

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
OCT 28 2008
Bayfield Co. Zoning Dept.

Application No.: 08-0620
Date: 08-02-08
Zoning District: R-1/Class 1
Amount Paid: \$1125.00 RAS
10/28/08

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 1/4 of 1/4 of Section 18 Township 48 North, Range 4 West, Town of BAYSDALE

Gov't Lot 4 Lot 1 & 1/2 Block 1 Subdivision RAT OF BAYH (B.O.A.) # Acreage 0.66

Volume 456 Page 112 of Deeds Parcel I.D. 00210702000

Property Owner BELWAUD J. LARSON / Bernard Larson Contractor Tim Brown Const. Inc (Phone) 715-692-5037

Address of Property 73030 BITCH GLOVE RD Plumber BROWN PLUMBING & HEATING

Washburn, WI 54891 Authorized Agent Tim Brown Const. Inc (Phone) 715-692-5037

Telephone 715 373 0443 (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 1/2

Fair Market Value 375,000.00 Square Footage 3,039 Sanitary: New Existing City

USE: * Residence or Principal Structure (# of bedrooms) 3 Type of Septic/Sanitary System INDIVIDUAL TANKS

Residence sq. ft. 3,039 1,998 footprint Mobile Home (manufactured date)

* Residence w/deck-porch (# of bedrooms) 3 Commercial Principal Building

Residence sq. ft. 1,05 Porch sq. ft. Commercial Principal Building Addition (explain)

Deck sq. ft. Deck(2) sq. ft. 450 Commercial Accessory Building (explain)

* Residence w/attached garage (# of bedrooms) Commercial Accessory Building Addition (explain)

Residence sq. ft. Garage sq. ft. Commercial Other (explain)

Residential Addition / Alteration (explain) Special/Conditional Use (explain)

Residential Accessory Building (explain) External Improvements to Principal Building (explain)

Residential Accessory Building Addition (explain) External Improvements to Accessory Building (explain)

Residential Other (explain)

Owner or Authorized Agent (Signature) Tim B Date 10-28-08

Address to send permit 422 320 ST W STE 102 WASHBURN WI 54806 ATACH

(Per Travis. Call Tim Brown to pick up permit 209-3979) Copy of Tax Statement or

* See Notice on Back (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT — PLEASE COMPLETE REVERSE SIDE

Permit Issued: State Sanitary Number 08-1845 Date 11/06/2008

Date 11/12/08 Permit Number 08-0620 Permit Denied (Date)

Reason for Denial

Inspection Record: Met on-site with Butch (LCP), Anna Kusti (Contractor) and Bud (owner), measured setbacks and worked on stormwater plan. Site was stipped and surveyed, met, requirements per contractor's representation. EOD. Travis Twilawitzky Date of inspection 11/03/2008

(Stormwater) residence will be completely removed prior to new construction. Bluff is currently stable and integrated plan required. Yes No Variance (B.O.A.) # we'll negotiate.

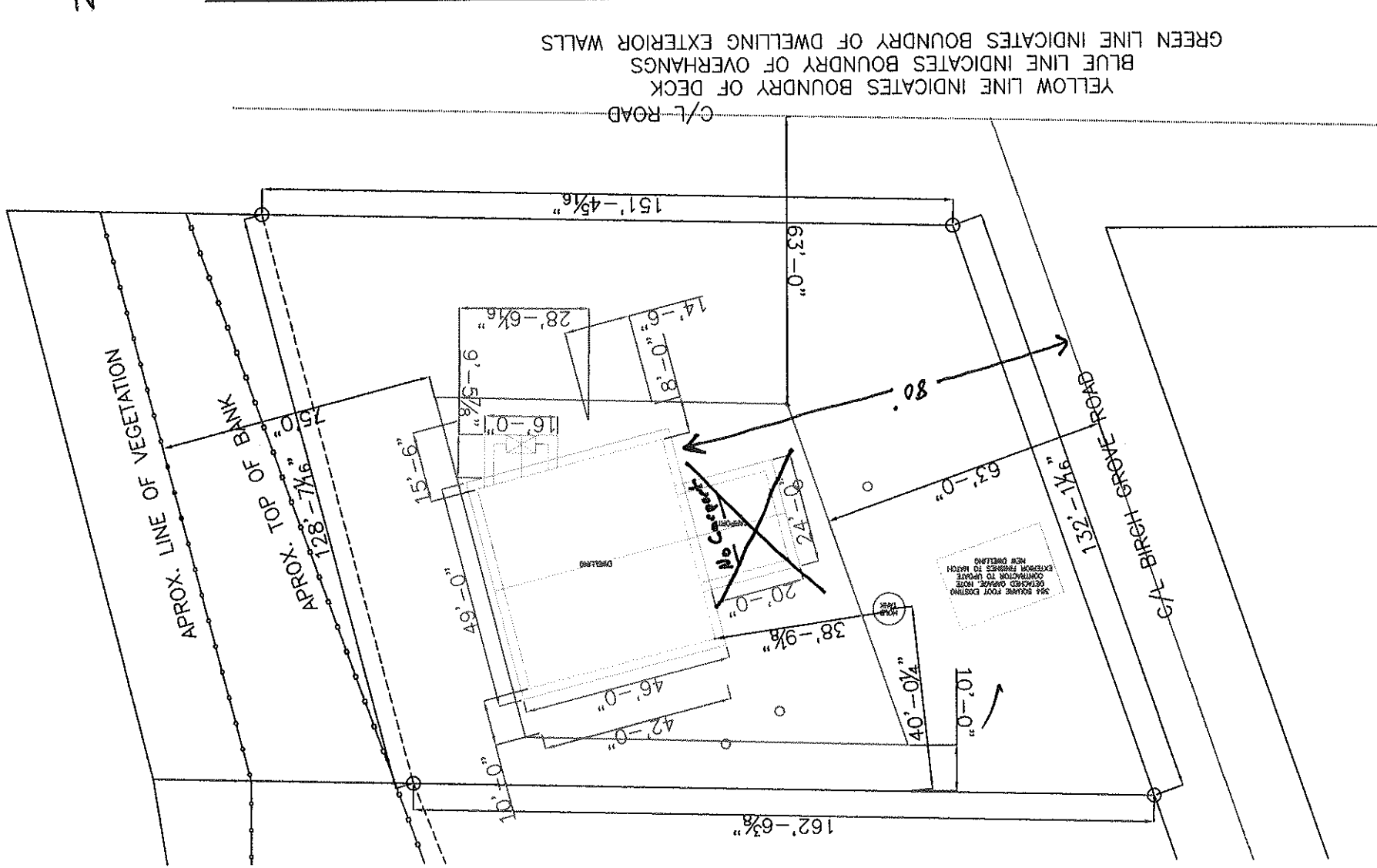
Condition: Per recorded Affidavit Stormwater management plan shall be

implemented within one (1) year from date of permit

Signed Travis Twilawitzky 11/12/2008 Date of Approval

Inspector

LAKE SUPERIOR



YELLOW LINE INDICATES BOUNDRY OF DECK
BLUE LINE INDICATES BOUNDRY OF OVERHANGS
GREEN LINE INDICATES BOUNDRY OF DWELLING EXTERIOR WALLS