

APPLICATION FOR SIGN

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

RECEIVED
APR 29 2011
Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid to the Bayfield County Zoning Dept.
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.	11-0109
Date	5-12-11
Fee Paid	\$50.00 RDS
	5/9/11

Applicant Cable Nawahegon Historical Society Contractor self

Address 13405 Space St Authorized Agent Bob Rosmusser 1

Cable WI 54821 Agent's Telephone 715-798-4797

Telephone 715-798-5070 Written Authorization Attached: Yes (X) No ()

Accurate Legal Description involved in this request: Zoning District: C

1/4 of 1/4 of Section 18 Township 43 N. Range 7 W. Town of Cable

Gov't Lot 1 Lot 1 Block 8 Subdivision Assessor's Plat # 2 CSM # 1534

Volume 929 Page 742 of Deeds Parcel I.D. # 04012430718200160405 ACREAGE .23 V. # P148

Additional Legal Description: 4' adj. RR ROW in SE, NW ATTACH Copy of Tax Statement

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

Size of Sign: 5' Feet by 10' Feet Height of Sign: 10' 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 11-0109 Permit Denied (Date) _____
Date 5-12-11

Reason for Denial: _____
Inspection Record: Meets all setbacks. Property lines per agents

representations. By M. Fuchs Date of Inspection 4-28-11

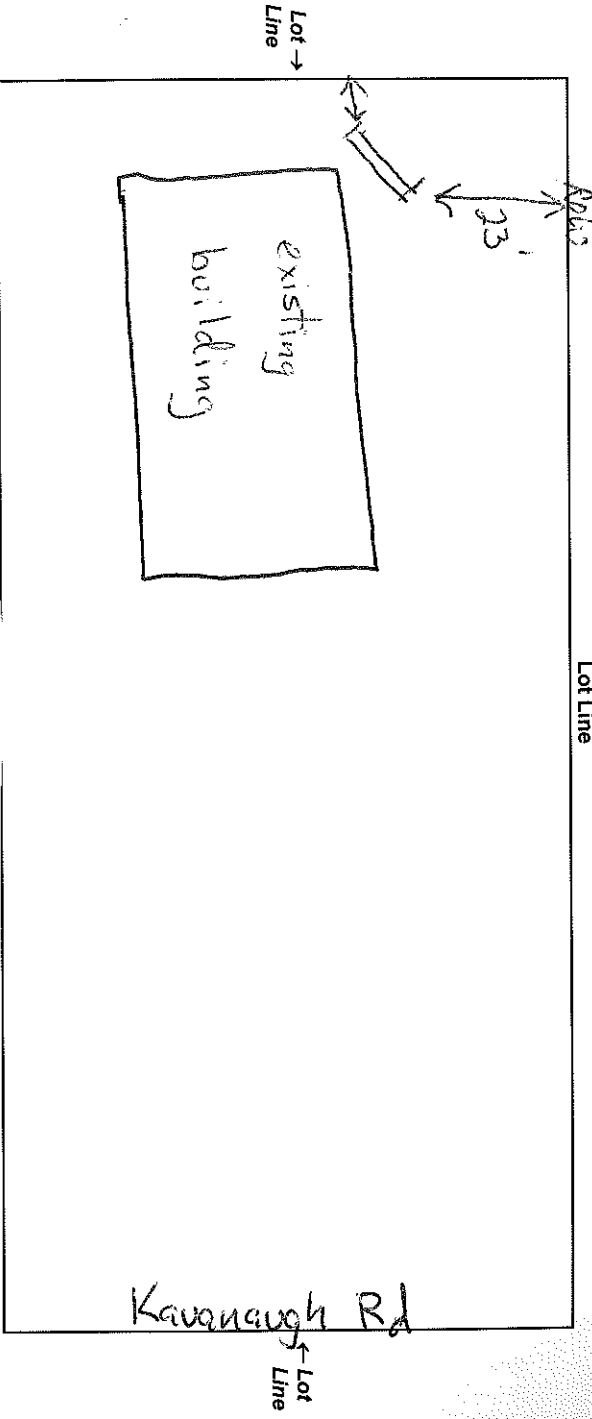
Variance (B.O.A.) # _____
Condition _____

Signed Michael Fuchs Date of Approval 5-6-11
Inspector

1. Name and use frontage road as a guideline, and indicate North (N) on plot plan
2. Show the sign location
3. Show dimensions in feet on the following:

IMPORTANT
Detailed Plot Plan is Necessary

- 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



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

see attached

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.

Robert A. Hammer

Applicant's/ Agent's Signature

Date

4-28-11

P.O. Box 44, Cable, WI 54921

Address to Mail Permit to