

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
 SEP 10 2009
 Bayfield Co. Zoning Dept.

ENTERED
 Application No.: 09-0431
 Date: _____
 Zoning District: P-AB / class 1
 Amount Paid: \$125
 9-11-09 / 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 DRIVEWAY (Private Road)
 Use Tax Statement for Legal Description
 Legal Description SW 1/4 of NW 14 of Section 50 North, Range 8 West, Town of Port Wing
 Gov'l Lot 1 Lot 344 Block _____ Subdivision _____ CSM # 1615 Acreage 42.58

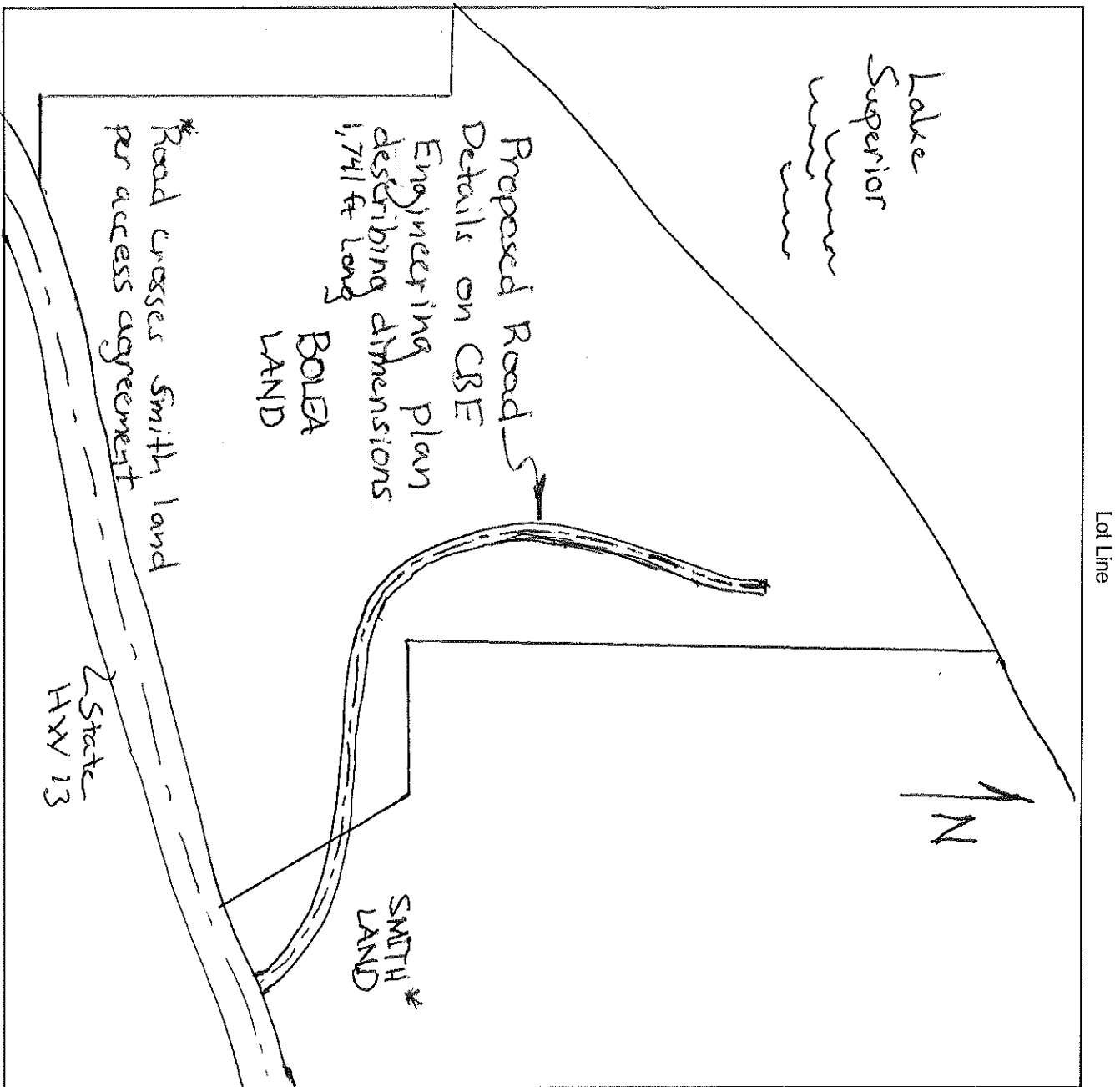
Volume _____ Page _____ of Deeds Parcel I.D. (Bolea)
 Property Owner: Angelo S. Bolea, Grace C. Bolea
 Contractor: Keith Olson (Phone) 715-292-2981
 Address of Property: San Smithy Saring Smith (Though access agreement)
 Plumber: Olson Brothers Contracting
 Authorized Agent: Steve Bolea (Phone) 952-797-6460

Telephone 410-295-7198 (Home) 410-458-7067 (Work)
 Is your structure in a Shoreland Zone? Yes No If yes, _____
 Structure: New Existing 91, 716, 712
 Fair Market Value _____ Square Footage _____ Existing _____
 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. _____
 * Residence w/attached garage (# of bedrooms) _____
 Residence sq. ft. _____ Garage sq. ft. _____

Residential Addition / Alteration (explain) _____
 Residential Accessory Building (explain) _____
 Residential Accessory Building Addition (explain) _____
 Residential Other (explain) Private Road Should be graded
 FAILURE TO OBTAIN A PERMIT OF 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) Steve Bolea Date 9/7/2009
 Address to send permit 741 105 st SE, Watertown, MN 55388 ATTACH
 Copy of Tax Statement or Attach a Copy of Recorded Deed

* See Notice on Back
 APPLICANT — PLEASE COMPLETE REVERSE SIDE
 Permit Issued: _____ State Sanitary Number _____ Date _____
 Date 9-18-09 Permit Number 09-0431 Permit Denied (Date) _____
 Reason for Denial: _____
 Inspection Record: CANCEL AS CONSIDERED BY THE WORK HERE'S, CONDITIONS WILL BE INSTALLED WHERE NECESSARY
 ALL NEARBY'S DRAINAGES BY DD
 ROAD WILL BE PRE-ENGINEERED & CONSTRUCTED TO PROVIDE ACCESS TO AT LEAST FIVE (5) NEAR BY
 Mitigation Plan Required: Yes No Variance (B.O.A.) # _____
 Condition: _____

Signed _____ Inspector _____
 Date of Approval 9-18-09
 Rec'd for Issuance
 SEP 18 2009
 Secretarial Staff



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.