

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)  
 OCT 08 2013  
 Bayfield Co. Zoning Dept.

ENCLOSURE #:  
 13-03576  
 10-11-13  
 Amount Paid: 75.00 108-13  
 Refund: dak

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 FILE 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: Scott or Nicki Simler Mailing Address: 25605 Fischer Ashland, WI 54806 City/State/Zip: Ashland, WI 54806 Telephone: 715-

Address of Property: 25605 Fischer Rd City/State/Zip: Ashland, WI 54806 Cell Phone: 413-154415

Contractor: CAMPBELL Const. Mgmt Contractor Phone: 715-209-1012 Plumber: N/A Plumber Phone: \_\_\_\_\_

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: 715-209-1012 Agent Mailing Address (include City/State/Zip): 1418 9th St. W Ashland, WI 54806 Written Authorization Attached  Yes  No

PROJECT LOCATION: NW 1/4, NE 1/4 Legal Description: (Use Tax Statement) PN: (23 digits) 04-620-2-47-05-02-1-02-000011000 Recorded Document: (i.e. Property Ownership) Volume 1102 Page(s) 277

Section 6, Township 47 N, Range 5 W Town of: Ellen Bayfield WI Lot Size 1312x930 Acreage 28 ±

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?  If yes---continue  No

Is Property/Land within 1000 feet of Lake, Pond or Flowage?  If yes---continue  No

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
\$13,000	<input 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 type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement	<input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Existing Pit</u> <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well
	<input checked="" type="checkbox"/> Existing Structure: (if permit being applied for is relevant to it)		Length: <u>48'</u>	Width: <u>49'</u>	Height: <u>12'</u>	
	<input type="checkbox"/> Proposed Construction:					

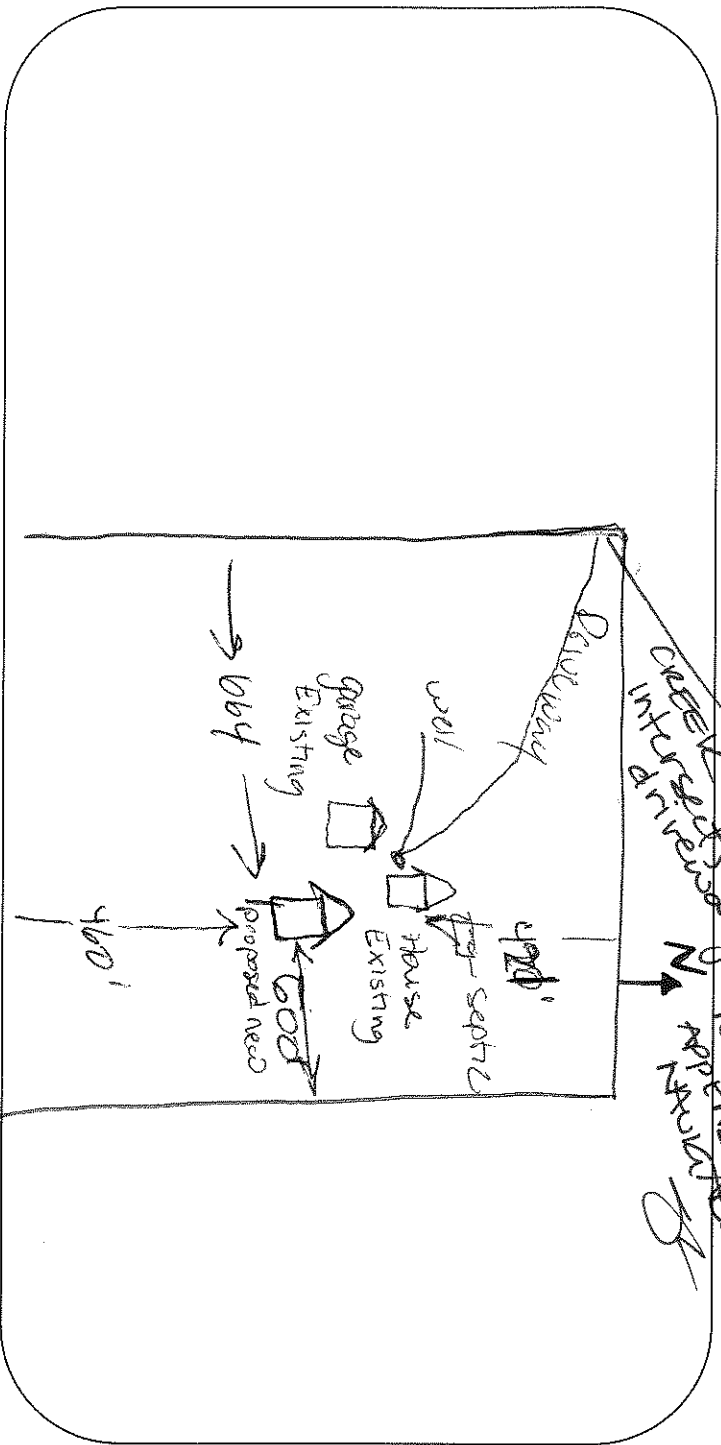
Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2 <sup>nd</sup> ) Deck with (2 <sup>nd</sup> ) Deck with Attached Garage	( ) ( ) ( ) ( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
<input type="checkbox"/> Commercial Use	Bunthouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities) Mobile Home (manufactured date) _____	( ) ( )	( ) ( )
<input type="checkbox"/> Municipal Use	Accessory Building (specify) <u>Agricultural Bld.</u> Accessory Building Addition/Alteration (specify) _____	( ) ( )	( ) ( )
Rec'd for Issuance	Special Use: (explain) _____ Conditional Use: (explain) _____ Other: (explain) _____	( ) ( ) ( )	( ) ( ) ( )
OCT 11 2013			
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.

Owner(s): \_\_\_\_\_ Date \_\_\_\_\_  
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)  
 Authorized Agent: Brad W. Coplin Date 10-8-2013  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)  
 Address to send permit 1418 9th St. West Ashland WI 54806  
 Attach  
 Copy of Tax Statement  
 If you recently purchased the property send your Recorded Deed

Box 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	750 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	500 Feet	Setback from the River, Stream, Creek	<del>N/A</del> 500 Feet
Setback from the North Lot Line	421 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	460 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	404 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	400 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	300 Feet	Setback to Well	2521 Feet
Setback to Drain Field	— Feet		
Setback to Privy (Portable, Composting)	— 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:	N/A		# of bedrooms:	2		Sanitary Date:	
Permit Denied (Date):		Reason for Denial:							
Permit #: 13-03526		Permit Date: 10-11-13							
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<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 Structure (Fused/Contiguous Lots)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #: N/A		Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #: N/A			
Was Parcel Legally Created	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Were Property Lines Repreresented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Were Property Lines Repreresented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Were Property Lines Repreresented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Were Property Lines Repreresented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Inspection Record: SAND LIFT IN STAIRS. WORKING ON PROPERTY RECENTLY CLEARED OF TREES. TO KNOW ENO TO ONE FOR WETLANDS/STORMWATER RUNOFF + PERMITS (SEE NECESSARY) FOR STUMPING + STORMWATER MITIGATION. (N/A)									
Date of Inspection: 10-10-13	Inspected by: J. CROONBREE, MURPHY	Issuing District							
Condition(s) Town, Committee or Board Conditions Attached?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(If No they need to be attached)							
BUILDING SHALL NOT BE USED FOR HUMAN HABITATION UNLESS NECESSARY COUNTY + UNIFORM DWELING PERMITS ARE OBTAINED.									
Signature of Inspector:									
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	Date of Approval: 10-11-13					