

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 05 2009

Application No: 09-0510
 Date: _____
 Zoning District: R-4
 Amount Paid: 75 11/10/09 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 29 1/4 of Section 50 Township 8 North, Range 8 West, Town of PW

Gov't Lot 16-18 Block 20 Subdivision First Add top W CSM # Acreage .224

Volume 871 Page 123 of Deeds Parcel I.D. 042110110

Property Owner Carnie Bailey Contractor Dan Horst (Phone) 372-5356

Address of Property Port Wing 83100 Grand Ave Plumber _____

Authorized Agent _____ (Phone) _____

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 _____

Fair Market Value \$5000 Square Footage 494 Sanitary: New Existing Privy City _____

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

* Residence w/deck-porch (# of bedrooms) _____ Mobile Home (manufactured date) _____

Residence sq. ft. _____ Commercial Principal Building _____

Residence sq. ft. _____ Commercial Principal Building Addition (explain) _____

Deck sq. ft. _____ Commercial Accessory Building (explain) _____

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

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

Residential Addition / Alteration (explain) deck 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) _____

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) Carnie Bailey Date 11-5-09

Address to send permit 83100 Grand Ave, Port Wing, WI ATTACH _____

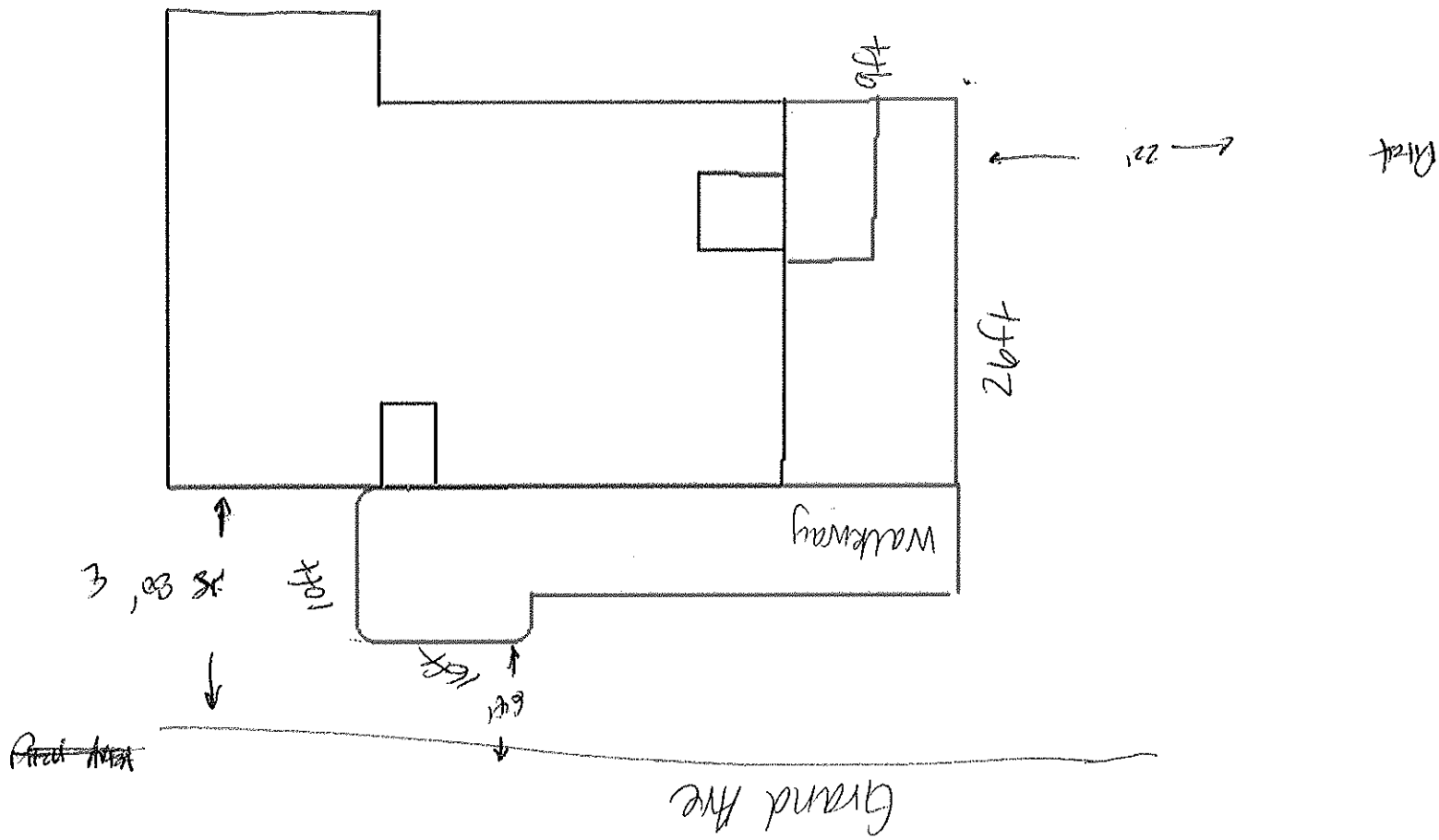
* See Notice on Back Copy of Tax Statement or _____

APPLICANT -- PLEASE COMPLETE REVERSE SIDE (If you recently purchased the property Attach a Copy of Recorded Deed)

Permit Issued:	State Sanitary Number _____	Date _____
Date	Permit Number <u>09-0510</u>	Permit Denied (Date) _____
Reason for Denial:	_____	
Inspection Record:	Property is in the overlay district of PD. Structural setbacks is represented by <u>owner met code requirements</u> By <u>DDC</u>	
Mitigation Plan Required:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Date of inspection <u>11-6-09</u>
Condition:	Variance (B.O.A.) # _____	_____
Signed <u>[Signature]</u> Inspector		Date of Approval <u>11-1-09</u>
Rec'd for Issuance		

NOV 10 2009
 Secretarial Staff

North



$$\begin{array}{r} 234 \\ 9 \\ \hline 526 \end{array}$$

$$\begin{array}{r} 494 \\ 234 \\ \hline 100 \\ 160 \end{array}$$

West