

**SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:**  
 Bayfield County  
 Planning and Zoning Depart.  
 PO Box 58  
 Washburn, WI 54891  
 (715) 373-6138

**APPLICATION FOR PERMIT**  
 BAYFIELD COUNTY, WISCONSIN  
**RECEIVED**  
 Date Stamp (Received)  
 MAY 14 2012

**Bayfield Co. Zoning Dept**

Permit #:	12-0144
Date:	5-24-12
Amount Paid:	\$75.00
Refund:	Ros 5/14/12

**ENTERED**

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.

HOW DO I FILE OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

**TYPE OF PERMIT REQUESTED** →  LAND USE  SANITARY  PRIVATE  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER

Owner's Name: Frank Hosszu  
 Address of Property: 85685 Woodland Tr.  
 City/State/Zip: Bayfield WI 54814  
 Telephone: 715-779-3060  
 Cell Phone: 715-209-0334

Mailing Address: P.O. Box 988  
 City/State/Zip: Bayfield WI  
 Contractor: Bayfield WI 54814  
 Contractor Phone: \_\_\_\_\_  
 Plumber: \_\_\_\_\_  
 Agent Phone: \_\_\_\_\_  
 Agent Mailing Address (include City/State/Zip): \_\_\_\_\_  
 Written Authorization Attached  Yes  No

Authorized Agent: (Person Signing Application on behalf of Owner(s)) \_\_\_\_\_

PROJECT LOCATION: SW 1/4, NW 1/4  
 Legal Description: (Use Tax Statement) P1N: (23 digits) 04-066-200-040-2-00-100-0900  
 Volume: \_\_\_\_\_  
 Recorded Document: (i.e. Property Ownership) \_\_\_\_\_  
 Page(s) \_\_\_\_\_

Section: 14, Township: Bayfield Range 32N, Town of: Bayfield  
 Subdivision: Wentworth Estates  
 Lot Size: 1.55 Acres, Acreage: 1.6

Shoreland →  Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If Yes---continue →  
 Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue →  
 Non-Shoreland

Distance Structure is from Shoreline: \_\_\_\_\_ feet  
 Distance Structure is from Shoreline: \_\_\_\_\_ feet  
 Is Property in Floodplain Zone?  Yes  No  
 Are Wetlands Present?  Yes  No

Value at Time of Completion * include donated time & material	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
\$ 3,599.	<input type="checkbox"/> New Construction <input checked="" type="checkbox"/> Addition/Alteration <input checked="" type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement	<input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Rawland</u> <input type="checkbox"/> Privy (Prt) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for, is relevant to it) Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_  
 Proposed Construction: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( ) ( )	( )
	Residence (i.e. cabin, hunting shack, etc.)	( ) ( )	( )
	with Loft	( ) ( )	( )
	with a Porch	( ) ( )	( )
	with (2 <sup>nd</sup> ) Deck	( ) ( )	( )
	with (2 <sup>nd</sup> ) Deck with Attached Garage	( ) ( )	( )
<input type="checkbox"/> Commercial Use	Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities)	( ) ( )	( )
	Mobile Home (manufactured date)	( ) ( )	( )
	Addition/Alteration (specify) <u>Enlarge Deck</u>	( <u>16' x 18'</u> )	<u>288</u>
	Accessory Building (specify)	( ) ( )	( )
	Accessory Building Addition/Alteration (specify)	( ) ( )	( )
	Special Use: (explain)	( ) ( )	( )
	Conditional Use: (explain)	( ) ( )	( )
	Other: (explain)	( ) ( )	( )
<input type="checkbox"/> Municipal Use			

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.

Owners: Frank Hosszu Olivia Hosszu  
 (If there are multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: BAO Date: 5/11/12  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

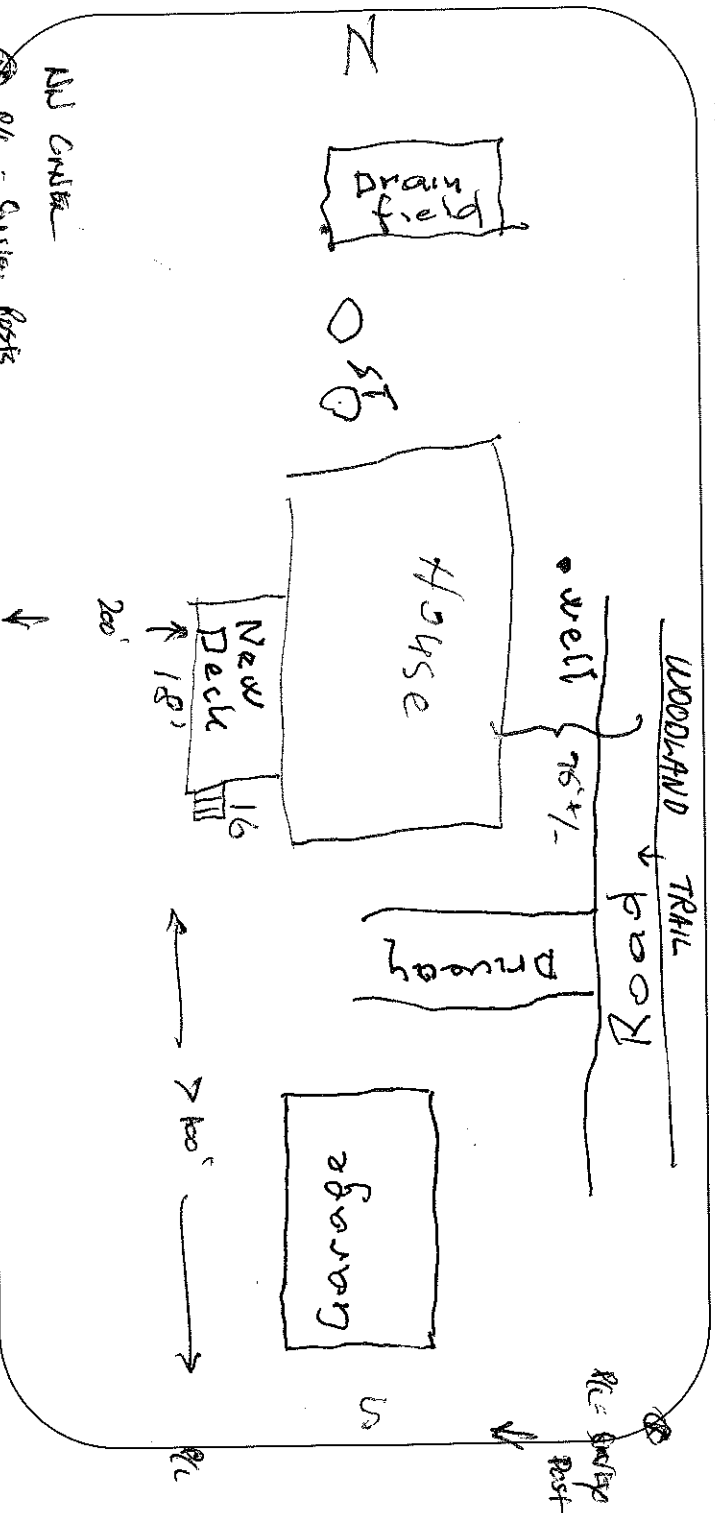
Address for Assurance: P.O. Box 988 Bayfield WI 54814 Attach Copy of Tax Statement  
 If you recently purchased the property send your Recorded Deed

MAY 24 2012

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (\*): (\*\*) Driveway and (\*\*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (\*\*) Well (W); (\*\*) Septic Tank (ST); (\*\*) Drain Field (DF); (\*\*) Holding Tank (HT) and/or (\*\*) Privy (P)
- (6) Show any (\*): (\*\*) Lake; (\*\*) River; (\*\*) Stream/Creek; or (\*\*) Pond
- (7) Show any (\*): (\*\*) Wetlands; or (\*\*) Slopes over 20%



① R/C = Survey Posts  
 Please complete (1) - (7) above (prior to continuing)  
 R/C = Survey Posts  
 (S) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet	Setback from Wetland	Feet
Setback from the South Lot Line	Feet	Setback from 20% Slope Area	Feet
Setback from the West Lot Line	Feet	Elevation of Floodplain	Feet
Setback from the East Lot Line	Feet		Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		Feet
Setback to Privy (Portable, Composting)	Feet		Feet

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.  
 Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction: Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
 For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
 The local Town, Village, City, State or Federal agencies may also require permits.

**Issuance Information (County Use Only)**      Sanitary Number: 6076      # of bedrooms: \_\_\_\_\_      Sanitary Date: 1980

Permit Denied (Date): \_\_\_\_\_      Reason for Denial: \_\_\_\_\_      Permit Date: 5-24-18

Permit #: 18-0144

Is Parcel a Sub-Standard Lot       Yes       No       No       Yes       No       No       Yes       No

Is Parcel in Common Ownership       Yes       No       No       Yes       No       Yes       No       No

Is Structure Non-Conforming       Yes       No       No       Yes       No       Yes       No       No

Granted by Variance (B.O.A.)      Case #: \_\_\_\_\_      Previously Granted by Variance (B.O.A.)      Case #: \_\_\_\_\_

Was Parcel Legally Created       Yes       No      Were Property Lines Represented by Owner       Yes       No

Was Proposed Building Site Delineated       Yes       No      Was Property Surveyed       Yes       No

Inspection Record: Processed as if no as represented by owner. Arrows to show code requirements & permit why the issued. Permitting & reviewed shot from earlier

Date of Inspection: 5-21-12      Inspected by: DDC      Zoning District: (F-1B)

Condition(s) Town, Committee or Board Conditions Attached?       Yes       No      (If No they need to be attached.)      Date of Re-Inspection: \_\_\_\_\_

Signature of Inspector: [Signature]      Date of Approval: 12-12

Hold For Sanitary:  \_\_\_\_\_      Hold For TBA:  \_\_\_\_\_      Hold For Affidavit:  \_\_\_\_\_      Hold For Fees:  \_\_\_\_\_      R/C = Survey Posts # \_\_\_\_\_