

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

Permit Received
PERMITS DIVISION
 OCT 05 2012

Permit #:	10-0412	ENTERED
Date:	11-13-12	
Amount Paid:	10-5-12	75.00
Retain:		ack

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 APP. Bayfield Co. Zoning Dept. OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

TYPE OF PERMIT REQUESTED: LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: Richard & Lore Erickson Mailing Address: 33340 Sk. Hill Rd Bayfield, WI 54814 Telephone: 715-779-3151

Address of Property: 33340 Sk. Hill Road City/State/Zip: Bayfield, WI 54814 Call Phone: 319-230-1504

Contractor: Steve Lees Hled Contractor Phone: 715-779-951 Plumber: --- Plumber Phone: ---

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: --- Agent Mailing Address (include City/State/Zip): --- Written Authorization Attached Yes No

PROJECT LOCATION: PAR SE NW 1/4 Legal Description: (Use Tax Statement) 04-000-2-50-04-28-2 of 600-2000 Recorded Document: (i.e. Property Ownership) 785 Page(s) 474

Section 28, Township 50 N, Range 04 W Town of: Bayfield Lot Size: --- Acreage 6

Shoreland Non-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

Distance Structure is from Shoreline: --- feet Is Property in Floodplain Zone? Yes No

Distance Structure is from Shoreline: --- feet 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
\$ <u>17,000</u>	<input type="checkbox"/> New Construction <input checked="" type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> 1-Story <input checked="" type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Septic</u> <input type="checkbox"/> Privy (Pit) or 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: 42' Width: 28' Height: 20'

Proposed Construction: Length: 56' Width: 28' Height: 20'

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 nd) Porch	()	()
	with a Deck	()	()
	with (2 nd) Deck	()	()
<input type="checkbox"/> Commercial Use	with Attached Garage	()	()
	Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	()	()
	Mobile Home (manufactured date)	()	()
<input checked="" type="checkbox"/> Municipal Use	Addition/Alteration (specify) <u>Porch</u>	(24' X 14')	336 sq ft
	Accessory Building (specify)	()	()
	Accessory Building Addition/Alteration (specify)	()	()
	Special Use: (explain)	()	()
	Conditional Use: (explain)	()	()
	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(s): Richard Erickson Lore Erickson Date 10-5-2012

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: --- Date ---

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Rec'd for Issuance 33340 Sk. Hill Road, Bayfield, WI 54814 Copy of Tax Statement ---

Address to send permit --- If you recently purchased the property send your Recorded Deed ---

NOV 13 2012

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

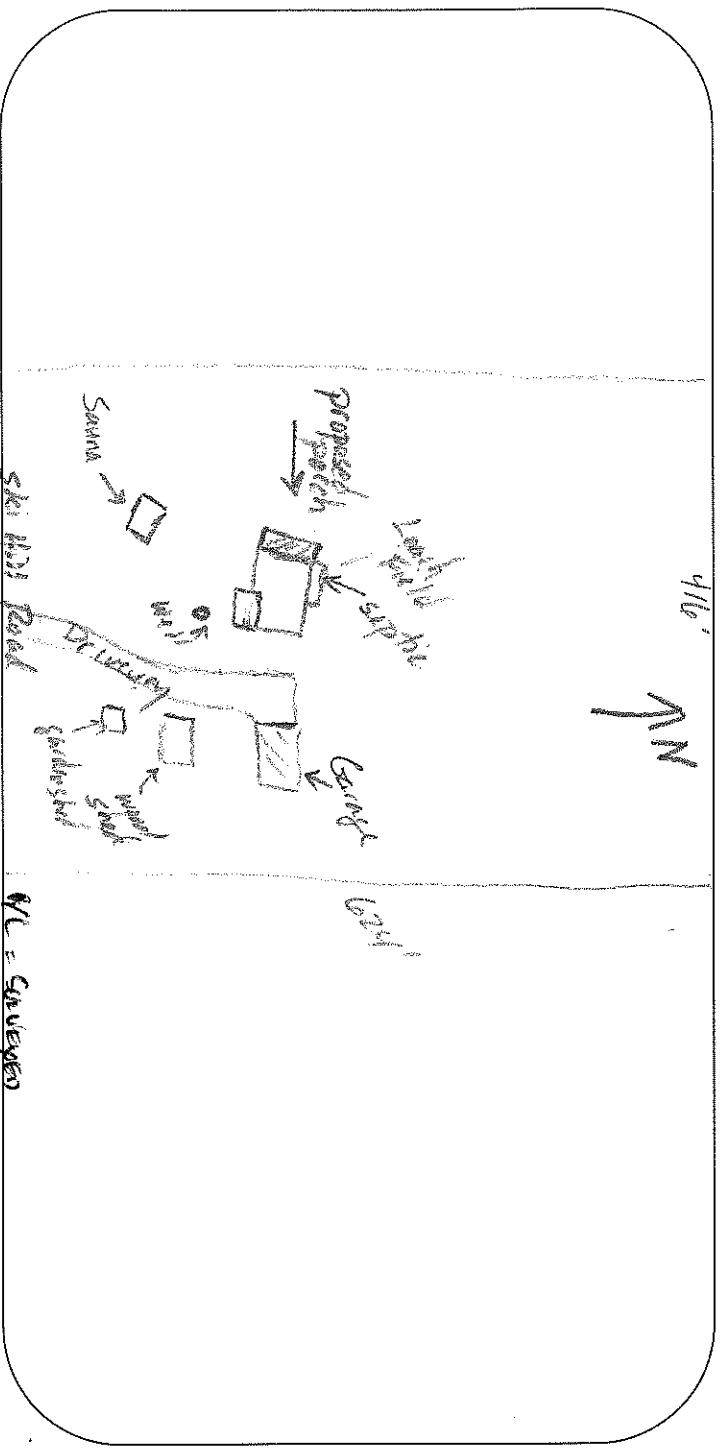
DC DID NOT PULL

Secretarial Staff

UNLESS OTHERWISE SPECIFIED BY THE PERMIT, ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE LATEST EDITION OF THE INTERNATIONAL RESIDENTIAL CODE BOOK AND THE LATEST EDITION OF THE INTERNATIONAL SANITARY CODE.

The box 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%**



Please complete (1) - (7) above (prior to continuing) \rightarrow **415'** \rightarrow
(8) 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	215 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 North Lot Line	366 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	248 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	153 Feet	Setback from 20% Slope Area	Feet
Setback from the East Lot Line	186 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	10 Feet	Setback to Well	40 Feet
Setback to Drain Field	50 Feet		
Setback to Privy (Portable, Composting)			

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 Dwelling: 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: 12-1315 # of bedrooms: Sanitary Date: 10-25-12
 Permit Denied (Date): Reason for Denial:

Permit #: 12-0447 Permit Date: 11-13-12

Is Parcel a Sub-Standard Lot Yes (bead of record) No No
 Is Parcel in Common Ownership Yes (Fused/Contiguous lots) No No
 Is Structure Non-Conforming Yes No

Granted by Variance (B.O.A.) Yes No Case #: Previously Granted by Variance (B.O.A.) Yes No Case #:

Was Parcel Legally Created Yes No
 Was Proposed Building Site Delineated Yes No

Were Property Lines Represented by Owner Yes No
 Was Property Surveyed Yes No

Inspection Record **Polosio Gustaf Kuttathol is represented by attorney ARNOLD & ARNOLD ATTORNEYS AT LAW. BEST AVAILABLE SERVICE HADWENKALAS. RETIRED BY BE CAUSE RESIGNED. SULLIVAN ROAD. Lakes Classification ()**
 Date of Inspection: 10-25-12 Inspected by: DK Zoning District: Date of Re-Inspection:
 Conditions: Town, Committee or Board Conditions Attached? Yes No (If No they need to be attached.)

Signature of Inspector: [Signature] Date: 10/25/12

Hold For Sanitary: Hold For TBA: Hold For Affidavit: Hold For Fees: