

**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**  
 NOV 04 2009  
 Bayfield Co. Zoning Dept.

Application No: 09-0539  
 Date: \_\_\_\_\_  
 Zoning District: R-1/class 1  
 Amr Paid: 75 11/4/09  
mg

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 BARKSDALE

Gov't Lot 4 Lot 14542 Block 1 Subdivision PLAT OF Birch Grove S.M. # 04002-24804-183 Acreage 0.66  
 Volume 456 Page 112 of Deeds Parcel I.D. 002107202000 00-133-01000

Property Owner BERNARD J. LARSEN / BERNARD S. LARSON Contractor TIM BROWN CONSTR. INC (Phone) 715-682-5037  
 Address of Property 73030 BIRCH GROVE RD Plumber BROWN PLG. & HEATING  
WASHBURN WI 54891 Authorized Agent TIM BROWN (Phone) 715-682-5037

Telephone 715-323-0443 (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 \$15,000.00 Square Footage 300

USE:  \* 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) CAR PORT  
 Residential Accessory Building (explain) \_\_\_\_\_  
 Residential Accessory Building Addition (explain) \_\_\_\_\_  
 Residential Other (explain) \_\_\_\_\_

Basement: Yes  No \_\_\_\_\_ Number of Stories 1 1/2  
 Sanitary: New  Existing  Privy \_\_\_\_\_ City \_\_\_\_\_  
 Type of Septic/Sanitary System Holding Tanks  
 Mobile Home (manufactured date) \_\_\_\_\_  
 Commercial Principal Building \_\_\_\_\_  
 Commercial Principal Building Addition (explain) \_\_\_\_\_  
 Commercial Accessory Building (explain) \_\_\_\_\_  
 Commercial Accessory Building Addition (explain) \_\_\_\_\_  
 Commercial Other (explain) \_\_\_\_\_  
 Special/Conditional Use (explain) \_\_\_\_\_

External Improvements to Principal Building (explain) CAR PORT  
 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) Tim Brown Date 10-24-09

Address to send permit 422 3rd St. West STE 102 Ashland WI 54806 ATTACH

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

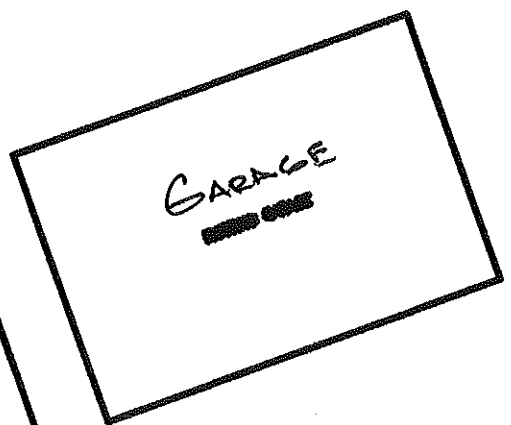
**APPLICANT — PLEASE COMPLETE REVERSE SIDE**

Permit issued: \_\_\_\_\_ State Sanitary Number 08-1845 Date 11/06/2008  
 Date 11/9/09 Permit Number 09-0539 Permit Denied (Date) \_\_\_\_\_  
 Reason for Denial: \_\_\_\_\_  
 Inspection Record: Meets code requirements for owner's agent representative.  
Proposed carport is 15'x20' w/overhangs.  
Property has been surveyed by Travis Tubertsky Date of inspection 11/05/2009  
and new holding tank installed.  
 Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_

Condition: \_\_\_\_\_  
 Signed Travis Tubertsky 11/05/2009 Date of Approval  
 Inspector

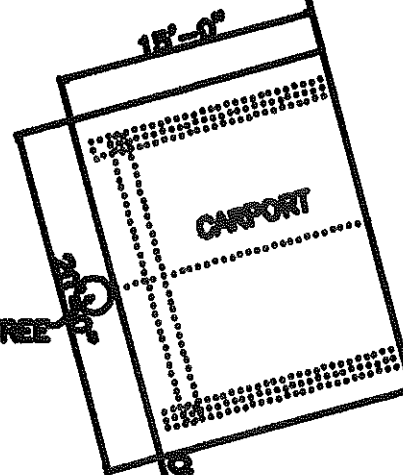
Holding Tank  
NORTH

C/L BIRCH GROVE ROAD



TREE

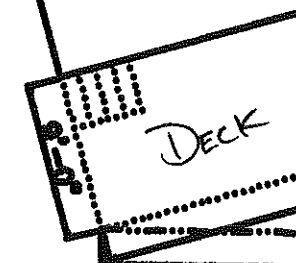
TREE



DRIVING



House



84'-0"  
64'-0"

CARPORT S.F. = 300