

ENTERED

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
MAY 19 2008
Bayfield Co. Zoning Dept.

Application No: 08-0236
Date: _____
Zoning District: E-1
Amount Paid: \$175.00 RDS
6/4/08

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
Legal Description SE 1/4 of NW 1/4 of Section 22 Township 50 North, Range 8 West Town of Port Wing
Gov't Lot Par 14642 Block _____ Subdivision _____ CSM # _____ Acreage 3.76

Volume _____ Page _____ of Deeds Parcel I.D. # 04-042-2-50-08-22-205 Use Tax Statement for Legal Description 082-30006 (Phone) _____

Property Owner James & Colleen Lee Contractor _____
Address of Property 10320 St. Hwy. 13 Plumber _____
Port Wing, WI 54865 Authorized Agent _____ (Phone) _____

Telephone 922-470-6000 (Home) 612-309-3016 (Work)
Is your structure in a Shoreland Zone? Yes No If yes, _____
Structure: New _____ Addition Existing _____
Written Authorization Attached: Yes No
Distance from Shoreline: greater than 75' 75' to 40' less than 40'
Basement: Yes _____ No Number of Stories 2

Estimated Cost of Construction 475,000. Square Footage 3360 Sanitary: New _____ Existing Privy _____ City _____

- USE: * Residence or Principal Structure (# of bedrooms) _____
 Residence sq. ft. _____
 Residence w/deck-porch (# of bedrooms) 3
 Residence sq. ft. 2538 Porch sq. ft. 406/96
 Deck sq. ft. 406 Deck(2) sq. ft. _____
 Residence w/attached garage (# of bedrooms) 960 Garage sq. ft. _____
 Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) Shed for storage
 Residential Accessory Building Addition (explain) RV
 Residential Other (explain) _____
 Commercial Principal Building _____
 Commercial Principal Building Addition (explain) _____
 Commercial Accessory Building (explain) _____
 Commercial Accessory Building Addition (explain) _____
 Commercial Other (explain) Class A
 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) Colleen B. Lee Date 5-16-08
Address to send permit 4725 Lodge Ln Excelsior, MN 55331 ATTACH _____
Copy of Tax Statement _____
If you previously purchased the property Attach a Copy of Recorded Deed _____

* See Notice on Back

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: 05-01-07 State Sanitary Number 425347 Date 2004
Date 6/16/08 Permit Number 08-0236 Permit Denied (Date) _____
Reason for Denial: _____
Inspection Record: STRUCTURAL SERVICE CURRENT. SHEETED FLEX/BUFFER IN DECK STAIR
BE GANER - ONLY ONE (1) FLOOR By DL Date of Inspection 5-27-08
Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
Condition: _____

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Signed [Signature] Inspector _____
Date of Approval 5-22-08
Rec'd for Issuance

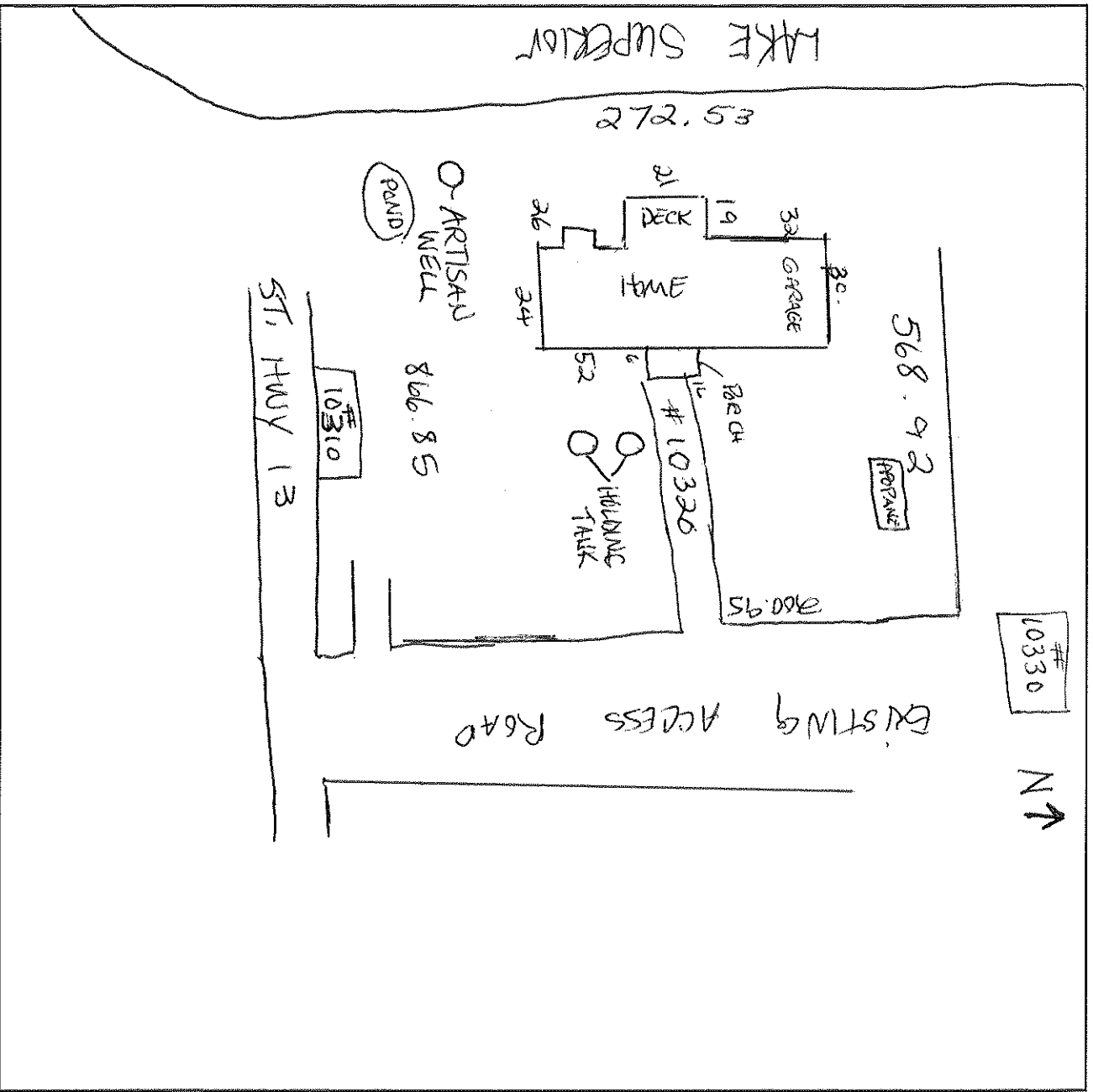
① Recent Buffer 50'

② 200 ft. from 44'

③ Any 6' above that (1) faster unit

JUN 16 2008
Secretary
Secretarial Staff

Lot Line



Name of Frontage Road (ST. HWY 13)

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 - (include any deck(s), porch or garage)
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. 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. Septic tank to closest lot line
 - e. Septic tank to building
 - f. Septic tank to well
 - g. Septic 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. Drain field to closest lot line
 - l. Drain field to building
 - m. Drain field to well
 - n. Drain field to lake, river, stream or pond.
 - o. Well to building

IMPORTANT
 DETAILED PLOT PLAN
 IS NECESSARY. FOLLOW
 STEPS 1-7 (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, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.