

ENTERED 7/12/20

APPLICATION FOR PERMIT Ashland County, Wisconsin 54806

OFFICE USE

INSTRUCTIONS: Fill out this form as completely as possible. Use black or blue ink and print clearly. Submit completed application and fee to: Zoning Administration, Courthouse, 201 W. Main St., Rm. 109, Ashland, WI 54806-1652.

Application No. 7930 613293 Zoning Dist. C.D. 7939

Check Permit(s) Applied For:

COUNTY BUILDING (X) PRIVY/NON-PLUMBING () PORTABLE RESTROOM () ALTERATION-ADDITION () ACCESSORY BUILDING () SANITARY (X) OTHER ()

LAND: NW 1/4 of NW 1/4 of Sec. 27 T. 42N N.R. 1 W.,

Town/City of PEESVILLE Parcel ID # 020-00296-0100 Lot Use tax statement Subdivision Acres 30 Site Address 80104 PEESVILLE RD

Name HERBERT SAGAN Street 1120 INDIAN MOUND RD City SHEBOYGAN State WI Zip 53081 Daytime Telephone 414-852-2988

Structure-New (X) Addition Existing Basement-Yes No (X)

Construction: Stick-built (X) Pre-Fab. Mobile Home

Structure Use: CABIN Sanitary-New (X) Existing Privy

Table with 4 columns: Fee Category, Amount, Fee Category, Amount. Includes rows for County Building (\$300.00), Accessory Buildings (\$200.00), Alterations/Additions (\$175.00), Privy Non Plumbing (\$175.00), Mound/At Grade (\$450.00), Sanitary (\$400.00), Sanitary Reconnect (\$150.00), Portable Restroom (\$175.00), Other (\$), and Total (\$).

I (we) declare that this application (including any accompanying schedule) 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...

SIGN HERE

SIGNATURE OF OWNER(S) THIS FORM IS NOT VALID UNLESS SIGNED BY THE OWNER(S)

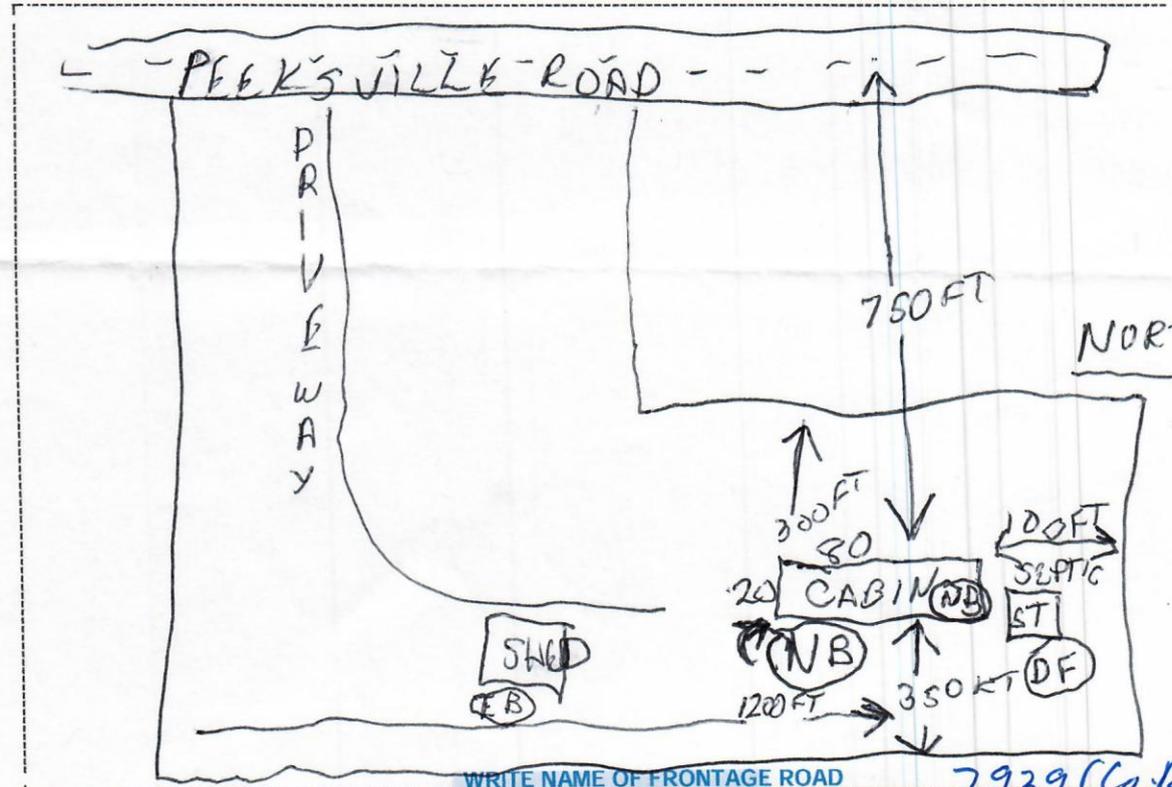
DATE

6-7-2020

PLEASE FOLLOW THESE INSTRUCTIONS - USE INK ONLY

- 1. Show the location and size of all existing buildings (EB) and all new buildings or additions (NB) and indicate North (N).
2. Show the location of the well (W), or septic tank (ST), or holding tank (HT), or mound (M), or drainfield (DF), or privy, portable rest room (PV), which ever applies.
3. Show the location of any lake or flowage - if within 1,000 ft. and the location of any river or stream - if within 300 ft.
4. Show dimensions in feet of the following: (a) building to all lot lines, (b) building to center line of road, (c) building to lake, river, stream, floodplain or wetland if applicable. Show building dimensions in feet.
5. Stake or mark proposed location of all new buildings and privies on your property.
6. Show the driveway location.
7. If separate plans are submitted by an architect, engineer, owner, builder, contractor, etc., the plans must be signed and dated by the owner.
8. Please attach a copy of tax statement for the property involved.

* NOTICE: The state, local town, village, or city may also require permits and have zoning regulations. (Please obtain all permits prior to any construction.)



WRITE NAME OF FRONTAGE ROAD

7939 (Co. Build.)

PERMIT ISSUED: Date 6-10-2020 FEE PAID \$ 700.00 6-18-2020 Permit Denied (date)

OFFICE USE ONLY

Permit No. 7930 (Co. Sant.) 613293 (State)

PERMIT EXPIRES 6-10-2022

INSPECTION (DATE) 5-17-2020 6-18-2022

NAME HERBERT SAGAN

RECEIVED

JUN 10

Ashland Co. Zoning