

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
 Date Stamp (received)
 MAY 22 2013
 Bayfield Co. Zoning Dept.

Permit #: 13-0106 ENTERED
 Date: 5-31-13
 Amount Paid: \$75
 Refund: 5-22-13

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: Glen C Miller Mailing Address: 63495 Trout Lake Rd Iron River, WI 54847 Telephone: 218 590-8430

Address of Property: 63355 Trout Lake Rd City/State/Zip: Iron River, WI 54847 Cell Phone: _____

Contractor: _____ Contractor Phone: _____ Plumber: _____ Plumber Phone: _____

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Bob Miller Agent Phone: 372-4692 Agent Mailing Address (include City/State/Zip): _____

PROJECT LOCATION: S/2 NW 1/4, SE 1/4 Legal Description: (Use Tax Statement) 02-0000-04-016-2-46-08-04-4 20000 Pinned (23 digits) 02-0000-04-016-2-46-08-04-4 20000 Recorded Document (i.e. Property Ownership) 923 Page(s) 331

Section 4, Township 46 N, Range 8 W Town of: Delta Lot Size _____ Acreage 20

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If yes---continue If yes---continue

Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue If yes---continue

Distance Structure is from Shoreline: _____ feet
 Distance Structure is from Shoreline: 180ft 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
\$ 13,000	<input checked="" 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"/> Basement	<input type="checkbox"/> Seasonal <input checked="" 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>Conu</u> <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input checked="" 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: 32' Width: 24' Height: 16'

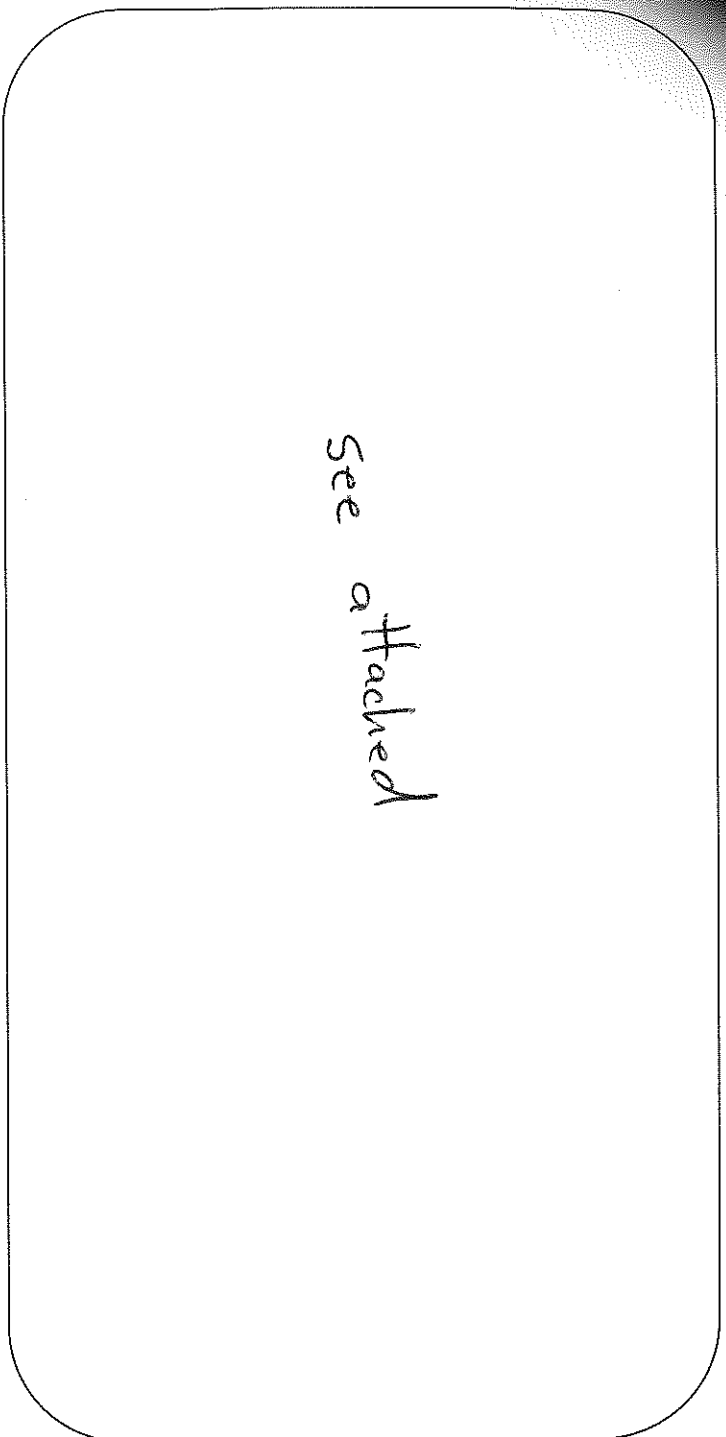
Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	() X ()	
	Residence (i.e. cabin, hunting shack, etc.)	() X ()	
	with Loft	() X ()	
	with a Porch	() X ()	
	with (2 nd) Deck	() X ()	
	with (2 nd) Deck	() X ()	
<input type="checkbox"/> Commercial Use	Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	() X ()	
	Mobile Home (manufactured date)	() X ()	
	Addition/Alteration (specify)	() X ()	
	Accessory Building (specify) <u>pole bldg.</u>	(<u>24</u> X <u>32</u>)	<u>768</u>
	Accessory Building Addition/Alteration (specify)	() X ()	
Rec'd for Issuance	Special Use: (explain)	() X ()	
	Conditional Use: (explain)	() X ()	
MAY 31 2013	Other: (explain)	() 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.

Owners: Miller
 (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: 5-21-13
 Address to send permit: same as above
 If you are signing on behalf of the owner(s) a letter of authorization must accompany this application
 If you recently purchased the property send your Recorded Deed

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

- Show Location of: **Proposed Construction**
 Show / Indicate: North (N) on Plot Plan
 (1) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
 (2) Show: All Existing Structures on your Property
 (3) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
 (4) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 (5) 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	1/2 mile	Setback from the Lake (ordinary high-water mark)	180+
Setback from the Established Right-of-Way	1/2 mile + Feet	Setback from the River, Stream, Creek	N/A
Setback from the North Lot Line	350+	Setback from the Bank or Bluff	N/A
Setback from the South Lot Line	N/A	Setback from Wetland	600+
Setback from the West Lot Line	1000+	Setback from 20% Slope Area	N/A
Setback from the East Lot Line	1,100+	Elevation of Floodplain	N/A
Setback to Septic Tank or Holding Tank	150+	Setback to Well	200+
Setback to Drain Field	135+		
Setback to Privy (Portable, Composting)	N/A		

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: _____ # of bedrooms: _____ Sanitary Date: _____

Permit Denied (Date): _____ Reason for Denial: _____

Permit #: 13-0106 Permit Date: 5-31-13

Is Parcel a Sub-Standard Lot: Yes (Deed of Record) No
 Is Parcel in Common Ownership: Yes (Fused/contiguous Lots) No
 Is Structure Non-Conforming: Yes No

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

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

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

Inspection Record: Yes No
 Affidavit Required: Yes No
 Affidavit Attached: Yes No

Date of Inspection: 5-30-13 Inspected by: Mt. Fustal Zoning District: (F-1)
 Lakes Classification: (3)

Condition(s): Town, Committee or Board Conditions Attached? Yes No - (if No they need to be attached.)
May not be used for human habitation.
No water under pressure in structure.
Well stapled. Meets all setbacks.

Signature of Inspector: Michael Powell Date of Approval: 5-31-13

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

