

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
RECEIVED

SEP 09 2009

SEP 08 2009

REMOVED

Application No: 09-0400
 Date: _____
 Zoning District: R-1
 Amount Paid: \$759/10/09 mg

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: _____ 1/4 of Section 19 Township 45 North, Range 9 West, Town of Barnes
 Gov't Lot _____ Lot 64-67 Block _____ Subdivision Paynee Add. to Pat. System Estates Acreage 3.398
 Volume 707 Page 95 of Deeds Parcel I.D. 04-004-2-45-09-19-1 00-244-32000
 Property Owner Stephen M Carey Contractor self (Phone) _____
 Address of Property 1650 Broken Arrow Trail Plumber Northland Bldgs. Inc
Barnes, WI 54873 Authorized Agent _____ (Phone) _____
 Telephone 795-3312 (Home) 398-7773 (Work)

Is your structure in a Shoreland Zone? Yes No If yes, _____
 Structure: New Addition _____ Existing _____
 Fair Market Value \$19,000 Square Footage 21016.41
USE: _____
 * 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) pole bldg.
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) _____

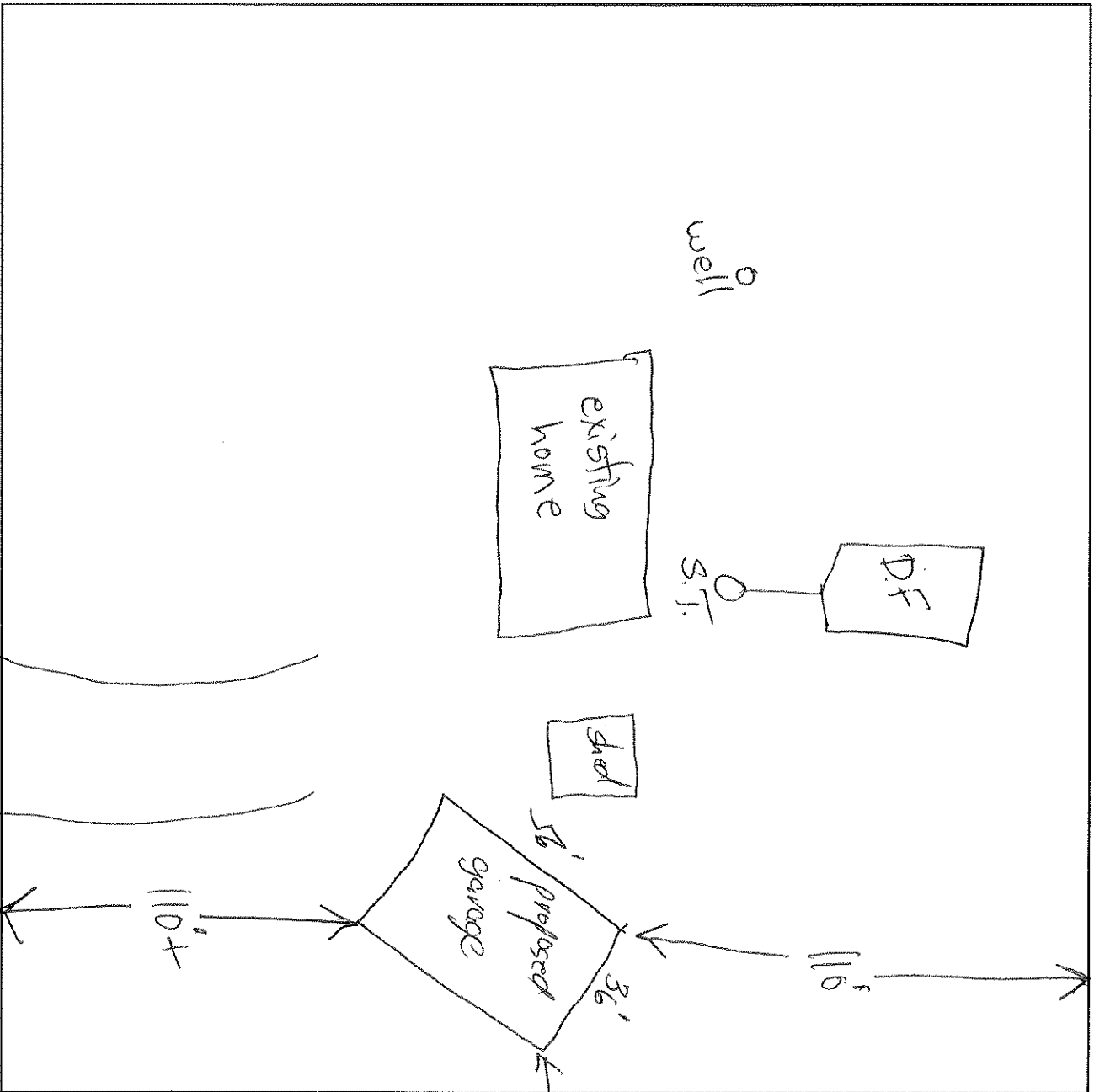
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES. I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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) Stephen Carey Date 9-4-09
 Address to send permit 2629 E. 3rd St / Superior, WI 54880

* See Notice on Back
 APPLICANT — PLEASE COMPLETE REVERSE SIDE
 Copy of Tax Statement or ATTACH
 (If you recently purchased the property Attach a Copy of Recorded Deed)

Permit Issued: _____ State Sanitary Number _____ Date _____
 Date 9-10-09 Permit Number 09-0400 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: well staked. Meets all setbacks. Property lines per owner's representations. By M. Futch Date of inspection 9-4-09
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: Not to be used for human habitation.
 Signed Michael Futch 9-8-09 Inspector _____
 Date of Approval _____
 Rec'd for Issuance _____
 SEP 10 2009
 Municipal Staff

Lot Line



Name of Frontage Road Broken Arrow Tr

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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.