

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

**APPLICATION FOR PERMIT**  
 BAYFIELD COUNTY, WISCONSIN  
**PERMITIVE**  
 Date Stamp: APR 25 2012  
 Bayfield Co. Zoning Dept.

Permit #:	19-0093
Date:	5-3-12
Amount Paid:	\$75.00 PDS
Refund:	4/26/12

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 → <input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVATE	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name:	MICHAEL V BETHWELL	Mailing Address:	7550 TOWNLINE RD.	City/State/Zip:	WEST BEND WI 53090	Telephone:	
Address of Property:	49150 LONGVIEW RD	City/State/Zip:	DRUMMOND WI 54832	Cell Phone:	262 483-1274	Written Authorization Attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Contractor:	RAYMOND NELLESSEN	Contractor Phone:	715-3399	Plumber:	NONE	Plumber Phone:	
Authorized Agent:	(Person Signing Application on behalf of Owner(s))	Agent Phone:		Agent Mailing Address (include city/State/Zip):			
PROJECT LOCATION	N 1/2 SW 5014	PIN: (23 digits)	04-018-2-41-08-13-3-03-000-20000	Recorded Document: (i.e. Property Ownership)	Volume 902	Pages 683	
Gov't Lot		Lot(s)		Subdivision:			
Vol & Page		CSM		Lot Size			
Section	13	Township	44	Block(s) No.			
N. Range	8	W.		Lot Size			
Acres		Town of:	DRUMMOND	Acres			20

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 →

Non-Shoreland

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 * 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
\$4,900	<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 type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story		<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement			<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> No Basement			<input type="checkbox"/> Portable (w/ service contract)	
		<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
					<input checked="" type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it) Length: 30' Width: 12' Height: 12'

Proposed Construction: Length: 30' Width: 12' Height: 12'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( X X )	
	Residence (i.e. cabin, hunting shack, etc.)	( X X )	
	with Loft	( X X )	
	with a Porch	( X X )	
	with (2 <sup>nd</sup> ) Deck	( X X )	
	with a Deck	( X X )	
	with (2 <sup>nd</sup> ) Deck	( X X )	
	with Attached Garage	( X X )	
<input type="checkbox"/> Commercial Use	Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X X )	
	Mobile Home (manufactured date)	( X X )	
	Addition/Alteration (specify)	( X X )	
<input type="checkbox"/> Municipal Use	Accessory Building (specify) HORSE SHELLER	( 12' X 20' )	240'
	Accessory Building Addition/Alteration (specify)	( X X )	
	Special Use: (explain)	( X X )	
	Conditional Use: (explain)	( X X )	
	Other: (explain)	( X X )	

**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): Michael Bethwell Raymond Nellesen Robert R. Bethwell

(If there are Multiple Owners listed on the Deed Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: \_\_\_\_\_ Date: 04-23-12

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

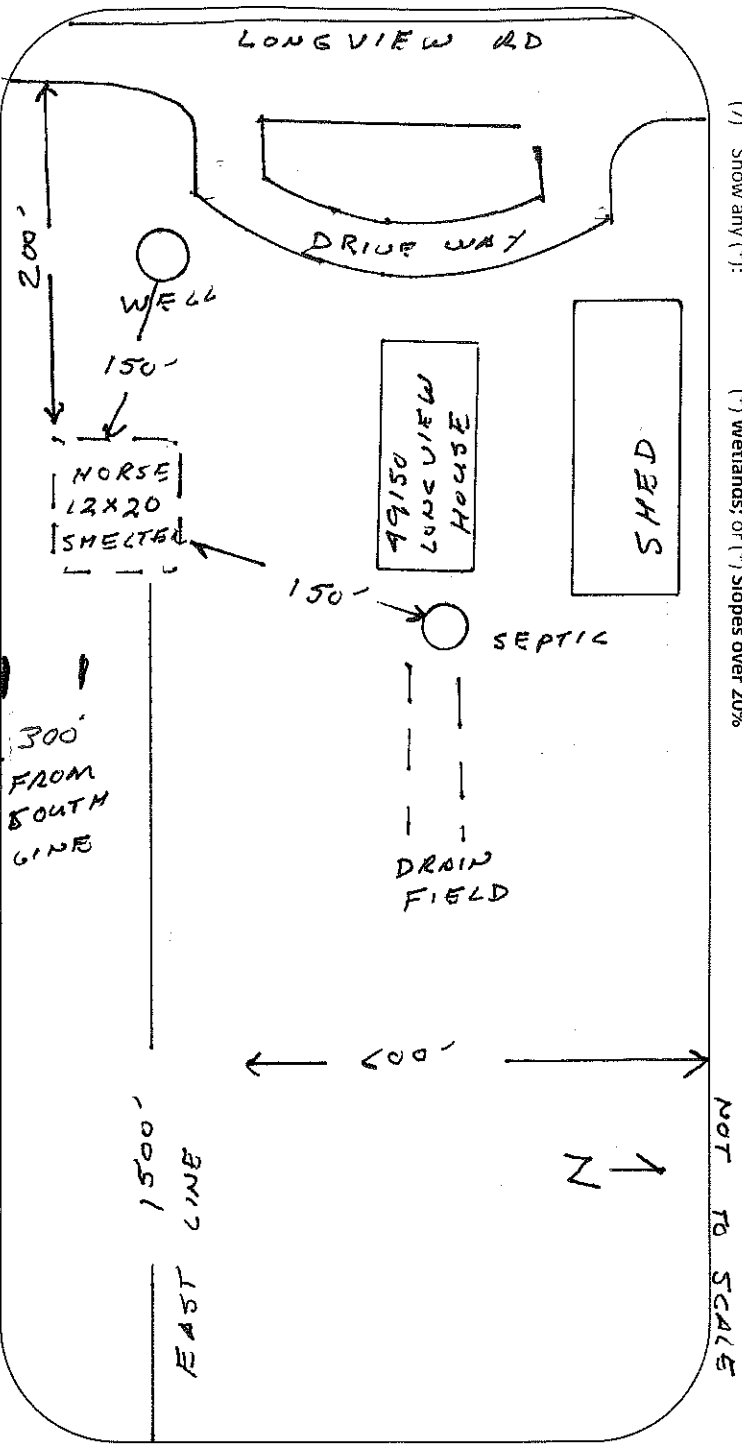
Rec'd for Issuance 7550 TOWNLINE RD. WEST BEND, WI 53090 Copy of Tax Statement

Address to send permit 7550 TOWNLINE RD. WEST BEND, WI 53090 If you recently purchased the property send your Recorded Deed

MAN 3 2012 APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	250 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	200 Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	600 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	300 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	250 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	150 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	150 Feet	Setback to Well	450 Feet
Setback to Drain Field	150 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 Dwelling: 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):					
Permit #: <b>18-0093</b>	Permit Date: <b>5-3-12</b>				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Deed of Record	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Fused/Contiguous Lot(s)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Previously Granted by Variance (B.O.A.)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Case #:	
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Inspection Record:	<b>Metals setback.</b>				
Date of Inspection:	<b>5-1-12</b>	Inspected by:	<b>MM Fitchell</b>		
Condition(s):	<b>May not be used for human habitation. No water under pressure in structure.</b>				
Signature of Inspector:	<b>Michael Fitchell</b>				Date of Approval: <b>5-1-12</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"/>