

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**

Application No: 10-0200

Date: _____

Zoning District F-2 / No Lakes Class

Amount Paid: _____

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 13 Township 51 North, Range 5 West, Town of Bayfield

Gov't Lot _____ Lot _____ Block _____ Subdivision _____

Volume 134 Page 394 of Deeds Parcel I.D. 006-1099-02

Property Owner Bayfield County

Address of Property 117 East 5th St

Washburn WI 54891

Telephone _____ (Home) 715-373-6114 (Work) _____

Is your structure in a Shoreland Zone? Yes No **if yes.**

Structure: New _____ Addition _____ Existing _____

Fair Market Value _____ Square Footage _____

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. _____ 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) _____

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) [Signature] Date 2-11-10

Address to send permit 117 East 5th St Washburn WI 54891 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 6/25/10 Permit Number 10-0200 Permit Denied (Date) _____

Reason for Denial: _____ Date of Inspection _____

Inspection Record: Not Shoreland Zone, No Shoreland Wetlands w/15 30' Area Previously Logged

URAD SUP. By DDC Date of Inspection _____

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

Condition: See Z.C. Ordinance & Recommendations Cont.

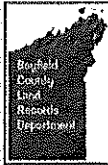
Signed [Signature] Inspector _____ Date of Approval 6-7-10

Rec'd for Issuance

JUN 27 2010

Secretarial Staff



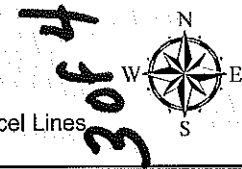


This map is not intended as a substitute for an accurate survey.

Potential Gravel Pit Site Approximately 12 Acres Part of Sections 13 & 24, T51N, R5W

This map was prepared by Bayfield County Land Records. Aerial image captured April 21, 2005.

Approximate Parcel Lines



1 inch = 400 feet



Section 13, T51N, R5W

Section 24, T51N, R5W

ECHO VALLEY RD

90°56'15" W, 46°53'25" N

90°56'12" W, 46°53'25" N

90°56'20" W, 46°53'24" N

90°56'11" W, 46°53'23" N

90°56'22" W, 46°53'22" N

90°56'28" W, 46°53'18" N

90°56'23" W, 46°53'18" N

90°56'28" W, 46°53'15" N

90°56'33" W, 46°53'14" N

90°56'30" W, 46°53'12" N