

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

APPLICATION FOR PERMIT
 BAYFIELD COUNTY WISCONSIN
 Date Submitted (Received)
 MAY 21 2012
 Bayfield Co. Zoning Dept.

Permit #: 12-0169
 Date: 6-6-12
 Amount Paid: \$75.00
 Refund: \$0.00
 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 FILL 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: Anthony & Margorie Ronchi
 Address of Property: Same
 City/State/Zip: 10190 Shore Rd Iron River WI 54847
 Telephone: 715-372-5606
 Cell Phone: 715-877-0227

Contractor: SC/HP
 Contractor Phone: Same
 Plumber: SC/HP
 Plumber Phone: Same

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

PROJECT LOCATION: N SW 1/4 1/4
 Legal Description: (Use Tax Statement) 1/4
 PIN: (23 digits) 04 016-2-46-08-03-3 02-000-20000
 016-2-46-08-03-3 016-1080-04 000
 Recorded Document: (i.e. Property Ownership) 633-3833669-347-883-510
 Volume Page(s)

Section: _____, Township: _____ N, Range: _____ W
 Town of: Delta
 Lot Size: _____
 Acreage: 1.06

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: \$10,000
 *Include donated time & material

Project (What are you applying for):
 New Construction
 Addition/Alteration
 Conversion
 Relocate (existing bldg)
 Run a Business on Property

of Stories and/or basement:
 1-Story
 1-Story + Loft
 2-Story
 Basement

Use:
 Seasonal
 Year Round
 1
 2
 3
 Bathrooms
 None
 Enlarge
 Bedroom

of bedrooms: 3

What Type of Sewer/Sanitary System Is on the property?
 Municipal/City
 (New) Sanitary
 Sanitary (Exists) Specify Type: Private
 Privy (Pit) or Vaulted (min 200 gallon)
 Portable (w/service contract)
 Compost Toilet
 None

Water: City Well

Existing Structure: (if permit being applied for is relevant to it)
 Length: 48 Width: 40 Height: 18
 Proposed Construction: Length: 18 Width: 10 Height: 12

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)		()	
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)		()	
<input type="checkbox"/> with Loft		()	
<input type="checkbox"/> with a Porch		()	
<input type="checkbox"/> with a Deck		()	
<input type="checkbox"/> with (2 nd) Deck		()	
<input type="checkbox"/> with Attached Garage		()	
<input type="checkbox"/> Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)		()	
<input type="checkbox"/> Mobile Home (manufactured date)		()	
<input checked="" type="checkbox"/> Addition/Alteration (specify) <u>10x18 Extend Bldg w/d Bathrooms</u>		(10 X 18)	180
<input type="checkbox"/> Accessory Building (specify)		()	
<input type="checkbox"/> Accessory Building Addition/Alteration (specify)		()	
<input type="checkbox"/> Special Use: (explain)		()	
<input type="checkbox"/> Conditional Use: (explain)		()	
<input type="checkbox"/> Other: (explain)		()	

FAILURE TO OBTAIN A PERMIT OF 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): Anthony Ronchi Margorie & Ronchi
 Date: 5/20/12
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

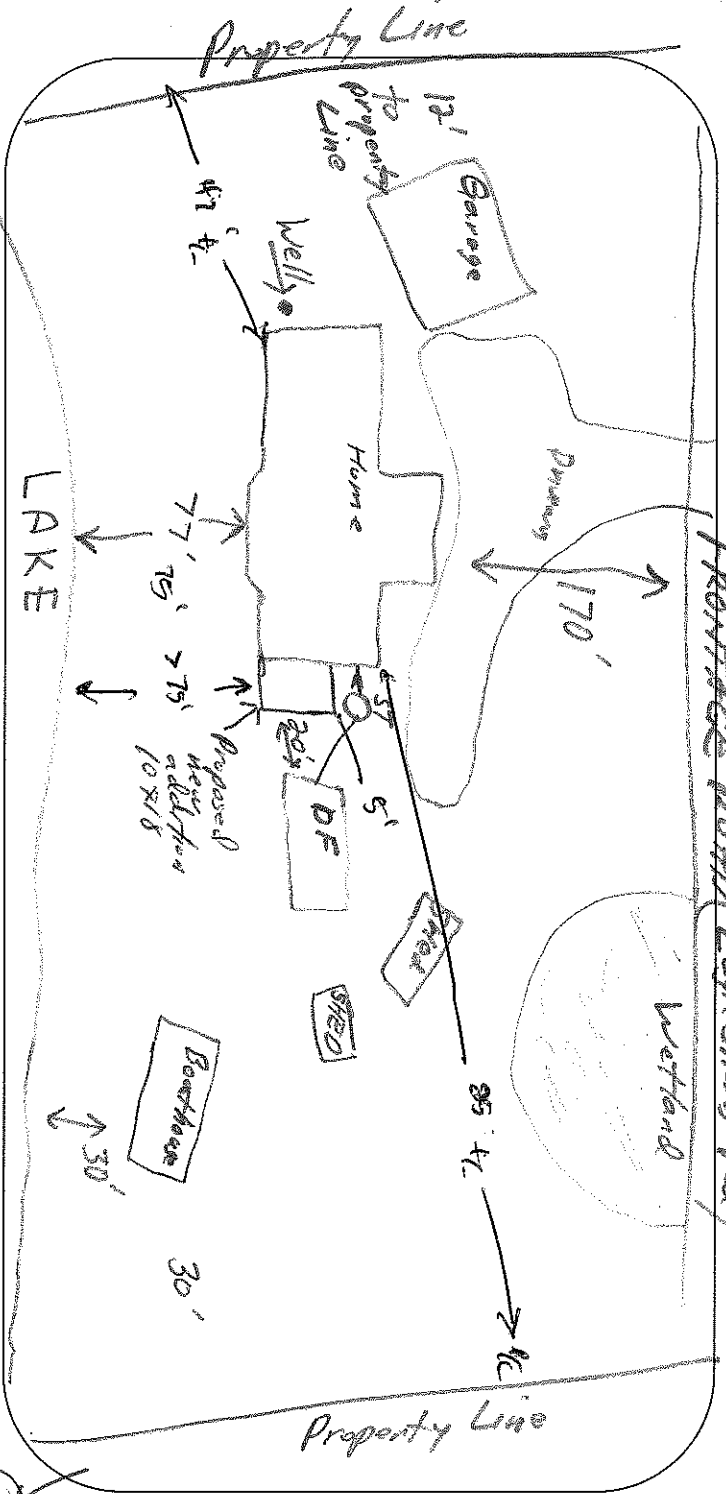
Authorized Agent: _____ Date: _____
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy 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.

Address to send permit: 10190 Eagle Shore Rd Iron River WI 54847
 Date: JUN 6 2012
 Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed
 Secretarial Staff

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Look 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)
 (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	170 Feet	Setback from the Lake (ordinary high-water mark)	77 Feet
Setback from the Established Right-of-Way		Setback from the River, Stream, Creek	
		Setback from the Bank or Bluff	
Setback from the North Lot Line			
Setback from the South Lot Line	135 Feet	Setback from Wetland	60-70'
Setback from the West Lot Line	120 Feet	Setback from 20% Slope Area	
Setback from the East Lot Line	33 Feet	Elevation of Floodplain	
Setback to Septic Tank or Holding Tank	5 Feet	Setback to Well	5 Feet
Setback to Drain Field	20-25 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 Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.
 The local Town, Village, City, State ~~and other~~ agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: <u>2616</u>	# of Bedrooms: <u>2</u>	Sanitary Date: <u>1/14</u>
Permit Denied (Date):	Reason for Denial:	Permit Date: <u>6-6-18</u>		
Permit #: <u>18-0169</u>				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Eed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lots)	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	Case #:	Previously Granted by Variance (B.O.A.)	Case #:	
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Inspection Record Requested <u>ADDITIONAL LOCATION SETBACKS OF EXISTING HOUSE, 2' FROM CORNERS</u> <u>WETLANDS, THE DRIVEWAY BE SURVEY AND STAKE 2.50 FT</u>				
Date of Inspection: <u>6-1-18</u>	Inspected by: <u>DP</u>			
Condition(s): <u>Town, Committee or Board Conditions Attached?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.) <u>EXTENSION MUST BE AT WEST END OF FR. FROM THE ROAD. STAKE AND CONSIDERATION</u>				
Signature of Inspector: <u>[Signature]</u>		Date of Approval: <u>6-1-18</u>		
Hold For Sanitary: <input checked="" type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	