

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

**Class A**  
**APPLICATION FOR PERMIT**  
**BAYFIELD COUNTY, WISCONSIN**  
 RECEIVED  
 Date Stamp (received) MAR 12 2013  
 Bayfield Co. Zoning Dept.

ENTERED Permit #:	13-0043
Date:	4-12-13
Amount Paid:	\$115
Refund:	3-13-13

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 FILL 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: Tom & Jan Ruffelt Mailing Address: 19375 130th St. Bloomer, WI 54724 Telephone: 715-568-3515

Address of Property: 45918 S. Lakeview Dr. City/State/Zip: Cable, WI. 54821 Contractor Phone: Plumber: Plumber Phone: \_\_\_\_\_

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Dwain Manthey Agent Phone: 715-739-2645 Agent Mailing Address (include City/State/Zip): PO Box 130 Dunmore WI 54838 Written Authorization Attached Yes  No

PROJECT LOCATION: Legal Description: (Use Tax Statement) 1/4, 1/4 Gov't Lot 2 Lot(s) 523 Vol & Page 4, 19 Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_ Recorded Document: (A: Property Ownership) \_\_\_\_\_ Page(s) \_\_\_\_\_

Section 3, Township 43 N, Range 7 W Town of: Cable Lot Size \_\_\_\_\_ Acreage 1.607

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

Distance Structure is from Shoreline: 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
\$ _____	<input type="checkbox"/> New Construction <input type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing Bldg) <input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input checked="" type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Cow</u> <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gpd) <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	( X ) ( X ) ( X ) ( X ) ( X ) ( X ) ( X )	
<input type="checkbox"/> Commercial Use	Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities)	( X )	
<input type="checkbox"/> Municipal Use	Mobile Home (manufactured date) Addition/Alteration (specify) Accessory Building (specify) Accessory Building Addition/Alteration (specify)	( X ) ( X ) ( X ) ( X )	
Rec'd for Issuance	Special Use: (explain) <u>Short-Term Rental</u> Conditional Use: (explain) _____ Other: (explain) _____	( X ) ( X ) ( X )	
Secretarial Staff			

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): \_\_\_\_\_ Date: \_\_\_\_\_  
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Dee Mandy Date: 3/8/2013  
 (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: see above Attach \_\_\_\_\_  
 (if you recently purchased the property send your Recorded Deed)

your property (regardless of what you are applying for)

**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%

see aerial map

Please complete (1) - (7) above (prior to continuing)

(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 <u>Asphalt</u> Road	200 ± Feet	Setback from the Lake (ordinary high-water mark)	17' Feet
Setback from the Established Right-of-Way	200 ± Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	35 ± Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	35 ± Feet	Setback from Wetland	40+ Feet
Setback from the West Lot Line	350+ Feet	Setback from 20% Slope Area	NA Feet
Setback from the East Lot Line	NA Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	28' Feet	Setback to Well	5' Feet
Setback to Drain Field	125' Feet		
Setback to Privy (Portable, Composting)	NA 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 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: 389363 # of bedrooms: 3 Sanitary Date: 10-23-01

Permit Denied (Date): \_\_\_\_\_ Reason for Denial: \_\_\_\_\_

Permit #: 13-0043 Permit Date: 4-12-13

Is Parcel a Sub-Standard Lot  Yes (Deed of Record) \_\_\_\_\_  No

Is Parcel in Common Ownership  Yes (fused/Contiguous lot(s)) \_\_\_\_\_  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 NA

Were Property Lines Represented by Owner Was Property Surveyed  Yes  No

Inspection Record: lot of record Non conforming structure.

Date of Inspection: 3-21-13 Inspected by: M. Fustela

Conditions(s): Town, Committee or Board Conditions Attached?  Yes  No (if No they need to be attached.)

Signature of Inspector: Michael Fustela Zoning District (PRB) \_\_\_\_\_

Hold For Sanitary:  \_\_\_\_\_ Hold For TBA:  \_\_\_\_\_ Hold For Affidavit:  \_\_\_\_\_ Date of Approval: 3-21-13

Hold For Fees:  \_\_\_\_\_

ty, WI

TAHKODAH SHORES RD

04-012-2-43-07-03-2-05-004-04000

04-012-2-43-07-03-2-05-004-04000

04-012-2-43-07-03-2-05-004-07000

04-012-2-43-07-03-2-05-004-09000

04-012-2-43-07-03-2-05-004-08000

LAKE TAHKODAH

04-012-2-43-07-03-2-05-004-10000

04-012-2-43-07-03-2-05-004-12000

50m

200ft