

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 Received: **08/08/2012**  
 AUG 08 2012

Permit #: **10-0279**  
 Date: **8-9-12**  
 Amount Paid: **\$125.00**  
 Refund: **8/2/12**

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.

Bayfield Co. Zoning Dept. VISIT OUR WEBSITE [www.bayfieldcounty.org/zoning/asp](http://www.bayfieldcounty.org/zoning/asp)

TYPE OF PERMIT REQUESTED:  LAND USE  SANITARY  PRIVATE  CONDITIONAL USE  SPECIAL USE  B.I.O.A.  OTHER

Owner's Name: **RYAN FREDERICKS** Mailing Address: **Box 57** City/State/Zip: **Drummond WI 54832** Telephone: **715-739-6230**

Address of Property: **52380 WI AVE.** City/State/Zip: **Drummond WI 54832** Cell Phone: **715-580-0000**

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: Legal Description: (Use Tax Statement) **1/4, 1/4 Gov't Lot Lot 1, CSM Vol. & Page 986 670 Lot(s) No. 13 Subdivision: Township of Drummond** PIN: (23 digits) **04-018-2-45-07-33-2 00-162 44000** Recorded Document: (i.e. Property Ownership) Volume: **.981** Page(s): **.48 670**

Section **33**, Township **45N**, Range **07** W Town of: **Drummond** Lot Size: \_\_\_\_\_ Acreage: **.309**

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?  If yes—continue → Distance Structure Is from Shoreline: \_\_\_\_\_ feet

Is Property/Land within 1000 feet of Lake, Pond or Flowage  If yes—continue → 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
\$ <u>12,500</u>	<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 checked="" type="checkbox"/> Seasonal <input type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input checked="" type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary Specify Type: _____ <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input checked="" type="checkbox"/> None	<input checked="" type="checkbox"/> City <input type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: **60 FT** Width: **45 FT** Height: **12 FT**

Proposed Construction: **WOOD SHED 12x12x7** Length: **60 FT** Width: **45 FT** Height: **8 FT**

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( ) ( )	( )
<input type="checkbox"/> Residential Use	Residence (i.e. cabin, hunting shack, etc.)	( ) ( )	( )
<input type="checkbox"/> Residential Use	with Loft	( ) ( )	( )
<input type="checkbox"/> Residential Use	with a Porch	( ) ( )	( )
<input type="checkbox"/> Residential Use	with (2 <sup>nd</sup> ) Deck	( ) ( )	( )
<input checked="" type="checkbox"/> Commercial Use	with Attached Garage	( ) ( )	( )
<input type="checkbox"/> Municipal Use	Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities)	( ) ( )	( )
<input type="checkbox"/> Municipal Use	Mobile Home (manufactured date)	( ) ( )	( )
<input type="checkbox"/> Municipal Use	Addition/Alteration (specify)	( ) ( )	( )
<input checked="" type="checkbox"/> Municipal Use	Accessory Building (specify) <b>COMMERCIAL GARAGE</b>	( <b>35 X 60</b> )	<b>2700</b>
<input checked="" type="checkbox"/> Municipal Use	Accessory Building Addition/Alteration (specify) <b>WOOD SHED ATTACHED 12x 45</b>	( <b>12 X 45</b> )	<b>510</b>
<input type="checkbox"/> Municipal Use	Special Use: (explain)	( ) ( )	( )
<input type="checkbox"/> Municipal Use	Conditional Use: (explain)	( ) ( )	( )
<input type="checkbox"/> Municipal Use	Other: (explain)	( ) ( )	( )

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): *Ryan Fredericks* *Christina Fredericks* Date *8-7-12*  
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

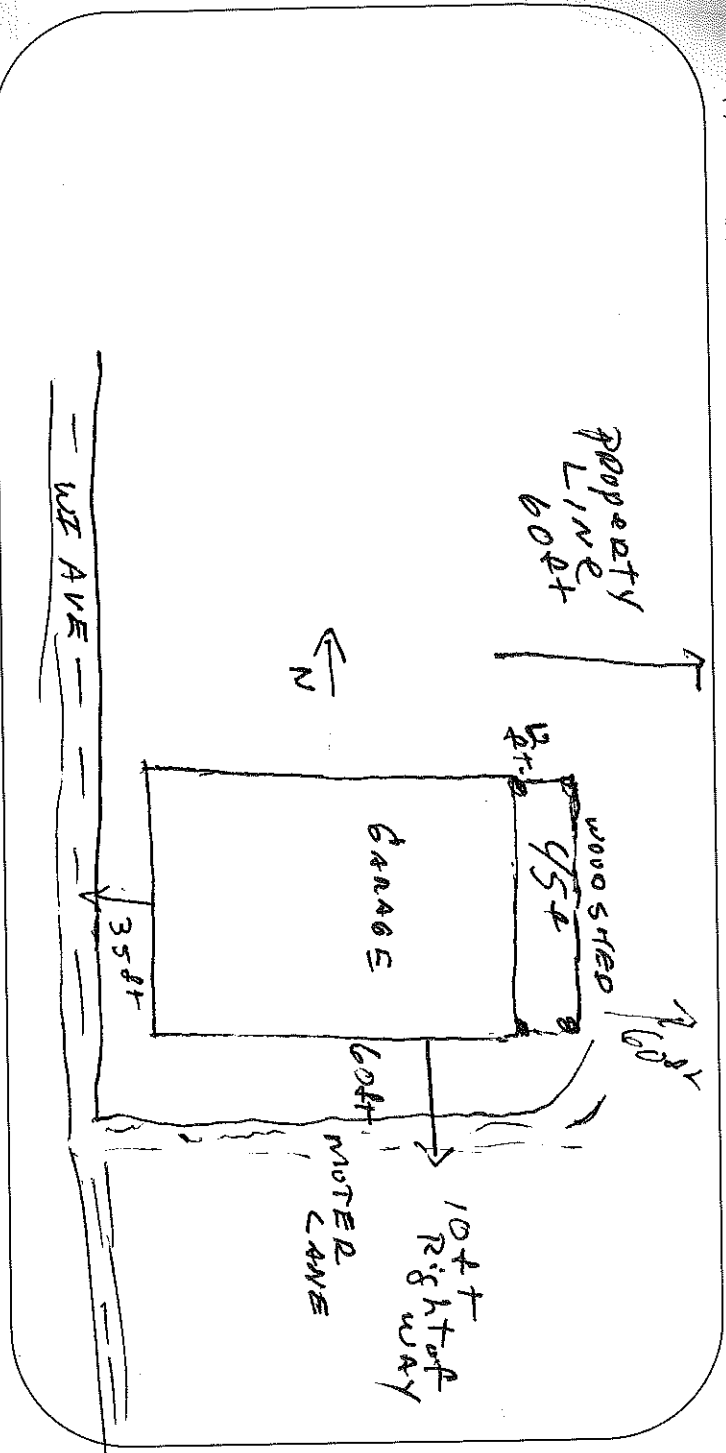
Authorized Agent: *Ryan Fredericks* Date *8-7-12*  
 (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: *4600* *Aug 9 2012* Attach   
 Copy of Tax Statement

*Fused to 4600* *SECRETARIAL STAMP 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: (\* ) 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	35 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	10 Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	30 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	10 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	40 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	60 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	NA Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	N/A 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: # of bedrooms: Sanitary Date:

Permit Denied (Date): Reason for Denial:

Permit #: 12-0279 Permit Date: 8-9-12

Is Parcel a Sub-Standard Lot  Yes (Deed of Record)  No  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 #:  Yes  No

Was Parcel Legally Created  Yes  No

Was Proposed Building Site Delineated  Yes  No

Inspection Record: Structure to be built on portion of existing slab. New part of building to meet all setbacks.

Date of Inspections: 8-7-12 Inspected by: M. Fuchs

Conditions(s): Mr. Plumbing pictures on water under pressure in structure.

Signature of Inspector: Michael J. Wetzels Date of Approval: 8-12

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