

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  
 RECEIVED  
 MAY 28 2013  
 Bayfield Co. Zoning Dept.

Permit #: 13-015  
 Date: 6-3-13  
 Amount Paid: \$185  
 Refund: 5-28-13

**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: LORI A. & JOSEPH E. TAPPA Mailing Address: 990128 AVE. City/State/Zip: PLEASANT PRAIRIE, WI. 53158 Telephone: (262) 694-5074  
 Address of Project: XXX 51236 RD City/State/Zip: MASON, WI 54856 City/State/Zip: PLEASANT PRAIRIE, WI. 53158 Cell Phone: (262) 705-4370

Contractor: SELF Contractor Phone: \_\_\_\_\_ 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: NW 1/4, NE 1/4 Gov't Lot \_\_\_\_\_ Lot(s) \_\_\_\_\_ CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivisions: \_\_\_\_\_  
 Section 36, Township 46 N, Range 7 W Town of: Delta Lot Size \_\_\_\_\_ Acreage 40

Legal Description: (Use Tax Statement) PN: (23 digits) 04-016-2-46-07-36-1 02-000-10,000 Recorded Document: (i.e. Property Ownership) Volume 965 Page(s) 192

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. Interim) Creek or Landward side of Floodplain?  Yes--continue  No  
 Distance Structure Is from Shoreline: \_\_\_\_\_ feet Is Property in Floodplain Zone?  Yes  No  
 Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes--continue  No  
 Distance Structure Is from Shoreline: \_\_\_\_\_ feet

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>\$3,000.00</u>	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input checked="" type="checkbox"/> None
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> No Basement	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Compost Toilet	
		<input type="checkbox"/> Foundation	<input type="checkbox"/> _____		<input checked="" type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it) Length: 20' Width: 20' Height: 14'  
 Proposed Construction: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	<u>(20 X 20)</u>	<u>400</u>
	Residence (i.e. cabin, hunting shack, etc.)	( )	( )
	with Loft	( )	( )
	with a Porch	( )	( )
	with (2 <sup>nd</sup> ) Porch	( )	( )
	with a Deck	( )	( )
	with (2 <sup>nd</sup> ) 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 type="checkbox"/> Municipal Use	Addition/Alteration (specify)	( )	( )
	Accessory Building (specify) <u>Garage</u>	( )	( )
	Accessory Building Addition/Alteration (specify)	( )	( )
	Rec'd for Issuance	( )	( )
	Special Use: (explain)	( )	( )
	Conditional Use: (explain)	( )	( )
	Other: (explain) <u>STORAGE</u>	( )	( )

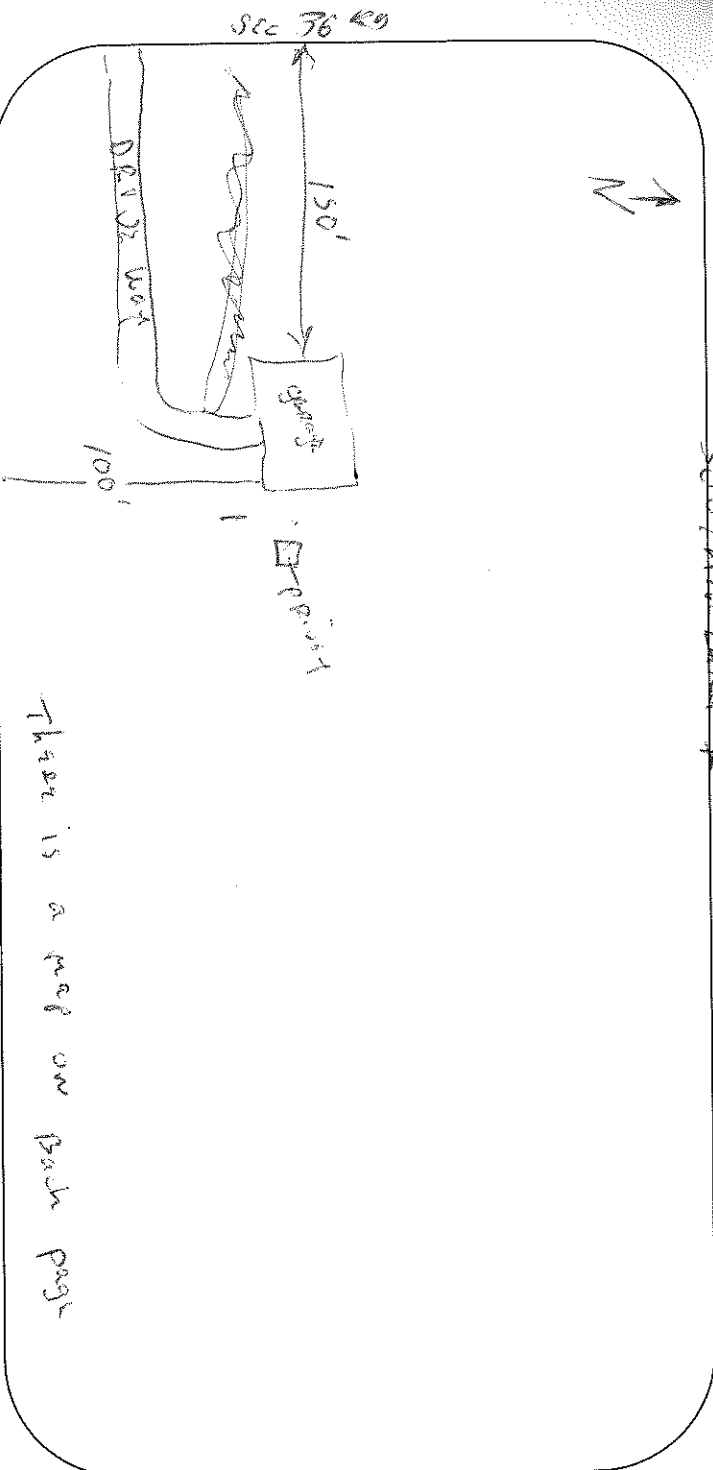
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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: 5-28-2013  
 (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)  
 Address to send permit 9901-28 Ave Pleasant Prairie, WI 53158 Attach \_\_\_\_\_  
 APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE If you recently purchased the property send your Recorded Deed \_\_\_\_\_

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 any (\*): (\* ) 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%

*Southland Rd*



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	150' Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	150' Feet	Setback from the River, Stream, Creek	250' Feet
Setback from the North Lot Line	1100' Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	100' Feet	Setback from Wetland	200' Feet
Setback from the West Lot Line	150' Feet	Setback from 20% Slope Area	NA Feet
Setback from the East Lot Line	4200' Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	NA Feet	Setback to Well	NA Feet
Setback to Drain Field	NA Feet		
Setback to Privy (Portable; Composting)	30' 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 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.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:	# of bedrooms:	Sanitary Date:			
Permit Denied (Date):		Reason for Denial:					
Permit #: <b>13-015</b>	Permit Date: <b>6-3-13</b>						
<input type="checkbox"/> Is Parcel a Sub-Standard Lot <input type="checkbox"/> Is Parcel in Common Ownership <input type="checkbox"/> Is Structure Non-Conforming	<input checked="" type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> No	<input checked="" type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No	<input type="checkbox"/> Mitigation Required <input type="checkbox"/> Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Affidavit Required <input type="checkbox"/> Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> No <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Case #:		Previously Granted by Variance (B.O.A.)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner			
Was Proposed Building Site Delineated		<input type="checkbox"/> Yes <input type="checkbox"/> No		Was Property Surveyed			
Inspection Record:		Inspected by: <b>M. Tuttle</b>		Zoning District: <b>(A-1)</b>			
<b>Metals setbacks.</b>				Lakes Classification: <b>(NA)</b>			
Date of Inspection: <b>6-3-13</b>				Date of Re-Inspection:			
Condition(s): Town, Committee or Board conditions attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)		May not be used for human habitation.					
No water under pressure in structure.							
Signature of Inspector: <b>Michael Tuttle</b>		Date of Approval: <b>6-3-13</b>					
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>			