SUBMIT; COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Washburn, WI 54891 (715) 373-6138 Bayfield County
Planning and Zoning Depart.
PO Box 58

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

COUNTY, V 

MAR 07 2013

KWI L.N. Permit #: Sate: Refund: Amount Paid: (SO)# 40-304 多のプラス

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. Bayfield Co. Zoning Dept

Secretarial Staff		3	1160 0 101 193	Bac'd for legions	☐ Municipal Use				☐ Commercial Use				☒ Residential Use				Proposed Use	Proposed Construction:	<b>Existing Structure:</b> (If permit being applied for is relevant to it)			•		\$1200,000		Value at Time of Completion * include donated time & material	□ Non-Shoreland	XShoreland —		Section 17	1/4,	PROJECT LOCATION	Authorized Agent: (Person Signing Application	Contractor:	Address of Property: ← R	ANN : PETE	TYPE OF PERMIT REQUESTED ->   X LAND USE X SANITARY
Staff -		<u> </u>	Suality E	on conce	se				Use [		Т		Jse	<u></u> г				ction:	: (if pern			Runa	□ Conv	□ Addi	New Construction	(What ar		□ Is Pra	Creek o	, Tou		Legal Du	erson Signin	SELF	COMANS	E B	QUESTE
											***				□ <b>)</b>	1	•		nit being		erty	Run a Business on	Conversion (Selection Help)	Addition/Alteration	Constru	Project (What are you applying for)		perty/La	perty/La	, Township _	1/4	Legal Description:	g Applicati	Į.	SP	ROW	J—▼
Other: (	Conditio	Special		Accesso	Accesso	Addition	Mobile I	Bunkho							Resident	) Princina			applied f			SS on *	ing hide)	eration	ction	ying for)		and withi	and withi	15	Gov't Lot		on on beha		T B	BROWNLEC	LAND USE
Other: (explain)	Conditional Use: (explain)	Special Use: (explain)		ry Buildin	Accessory Building	Addition/Alteration	Mobile Home (manufactured date)	Bunkhouse w/ (☐ sanitary,	with A	with (	with a Deck	with (	with a	with Loft	Residence (i.e. cabin, hunting shack, etc.	Structure			or is releva		□ Foul	No E	☐ Baseme	□ 1-St		# of and/or		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	(Is Property/Land within 300 feet of R	N, Range		(Use Tax Statement)	on behalf of Owner(s))		)	TY.	D USE X
	explain)	<u> </u>	ľ	g Additi		on (specify)	nufacture	sanitary,	with Attached Garage	with (2 <sup>nd</sup> ) Deck	Deck	with (2 <sup>nd</sup> ) Porch	with a Porch Cha DING	oft	oin, hunt	firsts			nt to it)		Foundation	□ No Basement	Basement	1-Story + Loft	ory	# of Stories and/or basement		t of Lake,	of River,	1 3	Lot(s)		-		0	<u> </u>	SANITARY
				on/Alte	cify)	cify)	ed date)	압	Garage	×		유	Day		ing sha	tructure	Pro	-	Le	-		<b>₽</b> 	L		<u> </u>	int		Pond or	Stream If yes	W	L) SS I	04-060-2	Agent Phone:	ontractor	City/State/Zip:	Mailing Address:	ARY
				Accessory Building Addition/Alteration (specify)				□ sleeping quarters, <u>or</u>	10				1.8		ck, etc.)	principal Structure (first structure on property)	Proposed Structure	Length:	Length:		- Annahum		111111111111111111111111111111111111111	X Year Round	Seasonal	Use		1	(Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)  Creek or Landward side of Floodplain? If yescontinue	Town of:	Vol & Page	2 ×1-06	ne:	Contractor Phone:	/Zip:	MANNING AVEN	אַ
				<u>Ş</u> 				ers, <u>or</u> 🗆							(4)	₹	cture	0					    }	KÎ 🗆		be		Dist			ge	,_24. f	Agent	Plumber:		AVE	CON
								cooking													1000	□ None	·	2   N	ľ	# of bedrooms		lance Stri	Distance Structure is		Lot(s) No.		Yalling A	2	5		CONDITIONAL USE
								& food p										Width:	Width:	Z.	1 1	<u></u>	⊔ ני יף מ		<u> </u>			ucture is	ucture is			2	dies (IIIe	120	11/5/	STILLWATER,	LUSE
								cooking & food prep facilities)		-			441					77	=	None	Compost Toilet	Portable (w/service contract)	Privy (Pit) or	Sanitary (Exists) Specify Type:	Municipal/City	Sev		Distance Structure is from Shoreline:	e is from Shoreline :		Block(s) No.	000	Agent Malling Address (include City) Jace/Libi	WROBLEWSK	HH845/IIM	CE/MN	
,				_		1		ies) (				_	_								oilet	- I	or 🗆	victe) S		What ver/San on the		reline : feet	reline :	Lot Size	Subdivision:	Volume_	State/Lip		-	055/N	SPECIAL USE
-		×		×	×	×	×	×	  ×	×	×	:   :   ×	ह ×	×	1 1	×	Dimensions					contract	/aulted	Specify Type-	;	What Type of Sewer/Sanitary System Is on the property?			1	\\ \tag{\pi}	ision:					230	
*	×			^	Î			^		Î			8		1 1	di di	-sions	Height:	Height:				☐ Vaulted (min 200 gallon)	De.	1,1	stem .y?		▼ Yes	Is Property in Floodplain Zone?			10000	Atta	Plun	2		B.O.A.
-	_		Ì	•	_	_	_					-		_		_		Z					gallon)							Acreage O.H		Page(s)_	Attached   Ves   No	Plumber Phone: 115-373-5808	SAME	612-804-2078	OTHER
													300 F			766	Square Footage				1	<u>i</u>	[	<b>□ №</b>	City	Water		□ Yes	Are Wetlands Present?				Owner	15-25 18-32	1	-20	ix '

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) 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) and sale 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.

Authorized Agent:

Address to send permit 10001 MANNING

Owner(s): Khild (If there are Multiple

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Mondo (1) Sisted on the Deed All Owners

sign or letter(s) of authorization must accompany this application)

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

MEN

STILLWATER

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Date

S5082 Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Signature of Inspector   Hold For Sanitary:   Hold	ります	Date of Inspection: \$_12_{3}	Araba La Top Shan (	Was Parcel Legally Created Was Proposed Building Site Delineated	Granted by Variance (B.O.A.) ☐ Yes p(\(\mathbb{No}\) Case #:	별 발	Permit # 13 10044	Issuance Information (County Use Only) Permit Denied (Date):	(9) Stake or Mark Pro NOTICE: Al For The Constructio	other previously surveyed corner or marked by a licen Prior to the placement or construction of a structure a one previously surveyed corner to the other previousl marked by a licensed surveyor at the owner's expens	Setback to Privy (Portable, Composting)  Prior to the placement or construction of a structure within ten (10) feet of the minimum	Setback to Septic Tank or Holding Tank	Setback from the West Lot Line Setback from the East Lot Line	Setback from the <b>North</b> Lot Line Setback from the <b>South</b> Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Description	Please complete (1) – (7) above (prior to continuing)  (8) Setbacks: (measured to the closest		Show Location of:  2) Show / Indicate:  (3) Show Location of (*):  (4) Show:  (5) Show:  (6) Show any (*):  (7) Show any (*):
Hold For TBA:   Hold For Affidavit:	* & A	Inspe	MEANT WIP B (250-ED EASED)	d Kyes □ No		□ Yes (Deed of Record) XNo □ Yes (Fused/Contiguous Lot(s)) XNo □ Yes XNo	Permit Date:	Jse Only) Sanitary Number( ろっぱらら) Reason for Denial:	posed Location(s) of New Constructi Il Land Use Permits Expire One (1) Year fr n Of New One & Two Family Dwelling: A The local Town, Village, City, State	nsed surveyor at the owner's expense.  more than ten (10) feet but less than thirty (30) feet fr y surveyed corner, or verifiable by the Department by 2.	Feet n required setback	nk 55 Feet	Feet Feet		d Road Feet f-Way SQQ Feet	Measurement	<pre>xe (1) (7) above (prior to continuing) Setbacks: (measured to the closest point)</pre>	A A A A A A A A A A A A A A A A A A A	
ffidavit: Hold For Fees:	bockey buttered upc	C. (If No show need to be attrached )	Sportstratural rapid to a	Were Prope	Previously Granted by Variance (B.O.A.)		918	* (5.5 # of bedrooms:	c Tank (ST), Dra ate of Issuance if ipalities Are Requal agencies may a	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 setba 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 proone previously surveyed a licensed surveyor at the owner's expense.	he bou	Setback to Well	Setback from 20% Slope Area Elevation of Floodplain		Setback from the Lake (ordinary high-water m Setback from the River, Stream, Creek Setback from the Bank or Bluff	Description	Changes in plans must be	And Andrew Committee on Committ	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%
Date & AZIAZI	wishedow white made	Date of Re-Inspection:	Zoning District ( &-( ) Lakes Classification ( f )	A Yes		Affidavit Required Yes KNo		saminay varg	has not begun.  Jank (HI), Privy (P), and well (W).  Jank (HI), Privy (P), and well (W).	et of the proposed site of the structure, or must be restricted in the proposed site of the structure, or must be	ndary line from which the setback must be measured must be visible from one previously surveyed corner to the	₹\p\O Feet	N/A Feet	diamino	ark)	Measurement	Changes in plans must be approved by the Planning & Zoning Dept.	- Anna Anna Anna Anna Anna Anna Anna Ann	and/or (*) <b>Privy</b> (P)

