

AUG 5 2009

Secretarial Staff



Name of Frontage Road (_____)

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:

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