

APPLIED ORIGINAL  
ON TAX STATEMENT  
TO:  
Bayfield County Zoning Department  
P.O. Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

RECEIVED  
JUN 16 2008  
Bayfield Co. Zoning Dept.

Application No: 08-0241  
Date: \_\_\_\_\_  
Zoning District: F-1  
Amount Paid: \$250.00 6/16/08  
ROS

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.  
Changes in plans must be approved by the Zoning Department.

LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER \_\_\_\_\_  
Legal Description NE 1/4 of NW 1/4 of Section 21 Township 47 North, Range 3 West, Town of Iron River  
Gov't Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 4.65  
Volume \_\_\_\_\_ Page \_\_\_\_\_ of Deeds Parcel ID # 04-024-2-47-08-21-201-000-2000  
Use Tax Statement for Legal Description \_\_\_\_\_  
Property Owner EMILY MIGNOTT LLC Contractor MICHAEL KINNEY (Phone) 372-4143  
FRANCIS MIGNOTT LLC  
Address of Property LOT 1 PINE LAKE ROAD Plumber BROWN PEG & HITE  
IRON RIVER WI Authorized Agent \_\_\_\_\_ (Phone) \_\_\_\_\_

Telephone 715-372-4143 (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ Written Authorization Attached: Yes  No   
Is your structure in a Shoreland Zone? Yes  No  If yes, Distance from Shoreline: greater than 75'  75' to 40'  less than 40'   
Structure: New  Addition \_\_\_\_\_ Existing \_\_\_\_\_ Basement: Yes \_\_\_\_\_ No  Number of Stories 1  
Estimated Cost of Construction 100,000 Square Footage 1350 Sanitary: New  Existing \_\_\_\_\_ Privy \_\_\_\_\_ City \_\_\_\_\_  
USE:  \* Residence or Principal Structure (# of bedrooms) \_\_\_\_\_ 1518  Mobile Home (manufactured date) \_\_\_\_\_

Residence sq. ft. \_\_\_\_\_  
 \* Residence w/deck-porch (# of bedrooms) 3  Commercial Principal Building \_\_\_\_\_  
Residence sq. ft. 1350 Porch sq. ft. 168  Commercial Principal Building Addition (explain) \_\_\_\_\_  
Deck sq. ft. \_\_\_\_\_ Deck(2) sq. ft. \_\_\_\_\_  Commercial Accessory Building (explain) \_\_\_\_\_  
 \* Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_  
Residence sq. ft. \_\_\_\_\_ Garage sq. ft. \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_  
 Residential Addition / Alteration (explain) \_\_\_\_\_  Special/Conditional Use (explain) \_\_\_\_\_  
 Residential Accessory Building (explain) \_\_\_\_\_  External Improvements to Principal Building (explain) \_\_\_\_\_  
 Residential Accessory Building Addition (explain) \_\_\_\_\_  External Improvements to Accessory Building (explain) \_\_\_\_\_  
 Residential 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 or Authorized Agent (Signature) [Signature] Date 6-10-08 ATTACH \_\_\_\_\_  
Address to send permit 57655 East Lake Dr. Iron River, WI 54847 Copy of Tax Statement \_\_\_\_\_  
If you previously purchased the property Attach a Copy of Recorded Deed \_\_\_\_\_

\* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number 08-505 Date 6-1-08  
Date 6/16/08 Permit Number 08-0241 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: \_\_\_\_\_  
Inspection Record: Structure setbacks/conditions as represented by owner appears to be OK  
CEMENT W.J. PERMIT MAY BE ISSUED  
BY CONDITIONS. By DAL Date of Inspection 6-18-08

Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
Condition: A CUSTOM DRAWING (CDE (UD)) PERMIT MUST BE OBTAINED PRIOR TO THE  
START OF CONSTRUCTION FROM THE COUNTY BULKHEAD COC INSPECTION AGENCY.  
STRUCTURE MUST BE AT LEAST 10 FT FROM ALL PROPERTY LINES  
[Signature] Inspector [Signature] Date of Approval 6-13-08  
Rec'd for Issuance \_\_\_\_\_

NOV 2 9 2007  
RECORDED AT 10:00 AM

PATRICIA A OLSON  
BAYFIELD COUNTY, WI  
REGISTER OF DEEDS

2007R-S1776S

11/29/2007 09:10AM

IF EXEMPT #:

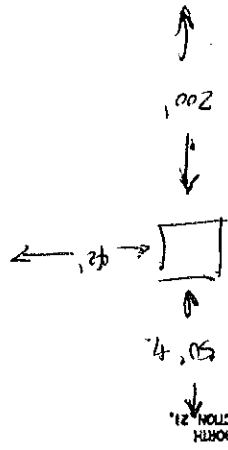
RECORDING FEE: 13.00

PAGES: 2

V9csmP250-251

PER DIMENSIONS ARE OUTSIDE DIAMETER

LEGEND  
○ SET 1" x 18" IRON PEG  
● FOUND MONUMENT, AS NOTED

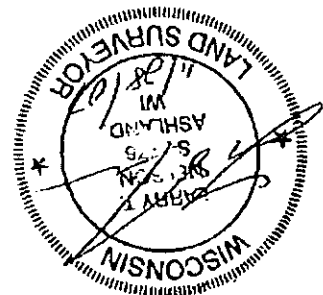
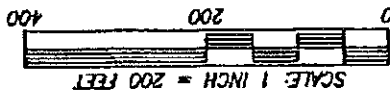


LINE TABLE

LINE	BEARING	DISTANCE
L1	N 83°20'52\" W	58.16'

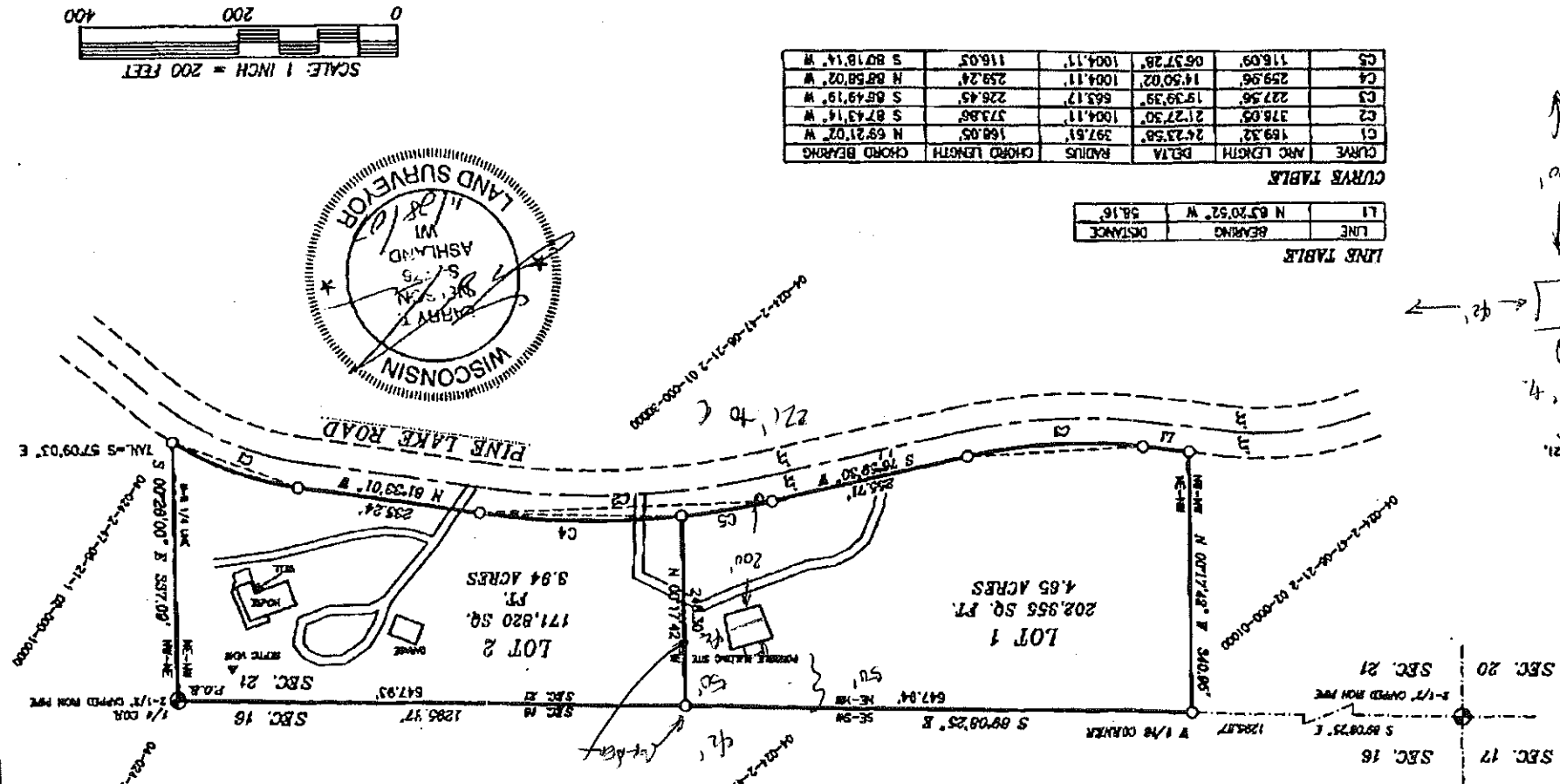
CURVE TABLE

CURVE	ARC LENGTH	DELTA	RADIUS	CHORD LENGTH	CHORD BEARING
C1	159.32'	24°23'58\"	397.61'	168.05'	N 69°21'02\" W
C2	378.09'	21°27'30\"	1004.11'	373.86'	S 87°43'16\" W
C3	227.56'	19°39'39\"	663.17'	226.45'	S 86°49'19\" W
C4	259.96'	14°50'02\"	1004.11'	259.24'	N 88°58'02\" W
C5	116.09'	06°37'28\"	1004.11'	116.05'	S 80°18'14\" W



CLIENT: WICKLUND, LORIN  
DRAWN BY: P. NELSON  
FILE: N/DA/TA/MBW/SEC21/  
ACAD/S07030/P/SDATA/05\_095  
NOVEMBER 27, 2007  
JOB NO.: S07\_030  
SCALE: 1 INCH = 200 FEET  
SHEET 1 OF 2 SHEETS  
NR. 345 PC. 89

NELSON  
SURVEYING  
INCORPORATED  
SUBMITTING HORIZONTAL DISPOSITION FORM 1964  
FAX: (715) 682-2882  
PHONE: (715) 682-2882  
ASHLAND, WISCONSIN 54806  
SUITE 207  
101 W. MAIN STREET



THE NE 1/4 OF THE NW 1/4 LYING NORTH OF PINE LAKE ROAD LOCATED IN SECTION 21, T. 47 N., R. 8 W., IN THE TOWN OF IRON RIVER, BAYFIELD COUNTY, WISCONSIN.

BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 1584

850

1628

ENTERED

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

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

RECEIVED  
MAY 22 2008  
Bayfield Co. Zoning Dept.

Application No.: 08-0244  
Date: 6-17-08  
Zoning District: R-1/1  
Amount Paid: \$175.00 20S  
5/22/08

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.  
Changes in plans must be approved by the Zoning Department.

LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER Short Term  
Legal Description: 2 1/4 of Section 28 Township 47 North, Range 8 West, Town of IRON RIVER  
Gov't lot 2 Lot 2 Block Assess. Plat of S.W. 1/4 of G.L. # 642 Acreage 1.33  
Volume 2 Page 2 of Deeds 04-024-247-08 Parcel I.D. # -33-1-00-117-05000  
Property Owner David + Bonnie Fetzek Contractor \_\_\_\_\_ (Phone) \_\_\_\_\_  
Address of Property 64985 McCarty Lake Rd Plumber \_\_\_\_\_ (Phone) \_\_\_\_\_  
Telephone 715-829-5688 (Home) \_\_\_\_\_ (Work) 30ft away from shore  
Is your structure in a Shoreland Zone? Yes  No  If yes, Distance from Shoreline: greater than 75'  75' to 40'  less than 40'

Structure: New  Addition  Existing  Basement: Yes  No  Number of Stories \_\_\_\_\_  
Estimated Cost of Construction \_\_\_\_\_ Square Footage 750 Sanitary: New  Existing  Privy \_\_\_\_\_ City \_\_\_\_\_  
USE:  Residence or Principal Structure (# of bedrooms) 2  Mobile Home (manufactured date) \_\_\_\_\_  
 Residence w/deck-porch (# of bedrooms) 1  Commercial Principal Building (explain) \_\_\_\_\_  
Residence sq. ft. 750 Porch sq. ft. 4x20A  Commercial Principal Building Addition (explain) \_\_\_\_\_  
Deck sq. ft. \_\_\_\_\_  Commercial Accessory Building (explain) \_\_\_\_\_  
 Residence w/attached garage (# of bedrooms) \_\_\_\_\_  Commercial Accessory Building Addition (explain) \_\_\_\_\_  
Residence sq. ft. \_\_\_\_\_ Garage sq. ft. \_\_\_\_\_  Commercial Other (explain) \_\_\_\_\_  
 Residential Addition / Alteration (explain) \_\_\_\_\_  Special/Conditional Use (explain) \_\_\_\_\_  
 Residential Accessory Building (explain) Guest cottage  External Improvements to Principal Building (explain) \_\_\_\_\_  
 Residential Accessory Building Addition (explain) \_\_\_\_\_  External Improvements to Accessory Building (explain) \_\_\_\_\_  
 Residential Other (explain) \_\_\_\_\_

FAILURE TO OBTAIN A PERMIT OF 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 or Authorized Agent (Signature) Bonnie Fetzek Date 5-5-08  
Address to send permit 2326 Trillium Dr Eau Claire, WI 54701 ATTACH  
Copy of Tax Statement  
If you previously purchased the property Attach a Copy of Recorded Deed

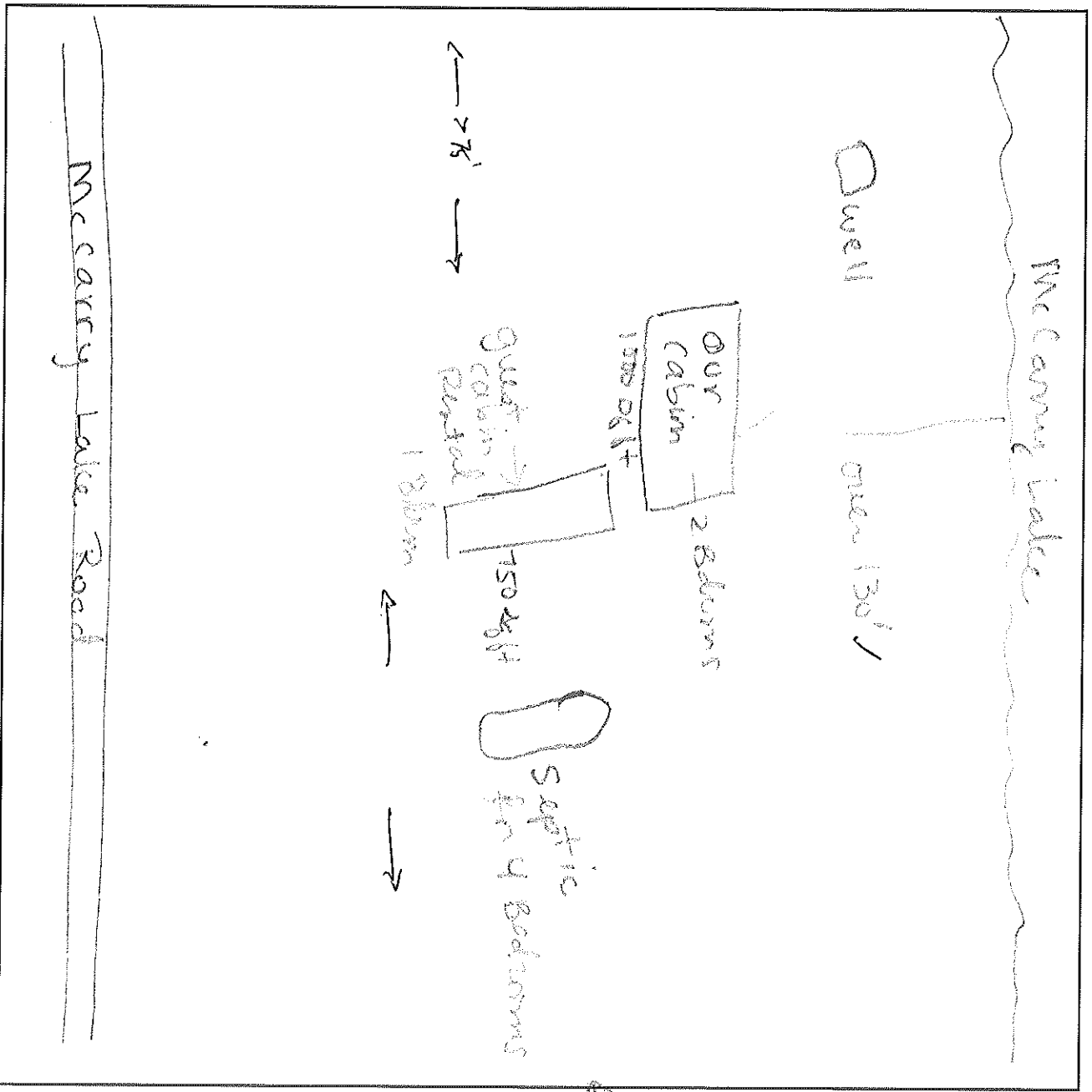
\* See Notice on Back APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued: \_\_\_\_\_ State Sanitary Number 389534 Date \_\_\_\_\_  
Date 6/17/08 Permit Number 08-0244 Permit Denied (Date) \_\_\_\_\_  
Reason for Denial: \_\_\_\_\_  
Inspection Record: BEARING STRUCTURES (BAPTIST PRE-EXISTING) PERMIT MAY BE ISSUED BY TBA  
By DOC Date of Inspection 5-28-08  
Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
Condition: \_\_\_\_\_  
TBA Signed [Signature] Date of Approval 5-28-08  
DOC/STATE Sanitary Permit Inspector [Signature] Rec'd for Issuance \_\_\_\_\_

JUN 17 2008

Secretarial Staff

Lot Line



Name of Frontage Road McCarray Lake

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the location, size and dimensions of the structure - (include any deck(s), porch or garage)
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:
  - a. Building to all lot lines
  - b. Building to centerline of road
  - c. Building to lake, river, stream or pond
  - d. Septic tank to closest lot line
  - e. Septic tank to building
  - f. Septic tank to well
  - g. Septic tank to lake, river, stream or pond
  - h. Privy to closest lot line
  - i. Privy to building
  - j. Privy to lake, river, stream or pond
  - k. Drain field to closest lot line
  - l. Drain field to building
  - m. Drain field to well
  - n. Drain field to lake, river, stream or pond.
  - o. Well to building

**IMPORTANT**  
DETAILED PLOT PLAN  
IS NECESSARY, FOLLOW  
STEPS 1-7 (a-o) COMPLETELY

\*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits.

Stake or mark proposed location(s) of new building, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.

**SUBMIT COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:**

Bayfield County Zoning Department  
P.O. Box 58  
Washburn, WI 54891  
(715) 373-6138

**APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN**

**RECEIVED**  
JUN 12 2008  
Bayfield Co. Zoning Dept.

**Office Use**

Application No.: 08-0259  
Date: \_\_\_\_\_  
Zoning District/Lakes Class: R-PD/1  
Amount Paid: \$125 6/12/08  
mf  
Pd x Helen Gazdek Nyde

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LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER \_\_\_\_\_  
Legal Description \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of Section 38 Township 47 North, Range 8 West, Town of IRON RIVER  
Gov'l Lot 5 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # \_\_\_\_\_ Acreage 4.42  
Volume \_\_\_\_\_ Page \_\_\_\_\_ of Deeds \_\_\_\_\_ Parcel I.D. # 08-1074-05 Use Tax Statement for Legal Description

Property Owner HERMITAGE INC. Contractor S&F (Phone) \_\_\_\_\_  
Authorized Agent Helen Nyde (Phone) 292-1107

Address of Property IRON RIVER, WI 54847  
Telephone 715-372-9344 (Home) 715-372-9580 (Work)  
Is your structure in a Shoreland Zone? Yes  No  If yes, Distance from Shoreline: 75' or greater  <75' to 40'  less than 40'   
Structure: New \_\_\_\_\_ Addition  Existing \_\_\_\_\_ Basement: Yes \_\_\_\_\_ No  Number of Stories 1  
Estimated Cost of Construction 2,000.00 Square Footage 418 Sanitary: New \_\_\_\_\_ Existing \_\_\_\_\_ Privy \_\_\_\_\_ City \_\_\_\_\_

**USE:**

- Residence (# of bedrooms) \_\_\_\_\_ (# of bedrooms)
- Residence w/deck-porch (# of bedrooms) \_\_\_\_\_
- Residence w/attached garage (# of bedrooms) \_\_\_\_\_
- Residential Addition/Alteration (explain) \_\_\_\_\_
- Residential Accessory Building (explain) \_\_\_\_\_
- Residential Accessory Building Addition (explain) DECK
- Residential Other (explain) \_\_\_\_\_
- External Improvements to Principal Building (explain) \_\_\_\_\_
- External Improvements to Accessory Building (explain) \_\_\_\_\_
- Mobile Home (manufactured date) \_\_\_\_\_ (# of bedrooms)
- Commercial Principal Building \_\_\_\_\_
- Commercial Principal Building Addition (explain) DECK
- Commercial Accessory Building (explain) \_\_\_\_\_
- Commercial Accessory Building Addition (explain) \_\_\_\_\_
- Commercial Other (explain) \_\_\_\_\_
- Special/Conditional Use (explain) \_\_\_\_\_
- External Improvements to Accessory Building (explain) \_\_\_\_\_

**FAILURE TO OBTAIN A PERMIT OF 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 or Authorized Agent (Signature) Helen Stankiewicz Nyde Date 6/13/08  
Address to send permit PO BOX 214, IRON RIVER, WI 54847

\*\* ATTACH Copy of Tax Statement or Recorded Deed (if new owner)

**APPLICANT - PLEASE COMPLETE REVERSE SIDE**  
cell 792-1104

**OFFICE-USE ONLY**

Permit Issued: State Sanitary Number 192203 Date 1993  
Permit Number 08-0259 Date 6/20/08 Permit Denied (Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Inspection Record: Structure is non-complying to township, less than 75' from E. bank it may be issued by affidavit

Writings 2008-3246 H By DRC Date of Inspection 6-6-08

Mitigation Plan Required: Yes  No  Variance (B.O.A.) # \_\_\_\_\_  
Condition: \_\_\_\_\_ Rec'd for Issuance

JUN 20 2008

Signed [Signature] Inspector  
Date of Approval 6-6-08  
By 6-6-08 Staff

Lot Line

70' FEET E OF C&H  
New Colerain Bldg.



← Name of Frontage Road (County Hwy #) →

1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location, size and dimensions of the building.
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:
 

<ol style="list-style-type: none"> <li>a. Building to all lot lines</li> <li>b. Building to centerline of road</li> <li>c. Building to lake, river, stream or pond</li> <li>d. Septic tank to closest lot line</li> <li>e. Septic tank to building</li> <li>f. Septic tank to well</li> <li>g. Septic tank to lake, river, stream or pond</li> <li>h. Privy to closest lot line</li> </ol>	<ol style="list-style-type: none"> <li>i. Privy to building</li> <li>j. Privy to lake, river, stream or pond</li> <li>k. Drain field to closest lot line</li> <li>l. Drain field to building</li> <li>m. Drain field to well</li> <li>n. Drain field to lake, river, stream or pond.</li> <li>o. Well to building</li> </ol>
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**IMPORTANT**  
DETAILED PLOT PLAN  
IS NECESSARY FOLLOW  
STEPS 1-7(a-o.) COMPLETELY.

\*NOTICE: The local town, village, city, state or federal agencies may also require permits.

Stake or mark proposed location(s) of new building, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.