

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

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

RECEIVED

JAN 13 2009

Application No. 09-0017
Date: _____
Zoning District R-2
Amount Paid: RD \$75 Cash
1-15-09 MF

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 NW 1/4 of Section 24 Township 43 North, Range 8 West, Town of Cable
S 620' of E 620' lying NW of 0563
Gov't Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 5.996
Volume 980 Page 248 of Deeds Parcel I.D. 04-012-2-43-08-24-2 04-000-30000
Property Owner Michael Hoffman Contractor Self (Phone) _____
Address of Property Cable, WI 54821 42615 Short Rd
Telephone 798-3043 (Home) _____ (Work) _____

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 _____
Fair Market Value \$ 300 Square Footage 2884
Sanitary: New _____ Existing COMU City _____
Type of Septic/Sanitary System COMU
 Mobile Home (manufactured date) _____

* 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) quonset hut garage
 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) Michael Hoffman Date 1-15-09

Address to send permit same as above

ATTACH Copy of Tax Statement or (If you recently purchased the property Attach a Copy of Recorded Deed)

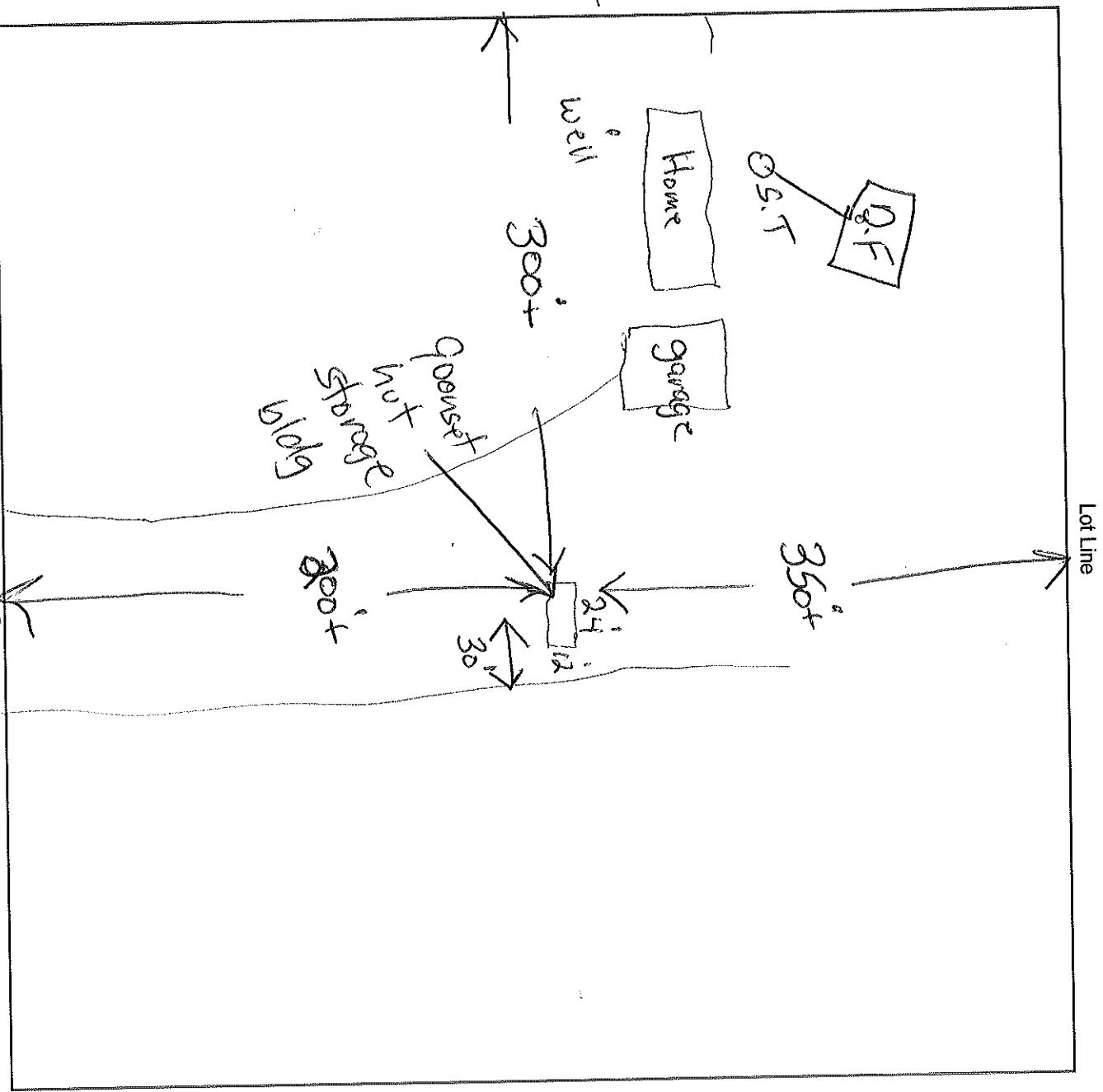
* See Notice on Back

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number _____ Date _____
Date 1/23/09 Permit Number 09-0017 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: Meets all setbacks Property lines per owner's representations By M. Furtak Date of Inspection 1-22-09
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: Not to be used for human habitation
Signed Michael Furtak Inspector Date of Approval 1-23-09
Rec'd for Issuance

JAN 23 2009

Secretarial Staff



Name of Frontage Road (Front Rd)

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.