

SUBMIT COMPLETED 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  
AUG 19 2009

INSTRUCTIONS: No permits will be issued until all fees are paid. 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

Legal Description 2 1/4 of 20 Township 44 North, Range 09 West, Town of Barves

Gov't Lot 2 Lot C Block 660 Acreage 2.172

Volume 747 Page 1552 04-004-2-44-09-20-1 Subdivision via plat

Parcel I.D. # 05-003-09000 Use Tax Statement for Legal Description

Property Owner Bruce + Nancy Reehl (Reihl) Contractor Northbedrecreationa (Phone) 715-6341-6366

Address of Property 48615 Stone Rd Plumber Hopkins Sand + gravel 715-866-4157

Telephone 715-795-2867 (Home) 715-435-9788 (Work) Authorized Agent Jim Daniels (Phone) \_\_\_\_\_

Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_ Written Authorization Attached: Yes  No

Structure: New  Addition  Existing  Basement: Yes  No  Number of Stories 2

Estimated Cost of Construction 279,000 Square Footage 1,848 Sanitary: New  Existing  Privy \_\_\_\_\_ City \_\_\_\_\_

USE: 1280 sq ft 563 sq ft deck = 6097 screen porch 16' x 16' = 256 sq ft

Residence (# of bedrooms) 4  Mobile Home (manufactured date) \_\_\_\_\_ (# of bedrooms) \_\_\_\_\_

Residence w/deck-porch (# of bedrooms) 4  Commercial Principal Building \_\_\_\_\_

Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Principal Building Addition (explain) \_\_\_\_\_

Residential Addition (explain) \_\_\_\_\_  Commercial Accessory Building (explain) \_\_\_\_\_

Residential Accessory Building (explain) \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_

Residential Accessory Building Addition (explain) \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_

Residential Other (explain) \_\_\_\_\_  Special/Conditional Use (explain) \_\_\_\_\_

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) Alford Guntak Date 8-17-09

Address to send permit 10636 Hayward Ct Hayward WI 54843 ATTACH Copy of Tax Statement

APPLICANT — PLEASE COMPLETE REVERSE SIDE

OFFICE USE ONLY

Permit Issued: \_\_\_\_\_ State Sanitary Number 09-1015 Date 8/27/09

Permit Number 8/27/09 Date 09-0372 Permit Denied (Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Inspection Record: Well staked. Meets all setbacks. Property lines per agents representation. By M. Funtak Date of Inspection 8-18-09

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

Condition: \_\_\_\_\_

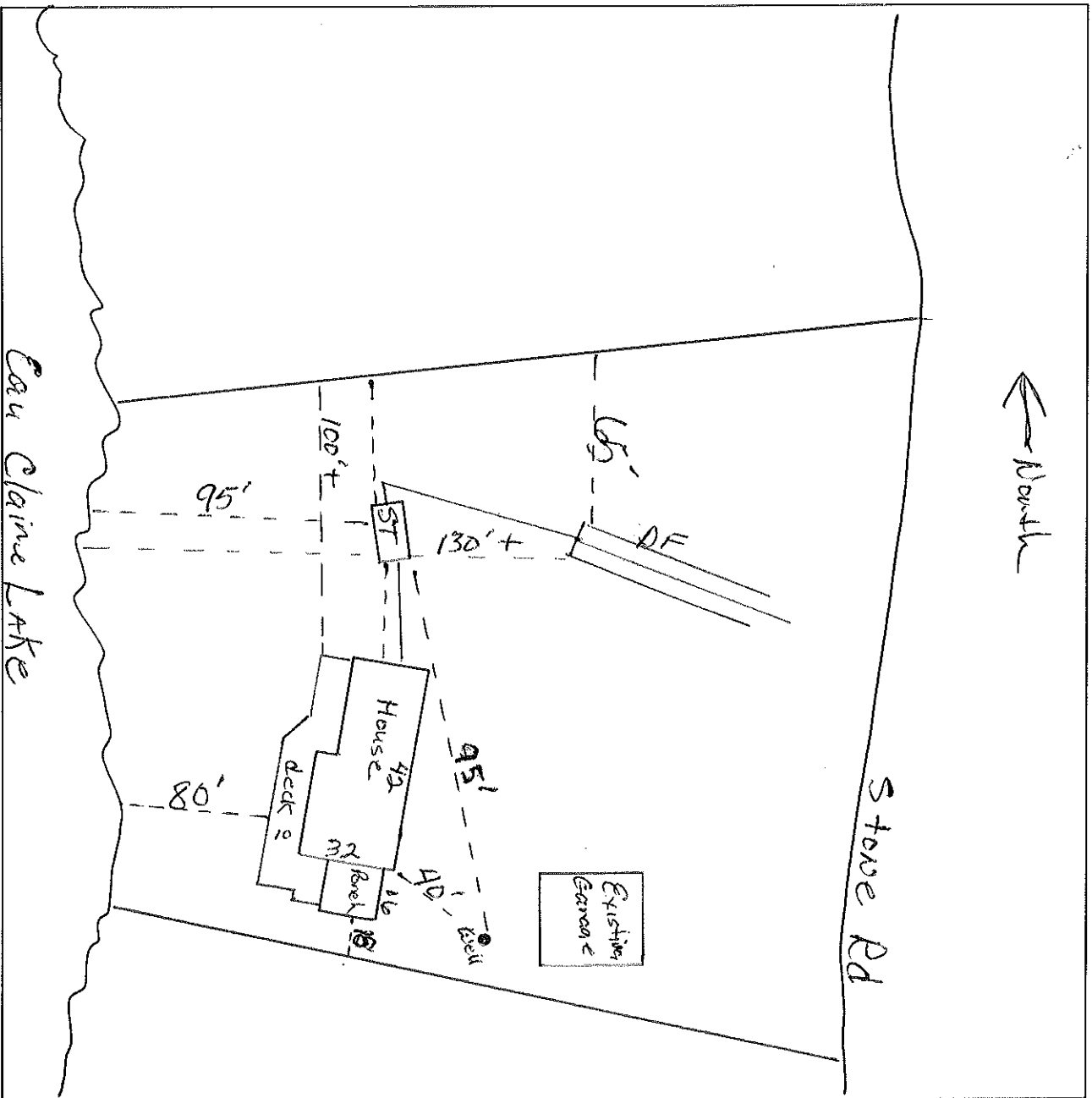
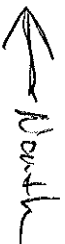
Received for reference 8/27/09  
SIGNED M. Funtak August 18, 2009  
Secretary  
Inspector Michael Funtak Date of Approval 8-19-09

\$837

ENTERED

Office Use  
Application No.: 09-0372  
Date: \_\_\_\_\_  
Zoning District/Lakes Class: R-1 Class 1  
Amount Paid: 837.00  
8/25/09 mg

Lot Line



Lot Line

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 approximate location and size of the building.
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 COMPLETELY.

\*NOTICE: 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.