

ENTERED

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County Zoning Department
P.O. Box 58
Washburn, WI 54891
(715) 373-6138

RECEIVED

OCT 12 2009

Application No: 09-0482
Date: _____
Zoning District R-1, Class 1
Amount Paid: \$155.00 PDS
10/13/09

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 W 1A of Par #3 & 1/2 of Section 18 Township 43 North, Range 5 West, Town of NAMAKAGON

Gov't Lot 2 Lot _____ Block _____ Subdivision _____ CSM # _____ Acreage 2.1

Volume 673 Page 37 & 38 of Deeds Parcel I.D. 04-034-2-43-05-18-2 05-002-03000

Property Owner Thomas & Terry L Jokinen Contractor Springbrook (Phone) 274-2900

Address of Property 25035 N Castle Garden Rd, Plumber _____

Cable WI 54821 Authorized Agent: _____ (Phone) _____

Telephone 715 274 4343 (Home) 715 681 0706 cell

Is your structure in a Shoreland Zone? Yes No If yes, _____

Structure: New _____ Addition Existing _____

Fair Market Value \$45,000 Square Footage 1152 Privy _____ City _____
+ 8' x 24 deck = 192 Type of Septic/Sanitary System Septic Tank - Conservation

* Residence or Principal Structure (# of bedrooms) _____

Residence sq. ft. _____

* Residence w/deck-porch (# of bedrooms) _____

Residence sq. ft. _____ Porch sq. ft. _____

Deck sq. ft. _____ Deck(2) sq. ft. _____

* Residence w/attached garage (# of bedrooms) _____

Residence sq. ft. _____ Garage sq. ft. _____

Residential Addition / Alteration (explain) 24 x 24 Addition - 124 sq ft

Residential Accessory Building (explain) family + loft 10/13/09

Residential Accessory Building Addition (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) Thomas & Terry Jokinen Date 10-5-09

Address to send permit P.O. Box 577 Mellon WI 54546

ATTACH

* See Notice on Back Copy of Tax Statement or
(If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: _____ State Sanitary Number _____ Date _____

Date 10/15/09 Permit Number 09-0482 Permit Denied (Date) _____

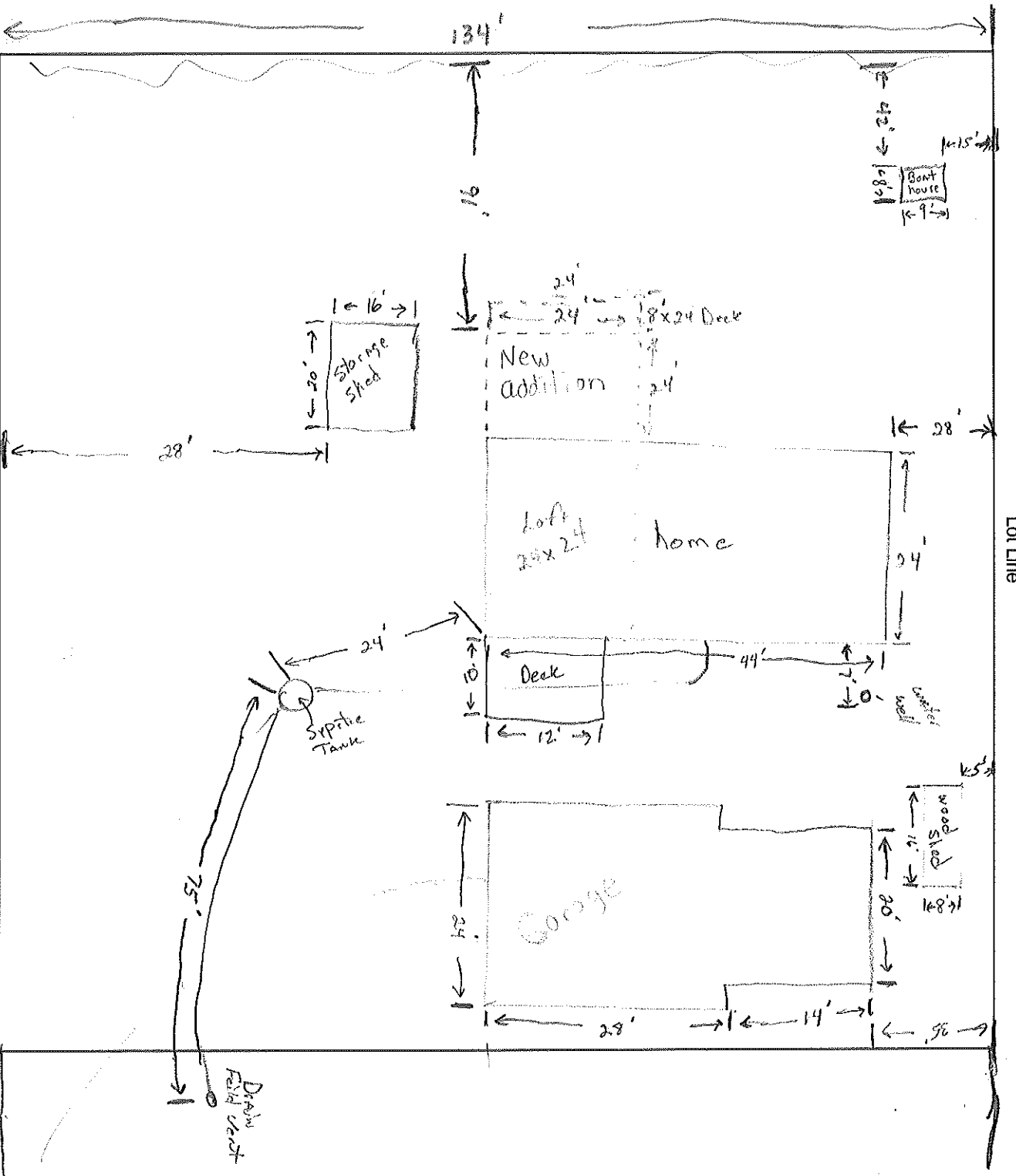
Reason for Denial: _____

Inspection Record: well staked Metcalf & Eckels Property line photos
representations By M. Fustak Date of Inspection 10-8-09

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

Condition: _____

Signed Michael Hoffmeister Date of Approval 10-12-09
Inspector OCT 15 2009



Name of Frontage Road (N Castle Garden)

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.