

**APPLICATION FOR SIGN**

**RECEIVED**  
JUN 06 2011

Bayfield County Planning and Zoning Department  
P.O. Box 58  
117 East Sixth Street  
Washburn, WI 54891  
Phone - (715) 373-6138

Bayfield Co. Zoning Dept.

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

|                 |                      |
|-----------------|----------------------|
| Office Use:     |                      |
| Application No. | 11-0191              |
| Date            | 7-1-11               |
| Fee Paid        | \$175.00 205         |
|                 | 6/6/11               |
|                 | \$5000.00 AS 6/16/11 |

Applicant Bayfield Storage LLC Contractor \_\_\_\_\_

Address 81595 STATE HWY 13 Authorized Agent Jon Nelson (owner)

Bayfield WI 54814 Agent's Telephone 715-292-7578

Telephone 715-292-7578 Written Authorization Attached: Yes ( ) No ( )

Accurate Legal Description involved in this request: Zoning District: Bayfield County

SE 1/4 of NE 1/4 of Section 22 Township 50 N. Range 04 W. Town of Bayfield CSM # lot 2 of 1624

Gov't Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Volume \_\_\_\_\_ Page \_\_\_\_\_ of Deeds Parcel I.D. # 04-006-2-50-04 ACREAGE 5.02  
-22-104-000-12000

Additional Legal Description: \_\_\_\_\_ ATTACH Copy of Tax Statement

Sign: On-premise  Off-premise  Sign: New  Replacement

Size of Sign: 6 Feet by 4 Feet Height of Sign: 7'6" Feet from grade to top of Sign

If this sign is off-premise, owner of property must complete the following:

I, \_\_\_\_\_, owner of the above described property, do hereby give my authorization for \_\_\_\_\_ to erect and maintain a sign on my property.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Property Owner  
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
APPLICANT - PLEASE COMPLETE REVERSE SIDE

For Office Use Only

Permit Issued: \_\_\_\_\_ Permit Number 11-0191 Permit Denied (Date) \_\_\_\_\_  
Date 7-1-11

Reason for Denial: \_\_\_\_\_  
Inspection Record: yes along 50' E 440' at E's ATTACHED to meet GOC requirements → permit into  
BE USED WADONK TRAIL BY ONE Date of Inspection 6-10-11

Variance (B.O.A.) # \_\_\_\_\_

Condition \_\_\_\_\_  
Signed [Signature] Rec'd for Issuance 6-13-11  
Inspector [Signature] JUN 28 2011 Date of Approval \_\_\_\_\_  
Verify road (road fee 50) PERMIT 7-1-11

and use frontage road as a guideline, and indicate North (N) on plot plan

Show the sign location

**IMPORTANT**  
Detailed Plot Plan is Necessary

3. Show dimensions in feet on the following:

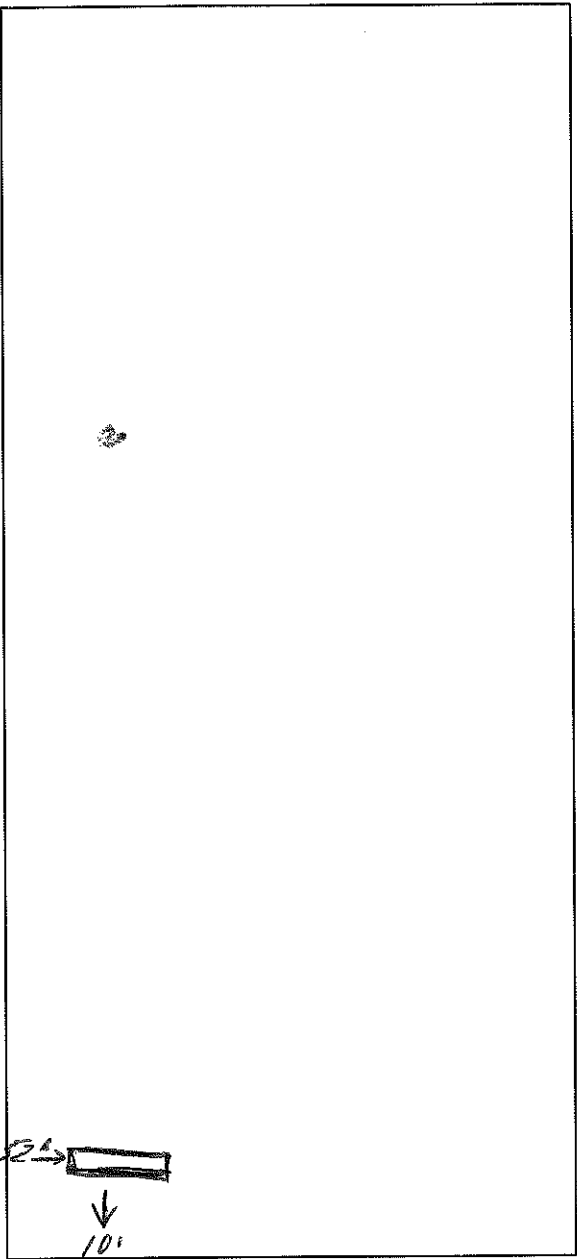
- a. Sign from centerline of road(s).
- b. Sign from right-of-way line
- c. Sign from property lines
- d. Sign from lake, river, stream or pond
- e. Sign from other signs (NONE)

Lot Line

N

Lot →  
Line

← Lot  
Line



53' ±  
OR



Name Frontage Road (STATE HW 13)

NOTICE: The local town, village, city, state or federal agencies may also require permits.  
Sign Plan  
(Fill in Information Desired on Sign)

*Bayfield Boat Storage*

*Exclusive Storage & Splash packages*

*HEATED winter Storage*

*Summer storage*

*715-209-0265 OR 715-292-7578*

*www.bayfieldboatstorage.com*

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.

I, the undersigned, attest that the information contained herein is accurate and true.

*[Signature]*  
Applicant's/ Agent's Signature

Date

*6-6-11*

*P.O. Box 1174 Bayfield WI 54814*  
Address to Mail Permit to