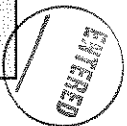


**APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN**

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

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.

Application No: 11-0690  
Date: 5-10-11  
Zoning District: ELB  
Amount Paid: \_\_\_\_\_



LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER \_\_\_\_\_  
Use Tax Statement for Legal Description W3300'

Legal Description SE 1/4 of NW 1/4 of Section 20 Township 43 North, Range 7 West, Town of Cable  
Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 9.0

Volume 692 Page 340 of Deeds Parcel I.D. 04-02-2-43-07-20-2 04-000-20000

Property Owner Karl Kastrosky Contractor SELF (Phone) \_\_\_\_\_

Address of Property Cable, WI 54821 Plumber \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 715 798-4434 (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

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  Basement: Yes \_\_\_\_\_ No  Number of Stories 1  
Fair Market Value \_\_\_\_\_ Square Footage 32756 - Primary New \_\_\_\_\_ Existing \_\_\_\_\_ Privy \_\_\_\_\_ City \_\_\_\_\_

USE: \_\_\_\_\_ 16 x 50 - Add 1 1/2 of Septic/Sanitary System CONV

\* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_  Mobile Home (manufactured date) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_  Commercial Principal Building \_\_\_\_\_

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

Residence sq. ft. \_\_\_\_\_ Porch sq. ft. \_\_\_\_\_  Commercial Accessory Building (explain) \_\_\_\_\_

Deck sq. ft. \_\_\_\_\_ Deck(2) sq. ft. \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_

\* Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_ Car/Boat Restroom

Residence sq. ft. \_\_\_\_\_ Garage sq. ft. \_\_\_\_\_  Special/Conditional Use (explain) \_\_\_\_\_ Home Based Business

Residential Addition / Alteration (explain) \_\_\_\_\_  External Improvements to Principal Building (explain) \_\_\_\_\_

Residential Accessory Building (explain) \_\_\_\_\_  External Improvements to Accessory Building (explain) \_\_\_\_\_

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

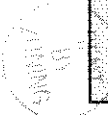
Residential Other (explain) \_\_\_\_\_

**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 the 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 3/21/2011  
Address to send permit 4295 McMiller Dr Cable WI 54821 ATTACH \_\_\_\_\_  
\* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE  
Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_  
Date 5-10-11 Permit Number 11-0090 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: \_\_\_\_\_

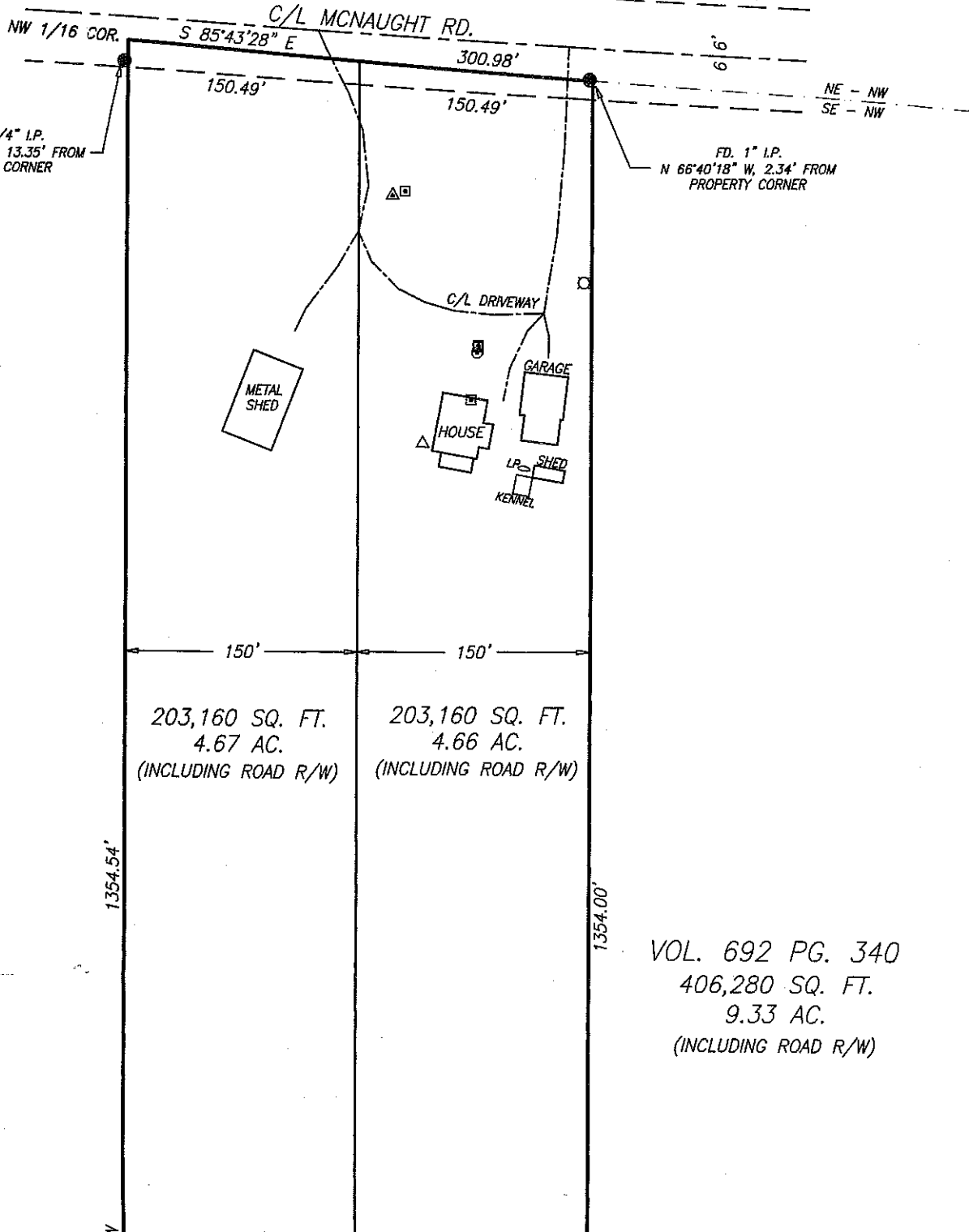
Inspection Record: Structures are existing. By M. Fuchsle Date of Inspection 4-28-11  
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_

Condition: See BOA decision & affidavit 75' 9" of Bldg = 1,944 sq. ft.  
Signed Michael Fuchsle Date of Approval 4-29-11  
Inspector \_\_\_\_\_



FD. 1-1/4" I.P.  
S 09°25'16" W, 13.35' FROM  
PROPERTY CORNER

FD. 1" I.P.  
N 66°40'18" W, 2.34' FROM  
PROPERTY CORNER



203,160 SQ. FT.  
4.67 AC.  
(INCLUDING ROAD R/W)

203,160 SQ. FT.  
4.66 AC.  
(INCLUDING ROAD R/W)

VOL. 692 PG. 340  
406,280 SQ. FT.  
9.33 AC.  
(INCLUDING ROAD R/W)