

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

**APPLICATION FOR PERMIT**  
 BAYFIELD COUNTY, WISCONSIN  
**RECEIVED**  
 JAN 29 2013  
 Bayfield Co. Zoning Dept.

Permit #:	13-0014
Date:	2-8-13
Amount Paid:	\$600
Refund:	2-7-13

**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  PRIVATE  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER

Owner's Name: MATTHEW LEPLAW Mailing Address: P.O. BOX 486 City/State/Zip: IRON RIVER / WI / 54847 Telephone: Cell Phone: 715-292-3359

Address of Property: 6616 N. GRWEL PIT RD. City/State/Zip: IRON RIVER / WI / 54847

Contractor: DYKSTRA CONSTRUCTION Contractor Phone: 762-9599 Plumber: Don Mattson Plumber Phone: 715-351-5446

Authorized Agent: (person Signing Application on behalf of Owner(s)) Agent Phone: Don Mattson Agent Mailing Address (include City/State/Zip): IRON RIVER Written Authorization Attached  Yes  No

PROJECT LOCATION: SUB 1/4, SE 1/4 Legal Description: (Use Tax Statement) 04-024-2-47-08-20-4 03-000-3000 PIN: (23 digits)

Section 20, Township 47 N, Range 08 W Town of: IRON RIVER

Distance Structure is from Shoreline:                      feet Is Property in Floodplain Zone?  Yes  No

Distance Structure is from Shoreline: 1000 feet If yes---continue                      feet Are Wetlands Present?  Yes  No

Recorded Document: (i.e. Property Ownership) Volume                      Page(s)                     

Subdivision:                      Lot Size                      Acreage 19.66

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>200,000</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"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary Specify Type: <u>CONV.</u> <input type="checkbox"/> Sanitary (Exists) Specify Type: <u>                    </u> <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 84 ft Width: 28 ft Height: 14 ft

Proposed Construction: Length:                      Width:                      Height:                     

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) <input type="checkbox"/> with Loft <input checked="" type="checkbox"/> with a Porch with (2 <sup>nd</sup> ) Porch with a Deck <input checked="" type="checkbox"/> with (2 <sup>nd</sup> ) Deck with Attached Garage	( <u>86</u> x <u>60</u> ) ( <u>8</u> x <u>12</u> ) ( <u>84</u> x <u>28</u> )	<u>1680</u> <u>96</u> <u>672</u>
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities <input type="checkbox"/> Mobile Home (manufactured date) <u>                    </u>	( <u>                    </u> ) ( <u>                    </u> )	<u>                    </u> <u>                    </u>
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify) <u>                    </u> <input type="checkbox"/> Accessory Building (specify) <u>                    </u> <input type="checkbox"/> Accessory Building Addition/Alteration (specify) <u>                    </u>	( <u>                    </u> ) ( <u>                    </u> ) ( <u>                    </u> )	<u>                    </u> <u>                    </u> <u>                    </u>
	Special Use: (explain) <u>                    </u>	( <u>                    </u> )	<u>                    </u>
	Conditional Use: (explain) <u>                    </u>	( <u>                    </u> )	<u>                    </u>
	Other: (explain) <u>                    </u>	( <u>                    </u> )	<u>                    </u>

**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): Matthew Leplaw Don Mattson Date 1-21-13  
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

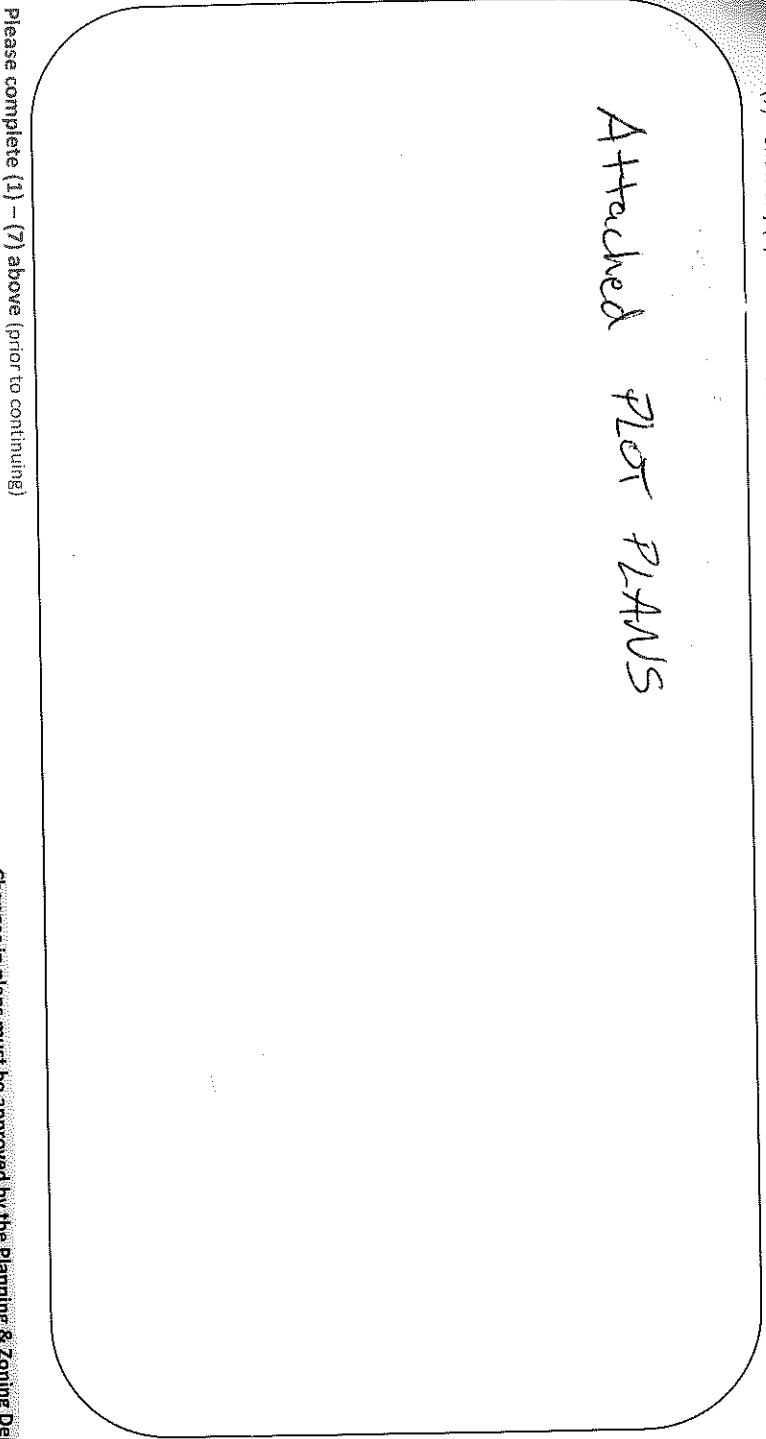
Authorized Agent:                      Date                       
 (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Attach                     

Address to send permit P.O. Box 486, Iron River, WI 54847 Copy of Tax Statement

Draw or Sketch your Property (regardless of what you are applying for)

- Proposed Construction**
- (1) Show Location of:
  - (2) Show / Indicate: North (N) on Plot Plan
  - (3) Show Location of (\*): All Existing Structures on your Property
  - (4) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
  - (5) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
  - (6) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%
  - (7) Show any (\*):

Attached PLOT PLANS



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	100 + Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	100 + Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	100 + Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	100 + Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	100 + Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	100 + Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	20 Feet	Setback to Well	50 Feet
Setback to Drain Field	40 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 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: <u>13-085</u>	# of bedrooms: <u>3</u>	Sanitary Date: <u>2-7-13</u>
Permit Denied (Date):	Reason for Denial:	Permit Date: <u>2-8-13</u>		
Permit #: <u>13-0014</u>	Is Parcel a Sub-Standard Lot: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Parcel in Common Ownership: <input type="checkbox"/> Yes (fused/contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Required Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required Affidavit Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming: <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 #:	Previously Granted by Variance (B.O.A.): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:
Was Parcel Legally Created: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Proposed Building Site Delineated: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record: <u>Private Property Survey 2-20-13</u>	Inspected by: <u>DN</u>	Zoning District: <u>(P1)</u>	Lakes Classification: <u>(-)</u>	Date of Re-Inspection:
Date of Inspection: <u>2-5-13</u>	Condition(s): <u>Private Property Survey</u>	Date of Approval: <u>2-5-13</u>		
Signature of Inspector: <u>[Signature]</u>	Hold For Fees: <input type="checkbox"/>			
Hold For Sanitary: <input checked="" type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	Date of Approval: <u>2-5-13</u>

Additional handwritten notes: Condition(s): Town, Committee or Board Conditions Attached? Yes No (If No they need to be attached.)  
A Village Ordinance, Code (DOC) Request from the County Attorney will be submitted with the  
obtaining them to the City of Burlington

PLOT PLAN

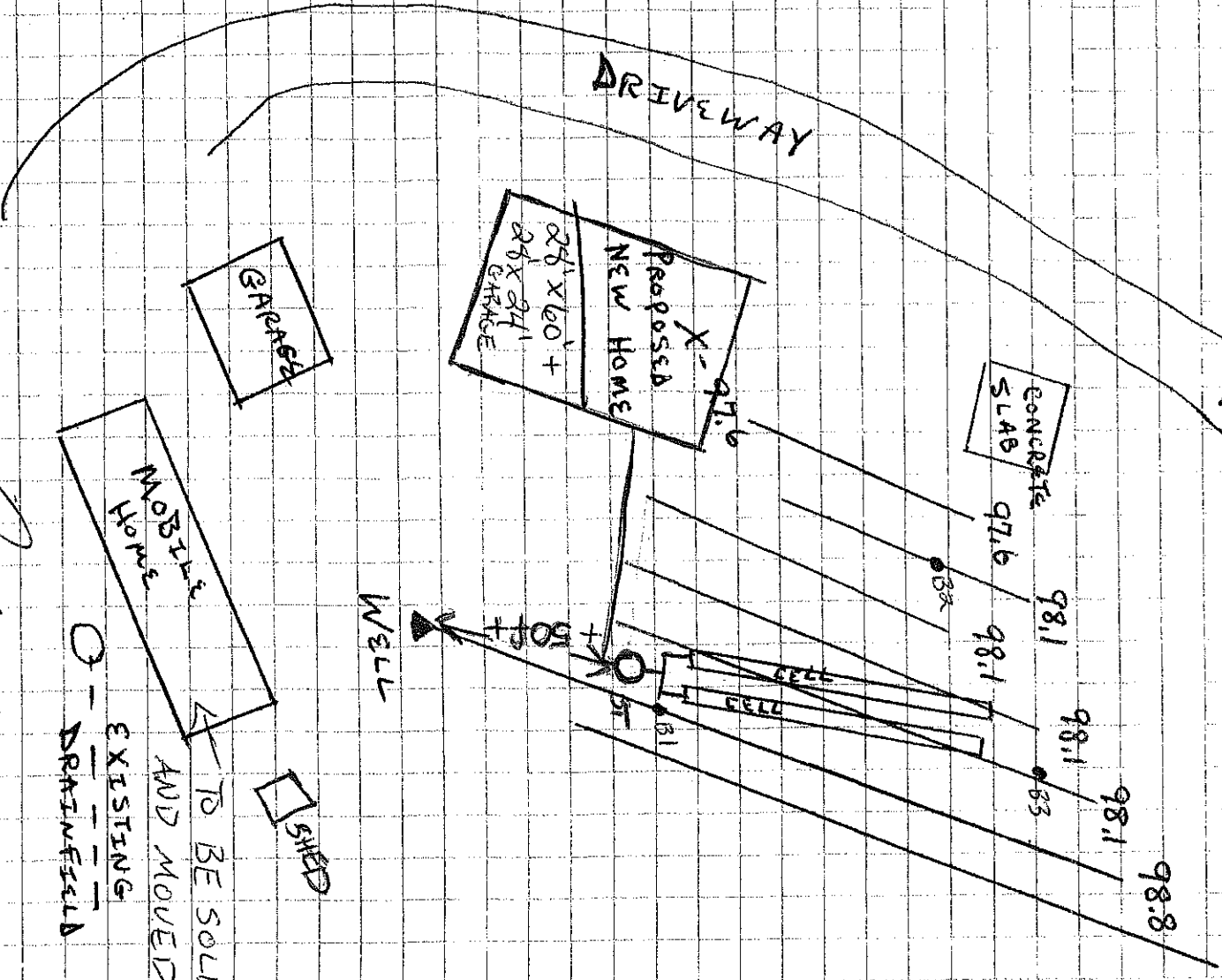
LEPLAY  
 SW SE 520 T47 NR 8 W  
 TOWN OF IRON RIVER  
 19.6 ACRES

SCALE 1" = 40'  
 PITS W/BACKHOS  
 ▲ BM - TOP OF WELL  
 1 1/2" ABOVE GROUND  
 = 100.

#66115  
 N GRAVEL PIT RD.

2% Slope  
 98.6

WEST PROP LINE



Brace & Stakeman

12/7/13

*[Signature]*

1-21-13

MPL-221651

12/7/13

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