

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

RECEIVED
 JUN 16 2011

Application No.: 11-0199
 Date: 7-7-11
 Zoning District: R-1
 Amount Paid: \$75 Cash
 6-16-11 (MF)

INSTRUCTIONS: No permits will be issued until all fees are paid. Bayfield Co. 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.

LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER _____

Use Tax Statement for Legal Description

Legal Description SE 1/4 of S40 1/4 of Section 18 Township 43 North Range 7 West Town of Cable
 Parcel I.D. 04-012-2-43-07-18-2 00-116-12100

Gov't Lot 8 Block 17 Subdivision Assessor's Plat # 2 Acreage 1.75

Volume 869 Page 152 of Deeds Parcel I.D. 04-012-2-43-07-18-2 00-116-12100

Property Owner Clarence Karow Contractor self (Phone) _____

Address of Property 4395 Randsel Rd. Plumber _____ (Phone) _____

Cable WI 54821 Authorized Agent _____ (Phone) _____

Telephone 798-2436 (Home) _____ (Work) _____ Written Authorization Attached: Yes No

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 \$500 Square Footage 168 sq ft Sanitary: New Existing Privy City

USE: 13' x 14' Type of Septic/Sanitary System _____

* 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. _____ Deck sq. ft. _____ Commercial Accessory Building (explain) _____

Residence sq. ft. _____ Deck(2) sq. ft. _____ Commercial Accessory Building Addition (explain) _____

* Residential Addition / Alteration (explain) _____ Commercial Other (explain) _____

* Residential Accessory Building (explain) _____ Special/Conditional Use (explain) _____

* Residential Accessory Building Addition (explain) lean-to External Improvements to Principal Building (explain) _____

* Residential Other (explain) _____ External Improvements to Accessory Building (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 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) *Clarence Karow* Date 6-16-11

Address to send permit P.O. Box 58, Cable, WI 54821 ATTACH _____

* See Notice on Back Copy of Tax Statement or _____

APPLICANT - PLEASE COMPLETE REVERSE SIDE Attach a Copy of Recorded Deed _____

Permit Issued: State Sanitary Number _____ Date _____

Date 7-7-11 Permit Number 11-0199 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Meet all setbacks. Property lines per owner's representation. By M. Furtak Date of Inspection 6-23-11

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

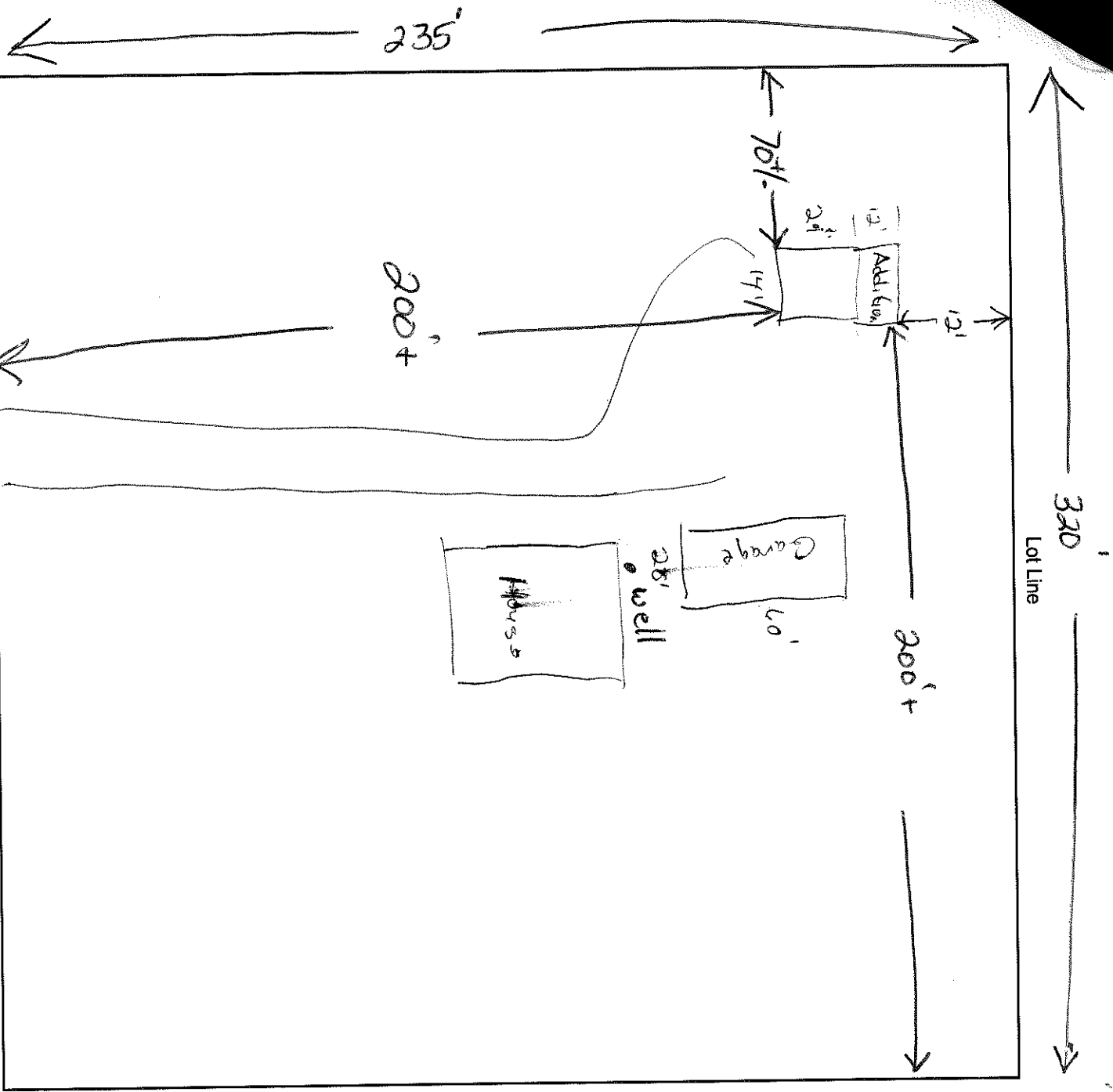
Condition: May not be used for human habitation. No water under pressure in structure.

Signed Michael Furtak Date of Approval 6-24-11

Rec'd for Issuance JUN -28 2011

Secretarial Staff

ENTERED



Name of Frontage Road Randysek 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.