

# BAYFIELD COUNTY SANITARY PERMIT APPLICATION

22

**I. APPLICATION INFORMATION**  
 (Please Print All Information)  
 South West 02011  
 County Permit No: 11-0006

Property Owner's Name: **JAMES W. CARLSON** Bayfield Co. Zoning Dept. **Bayfield**

Address of Property: **10375 ARNOLD RD. WEST WINGS, WI.**  
 Property Location: NE 1/4 SW 1/4 S 3 T 4 N, R 8 E (or) W  
 Property Owner's Mailing Address: **3535 SHAWANO AVE.** Township: **POKA WINKI** Gov. Lot #: \_\_\_\_\_

City, State: **GREEN BAY, WI** Zip Code: **54313** Phone Number: **920-434-0544** Block #: \_\_\_\_\_ Subdivision Name or CSM #: \_\_\_\_\_

**II. TYPE OF BUILDING:** (Check One)  
 State Owned  
 Public (Explain the use/purpose \_\_\_\_\_)  
 1 or 2 Family Dwelling - No. of Bedrooms: **1**

**III. TYPE OF PERMIT:** (Check only one box on line A. Check box on line B, if applicable)  
 A)  New  Replacement  County Private Interceptor  
 1.  Reconnection 2.  Repair 3.  Revision \*\*  Transfer of Owner (List Previous Owner below) \_\_\_\_\_

B)  A Sanitary Permit was previously issued. **Previous Permit Number:** \_\_\_\_\_ Date Issued: \_\_\_\_\_

**IV. TYPE OF NON-PLUMBING SYSTEM:** (Check One) \* Replacements need previous permit number and date filled out above  
 C)  Pit Privy  Vault Privy (Vault size: **200** gallons or \_\_\_\_\_ cubic yards)  
 Portable Privy (Temporary Use Only)  Composting Toilets  Incinerating Toilet

**V. ABSORPTION SYSTEM INFORMATION:**

1. Gallons Per Day	Capacity In Gallons		3. Absorp. Area Proposed (Sq. Ft.)	4. Loading Rate (Gals. / Day / Sq. Ft.)	5. Perc. Rate (Min. Inch)	6. System Elev. (Feet)	7. Final Grade Elev. (Feet)										
	New Tanks	Existing Tanks						Total Gallons	# of Tanks	Manufacturer's Name	Prefab. Concrete	Site Constructed	Steel	Fiber-glass	Exper. App.		
Septic Tank or Holding Tank																	
Lift Pump Tank / Siphon Chamber																	

**VII. RESPONSIBILITY STATEMENT:**  
 I the undersigned, assume responsibility for installation of the onsite sewage system shown on the attached plans.  
 Plumber's / Owner's Name: (Print) **JAMES W. CARLSON** Plumber's / Owner's Signature: *James W. Carlson* (No Stamps) MP/MPRSW No:  
 Plumber's Address: (Street, City State, Zip Code) **8535 SHAWANO AVE BAYFIELD, WI 54313** Home Phone: **920-434-0544** Business Phone: \_\_\_\_\_

**VIII. COUNTY / DEPARTMENT USE ONLY**

<input checked="" type="checkbox"/> Approved <i>DL</i>	<input type="checkbox"/> Disapproved	Sanitary Permit/Transfer Fee: <b>\$150</b>	Date Issued: <b>1/12/11</b>	Issuing Agent's Signature / Date: <i>[Signature]</i> <b>1-11-11</b>
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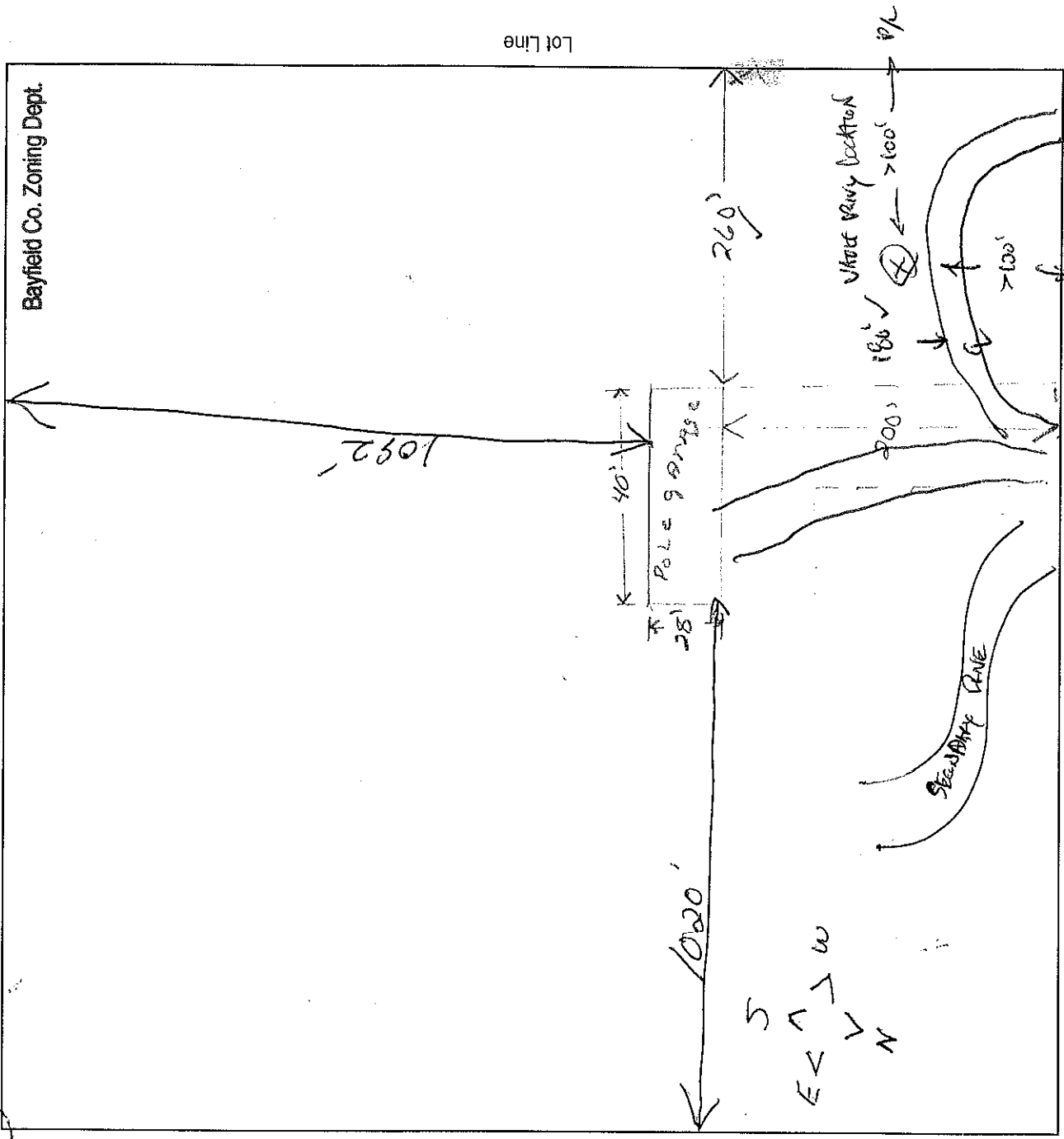
**IX. CONDITIONS OF APPROVAL / REASONS FOR DISAPPROVAL:**  
 SANITARY & MAINTENANCE OF VALET UNIT REQUIRED & SHOULD BE PROVIDED BY A LICENSED SERVICE PROVIDER.  
**GREEN BAY, WI 54313**

Plot Plan on reverse side

**RECEIVED**  
JAN 10 2011

Lot Line

Bayfield Co. Zoning Dept.



————— Name of Frontage Road (Army Rd) ————— E

NOTE: ALL SEWERAGES COMPLETED WITH > 5' TO ALL P/L'S

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location and size of the building.
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 COMPLETELY.

\*NOTICE: 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.