

**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**

MAR 18 2010

Application No. 10-0055  
 Date: \_\_\_\_\_  
 Zoning District: A-1/3  
 Amount Paid: 120 3/22/10  
MT

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 N1/4 of S1/4 1/4 of Section 26 Township 48 North, Range 9 West, Town of Oulu  
 Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 60.144  
 Volume \_\_\_\_\_ Page \_\_\_\_\_ of Deeds \_\_\_\_\_ Parcel I.D. 04-038-2-48-04-26-3 02-000-6000

Property Owner Bruce & Linda Carroll Contractor Self (Phone) (715) 372-5259  
 Address of Property 71360 Muskeg Rd Plumber N/A (Phone) 271-2480  
Iron River Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone (715) 271-2480 (Home) (715) 372-5259 (Work)  
 Is your structure in a Shoreland Zone? Yes  No  If yes, \_\_\_\_\_

Structure: New  Addition \_\_\_\_\_ Existing \_\_\_\_\_  
 Fair Market Value 40,000? Square Footage 1800  
**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) \_\_\_\_\_  
 Residential Accessory Building (explain) Garage/Storage  
 Residential Accessory Building Addition (explain) \_\_\_\_\_  
 Residential Other (explain) \_\_\_\_\_

Basement: Yes \_\_\_\_\_ No  Number of Stories 1  
 Sanitary: New \_\_\_\_\_ Existing  Privy \_\_\_\_\_ City \_\_\_\_\_  
 Type of Septic/Sanitary System \_\_\_\_\_  
 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) \_\_\_\_\_  
 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) Bruce Carroll Date 3-17-10

Address to send permit 1906 Hoochoom Ave Eau Claire WI 54701  
 (715) 271-2480  
 372-5259  
 \* See Notice on Back (If you recently purchased the property Attach a Copy of Recorded Deed)

Permit Issued: \_\_\_\_\_ State Sanitary Number \_\_\_\_\_ Date \_\_\_\_\_  
 Date 4/7/10 Permit Number 10-0055 Permit Denied (Date) \_\_\_\_\_  
 Reason for Denial: \_\_\_\_\_

Inspection Record: Structural Setbacks/Conditions As Represented By Assessor Appear to be Incompliant  
NO PERMIT MAY BE ISSUED BY DC Date of Inspection 4-1-10

Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
 Condition: \_\_\_\_\_

Signed [Signature] Inspector \_\_\_\_\_ Date of Approval \_\_\_\_\_  
NOTE - ALL DISTANCES REPRESENTED ARE  
KANTAR

NO SHE HAS DEFINED AT INSPECTION. Rec'd for Issuance

APR 6 2010  
 Secretarial Staff

North Lot Line

terraserver

DIGITALGLOBE



EAST Lot Line

Muskey Rd

South Lot Line

- 1. GARAGE To: (b) Road - 250'
- (A) E Lot Line - 1200'
- N Lot Line - 770'
- S Lot Line - 600'
- (C) Muskey Creek - 430'

- d i
- e - 25'
- f - 75'
- g - 430'
- h N/A
- i N/A
- j N/A
- k N/A
- o - 80'