

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

Temporary
 BAYFIELD COUNTY ZONING DEPARTMENT
 OCT 12 2009
 Bayfield Co. Zoning Dept.

Application No. 09-00087
 Date: _____
 Zoning District A-1
 Amount Paid: \$50.00 EOS
10/22/09

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 SW 1/4 of SW 1/4 of Section 16 Township 50 North, Range 5 West, Town of Bayfield

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 28

Volume _____ Page _____ of Deeds _____ Parcel I.D. 34332 (tax id)

Property Owner Thomas J. Gordon Sr. Contractor _____ (Phone) _____

Address of Property 27050 Star Route Bayfield, WI 54814 Plumber _____

Telephone 715-779-3130 (Home) _____ (Work) _____ Authorized Agent _____ (Phone) _____

Is your structure in a Shoreland Zone? Yes No **If yes.** Written Authorization Attached: Yes No
 Distance from Shoreline: greater than 75' 75' to 40' less than 40'

Structure: New Addition Existing
 Fair Market Value 30,000 Square Footage 14x60 Basement: Yes _____ No _____ Number of Stories _____
 Sanitary: New _____ Existing _____ Privy _____ City _____

USE: Residence or Principal Structure (# of bedrooms) 3 **Type of Septic/Sanitary System**
 Mobile Home (manufactured date) _____

Residence sq. ft. _____ Commercial Principal Building _____

Residence w/deck-porch (# of bedrooms) _____ Commercial Principal Building Addition (explain) _____

Residence sq. ft. _____ Porch sq. ft. _____ Commercial Accessory Building (explain) _____

Deck sq. ft. _____ Deck(2) sq. ft. _____ Commercial Accessory Building Addition (explain) _____

Residence w/attached garage (# of bedrooms) _____ Commercial Other (explain) _____

Residence sq. ft. _____ Garage sq. ft. _____ Special/Conditional Use (explain) _____

Residential Addition / Alteration (explain) _____ External Improvements to Principal Building (explain) _____

Residential Accessory Building (explain) _____ External Improvements to Accessory Building (explain) _____

Residential Accessory Building Addition (explain) _____ External Improvements to Accessory Building (explain) _____

Residential Other (explain) Temporary Permit

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) Thomas J. Gordon Sr. Date 10/12/09

Address to send permit 27050 Star Route, Bayfield, WI 54814 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 10/26/09 Permit Number 09-00087 Permit Denied (Date) _____

Reason for Denial: _____

Inspection Record: Structures & conditions as represented by set appears to be code compliant & temporary permit may be issued by DDC

By DDC Date of Inspection 10-16-09

Mitigation Plan Required: Yes No Variance (B.O.A.) # _____

Condition: STRUCTURE MAY NOT BE USED FOR HUMAN HABITATION OF STORAGE UNTIL SUCH TIME ORDER

THAT THE STRUCTURE OBTAINS ALL NECESSARY PERMITS FOR PERMANENT PLACEMENT

BY

STRUCTURE MUST BE REMOVED OR ORDER Signed [Signature] Inspector [Signature]

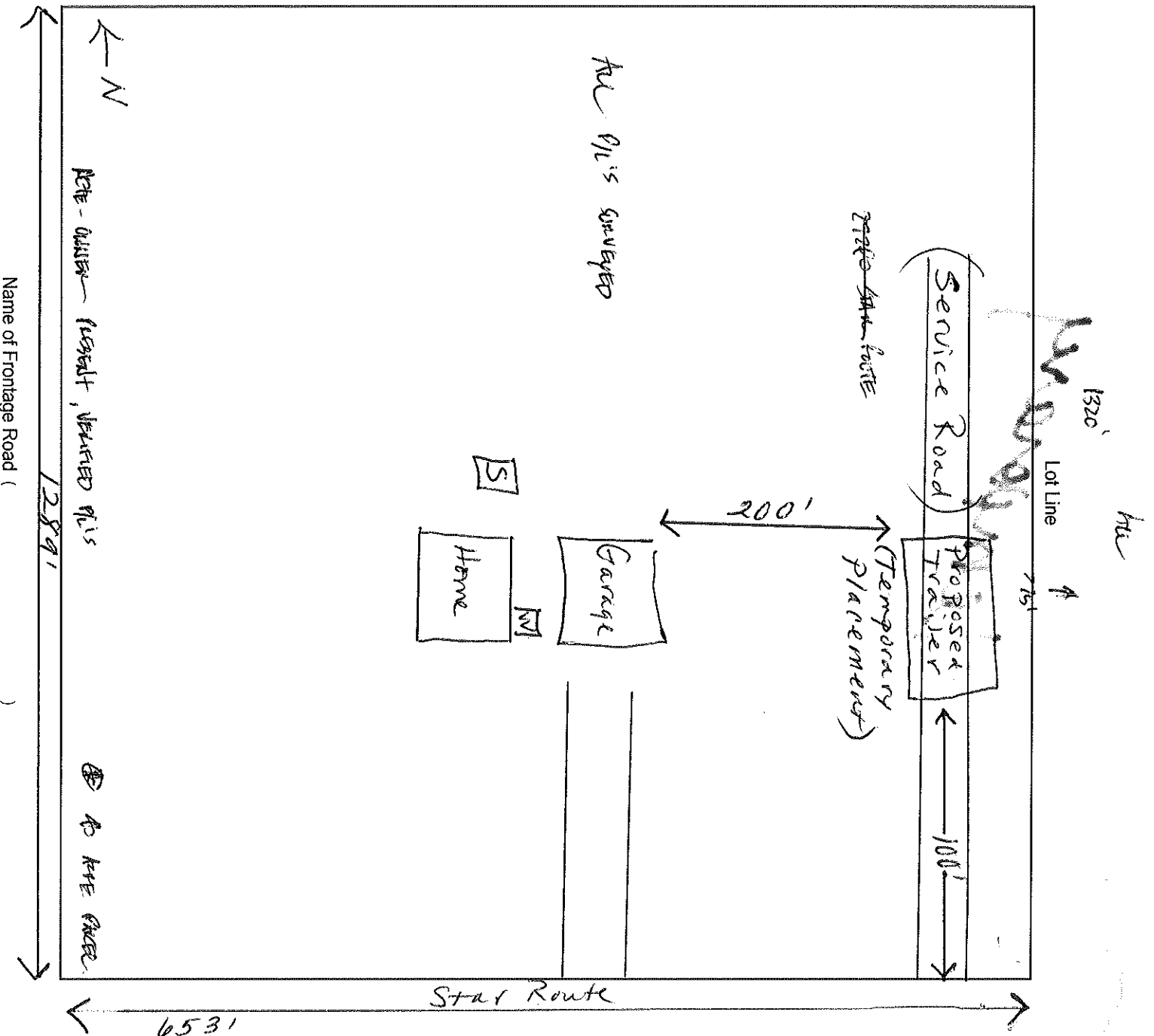
OCTOBER 16, 2010 OF, OWNER MUST OBTAIN Date of Approval 10-16-09

ALL NECESSARY PERMITS FOR PERMANENT Rec'd for issuance

PLACEMENT OR AN EXTENSION.

Secretarial Staff

OCT 26 2009 TITLE / TAX STATEMENT



Name of Frontage Road (_____)

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.