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
Date Stamp (Received)
MAR 01 2013
Bayfield Co. Zoning Dept.

ENTERED

Permit #:	13-0114
Date:	6-3-13
Amount Paid:	$250 RES $175 TBA 3-11-13
Refund:	

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:	Mailing Address:	City/State/Zip:	Telephone:
Timothy B. Ann S. Tripp	312 S. 13th st	Bismarck, N.D. 58504	701-400-6135
Address of Property:	**City/State/Zip:**		**Cell Phone:**
65725 Troutdale Rd	Iron River, Wisconsin 54847		
Contractor:	**Contractor Phone:**	**Plumber:** Polkoski Plumbing	**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)	PIN: (23 digits) 04-022-2-47-09-25-1 00-000-10000	Recorded Document: (i.e. Property Ownership) Volume _____ Page(s) _____

SE 1/4, NE 1/4	Gov't Lot 3	Lot(s) 19	CSM 1187	Vol & Page 7-47	Lot(s) No. 19	Block(s) No.	Subdivision:
Section 25, Township 47 N, Range 9 W				Town of: Auckes			Lot Size / Acreage 16.0

☐ 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 in Floodplain Zone? ☐ Yes ☒ No	Are Wetlands Present? ☒ Yes ☐ No
	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline: _____ feet		
☐ Non-Shoreland				

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
$ 75,000	☒ New Construction	☐ 1-Story	☐ Seasonal	☐ 1	☐ Municipal/City	☐ City
	☐ Addition/Alteration	☒ 1-Story + Loft	☒ Year Round	☒ 2	☒ (New) Sanitary Specify Type: Septic Sy	☒ Well
	☐ Conversion	☐ 2-Story	☐ _____	☐ 3	☐ Sanitary (Exists) Specify Type: _____	☐ _____
	☐ Relocate (existing bldg)	☐ Basement		☐ _____	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	
	☐ Run a Business on Property	☐ No Basement		☐ None	☐ Portable (w/service contract)	
		☐ Foundation			☐ Compost Toilet	
	☐ _____	☐ _____			☐ None	

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length: 86	Width: 30	Height: 20' +-

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	☐	Principal Structure (first structure on property)	(X)	
	☒	Residence (i.e. cabin, hunting shack, etc.)	(86 X 30)	1200
☒ Residential Use	☒	with Loft	(30 X 20)	600
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
		with (2nd) Deck	(X)	
☐ Commercial Use		with Attached Garage	(X)	
	☐	Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	(X)	
	☐	Mobile Home (manufactured date) _____	(X)	
	☐	Addition/Alteration (specify) _____	(X)	
☐ Municipal Use	☐	Accessory Building (specify) _____	(X)	
	☐	Accessory Building Addition/Alteration (specify) _____	(X)	
	☐	Special Use: (explain) _____	(X)	
	☐	Conditional Use: (explain) _____	(X)	
	☐	Other: (explain) _____	(X)	

Rec'd for Issuance
JUN 03 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): Timothy B Ann S. Tripp Ann Tripp **Date** 2/27/13
(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)

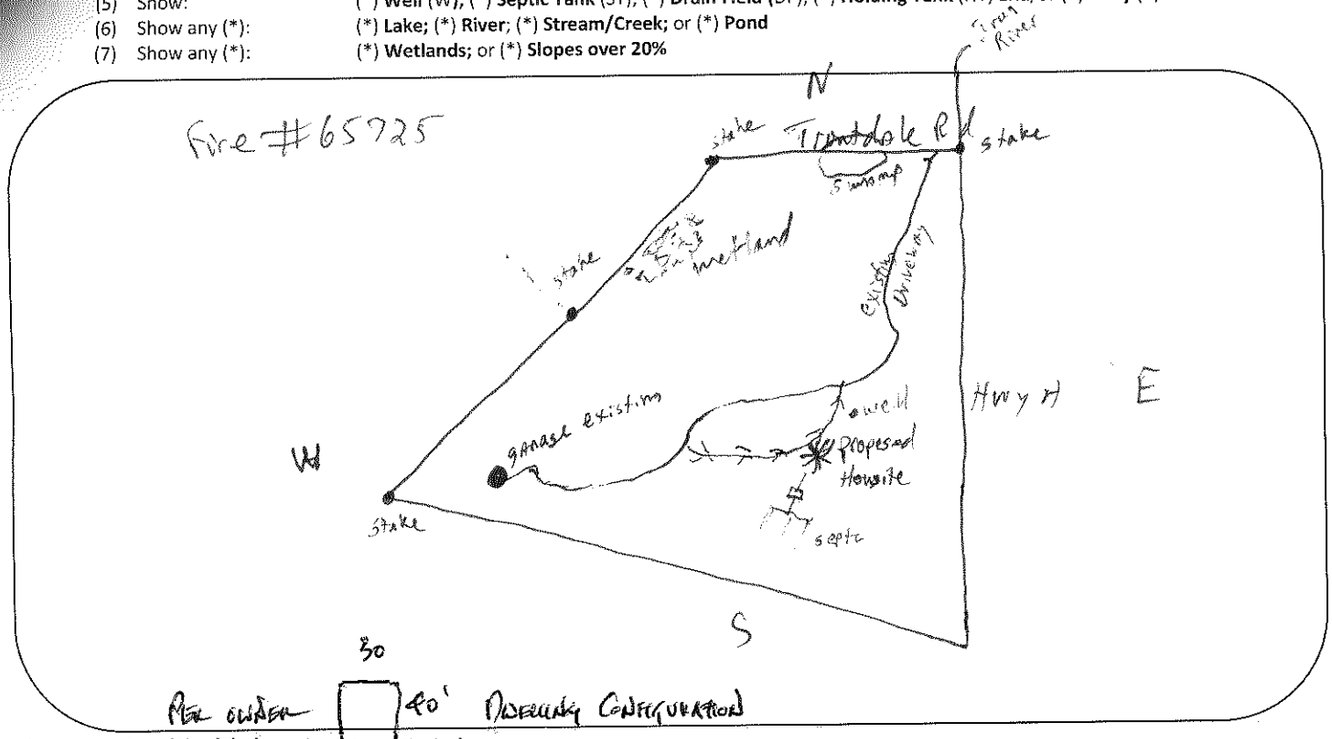
Address to send permit 312 S. 13th st. Bismarck, N.D. 58504

Attach
Copy of Tax Statement ✓
If you recently purchased the property send your **Recorded Deed**

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**	240'	Feet	Setback from the **Lake** (ordinary high-water mark)	N/A	Feet
Setback from the **Established Right-of-Way**		Feet	Setback from the **River, Stream, Creek**		Feet
			Setback from the **Bank or Bluff**		Feet
Setback from the **North** Lot Line	410' +/-	Feet			
Setback from the **South** Lot Line	490' +/-	Feet	Setback from **Wetland**	>25	Feet
Setback from the **West** Lot Line	415' +/-	Feet	Setback from **20% Slope Area**		Feet
Setback from the **East** Lot Line	e/e	Feet	Elevation of **Floodplain**		Feet
Setback to **Septic Tank** or **Holding Tank**	>5	Feet	Setback to **Well**		Feet
Setback to **Drain Field**	>10'	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 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: 13-25S	# of bedrooms: 2	Sanitary Date: 5-15-13
Permit Denied (Date):	Reason for Denial:		
Permit #: 13-0114	Permit Date: 6-3-13		

Is Parcel a Sub-Standard Lot	☐ Yes (Deed of Record)	☒ No	Mitigation Required	☐ Yes ☒ No	Affidavit Required ☐ Yes ☒ No
Is Parcel in Common Ownership	☐ Yes (Fused/Contiguous Lot(s))	☒ No	Mitigation Attached	☐ Yes ☒ No	Affidavit Attached ☐ Yes ☒ No
Is Structure Non-Conforming	☐ Yes	☒ No			

Granted by Variance (B.O.A.) ☐ Yes ☒ No Case #:	Previously Granted by Variance (B.O.A.) ☐ Yes ☒ No Case #:
Was Parcel Legally Created ☒ Yes ☐ No ____ Was Proposed Building Site Delineated ☒ Yes ☐ No 4-30-13	Were Property Lines Represented by Owner ☒ Yes ____ ☐ No Was Property Surveyed ☒ Yes ____ ☐ No

Inspection Record: PROPOSED STRUCTURE LOCATION AS REPRESENTED BY OWNER APPEARS TO SATISFY COMPLAINT & PERMIT MAY BE ISSUED PENDING SANITARY.

Zoning District (F-1) Lakes Classification (—)

Date of Inspection: 3-8-13 (NOT STAKED) Inspected by: DOC Date of Re-Inspection:

Condition(s); Town, Committee or Board Conditions Attached? ☐ Yes ☐ No –(If No they need to be attached.)
A UNIFORM DWELLING CODE (UDC) PERMIT FROM THE COUNTY CONTRACTED UDC INSPECTION AGENCY MUST BE OBTAINED PRIOR TO THE START OF CONSTRUCTION.

Signature of Inspector: [signature] Date of Approval: 4-30-13

Hold For Sanitary: ☒ ____ Hold For TBA: ☒ ____ Hold For Affidavit: ☐ ____ Hold For Fees: ☐ ____ ☐ ____