SUBMIT: COMPLETED APPLICATION, TAX Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
Date Stamp (Received)

Refund:	Amount Paid:	Date:	Permit #:
	\$56-80-13. \$506-87-13.	6.07-13	13.000 1.000
	70	•	175

Bayfield Co. Zoning Dept.

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	×		The state of the s	- Construction	Action - Cold delicement	Conditional Use: (explain)	Condition		EX 27 21 313	
			The base from more every	1	ed Albinium error de Arbinium error de	Special Use: (explain)	Special Us			
					A PART OF PART				Rec'd for Issuance	ᆈ
	×	*			teration (specify)	Accessory Building Addition/Alteration	Accessory			
があって	ST ST	の国	- New York	Barrier States	ζ	Building (specify)	Accessory Building	/ /	Aso Indicated	
	×			-		Addition/Alteration (specify)	Addition/			
	×)				The state of the s		Mobile Ho			
	× 		□ cooking & food prep facilities) (or □ cooking & f	☐ sleeping quarters, <u>or</u>	Bunkhouse w/ (□ sanitary, or □	Bunkhous		and the second s	
	×)				Ige	with Attached Garage		® 	Commercial Use	
	×)				- Principle of the Prin	with (2 nd) Deck				
	×					with a Deck			_	
	×		The second secon		an and transferred the	with (2 nd) Porch			/ Vesidential ose	
	< >		- And Annual Manual Manual Control of the Control o		The state of the s	with Loft				₹
	× ×				nack, etc.)	Residence (i.e. cabin, hunting shack, etc.)	Residence			
rootage	×				(first structure on property)	(first struc	Principal Structure	×	•	(3) 3 (3) 2 (3) 2
Square	Dimensions	Dime		O)	Proposed Structure	7		•	Proposed Use	
8'	1300.		Width:	186.1	W			on:	Proposed Construction:	3
	Height:		Width:		Length:	for is relevant to it)	ng applied for	f permit beir	Existing Structure: (if permit being applied	Ε×
	and the second section of the section of t		None		7	- Commission of the Commission				
			☐ Compost Toilet					Property		
	(t)	contrac	Portable (w/service	X None			ness on	Run a Business		
<u> </u>	Vauited (min 200 gallon)	Vauited (m	☐ Privy (Pit) or ☐ \	<u> </u>	- therefore territory	X 2-Story	n visting bldg)	Conversion	000	45-
	/pe:	Specify Type:	(New) Sanitary	2	X Year Round	1-Story + Loft	Alteration	Addition/Alteration		Ϋ́
□ City		,	Municipal/City) P	☐ Seasonal	1-Story	truction	New Construction	ZĮ.	
Water	ty?	t Type of nitary System e property?	What Type of Sewer/Sanitary Syste Is on the property?	# of bedrooms	Use	# of Stories and/or basement	ct pplying for)	Project (What are you applying for)	Value at Time of Completion * include donated time &	유 옥 <
									XNon-Shoreland	×
□ No	□ No	-	ture is from Shoreline :	Distance Structure	or Flowage	☐ is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	/Land within	is Property		
Are Wetlands Present?	Is Property in Floodplain Zone?		ture is from Shoreline : feet	Distance Structure	If yescontinue	liver, S	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	Is Property reek or Land	choral-state]
		H66.69 x 466.69	H(wb.	ELLY	\\\X_{i}	N, Kange V		_ , lownship	Section Co	
. 0	Acreage	ře	Lot Size		Town of:	2		2	Landah X handan	
		ivision:	Block(s) No. Subdiv	Lot(s) No.	l Vol & Page	Lot Lot(s) CSM	Gov't Lot	1/4	12 2 Z Z Z Z	ني ا
erty Ownership s) 15 (2	Recorded Document: (i.e. Property Ownership) Volume 10 R Page(s) 15 P	Recorded Docu	103-060-(3000) Volum	05-02-10	-94-E	(Use Tax Statement) PIN: (23 digits)		Legal Description:	PROJECT LICOCATION	
Written Authorization Attached No	Attached): 	Agent Mailing Address (include City/State/zip):	gent Walling Addr			cation on behalf	n Signing Applic	Authorized Agent: {Person Signing Application on behalf of Owner(s)}	2
mone:	Plumber Phone:	-		Plumber:	one:				Contractor: Self	G
920-216-0833	920-6							UN D	EV Contison	. المعادية
920-216-0833 Cell Phone:		4956	/wI/5	Lane Neemah	Inrush	ZER JATH	J'Fer "	o James	Kennoth Aug Lewn Fex	大
OTHER	B.O.A. OT		ONAL USE ☐ SPECIAL USE	CONDITIONAL USE	TARY PRIVY	□ SANI	X LAND USE	JESTED-→	TYPE OF PERMIT REQUESTED	2 3

Attach
Copy of Tax Statement
st the property send your Recorded Deed

Date

Date

Address to send permit

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

C V V V V V V V V V V V V V V V V V V V	
	Signature of Inspector:
nditions Attached? Tes T	Condition(s):Town, Co
Inspected by: Robert Shiver Man Print Date of Re-Inspec	Date of Inspect
fed with 4 wood states Bullding site	Inspection Reco
Case #:	(1 Yes Was Parcel Legal
Lot □ Yes (Deed of Record)	Is Parcel a. Is Parcel in Con Is Structure
0159 Permit Date: 6-87-13	Permit #:13-05
formation (County Use Only) Sanitary Number: Reason for Denial: Reason for Denial:	Issuance Information
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform The local Town, Village, City, State or Federal agencies may also require permits.	(9)
rner, or verifiable by the Department by use or a corrected compass from a November per carried to the Department by use or a corrected Compass from a November per carried to the Department by use or a corrected compass from a November per carried to the Department by use or a corrected compass from a November per carried to the Department by use or a corrected compass from a November per carried to the Department by use or a corrected compass from a November per carried to the Department by use or a corrected compass from a November per carried to the Department by use or a corrected compass from a November per carried to the Department by use or a corrected compass from a November per carried to the Department by use or a corrected compass from a November per carried to the Department by use or a corrected compass from the Department by use or a corrected compass from the Department by use of the Department by use or a corrected compass from the Department by use of the Departmen	one previously surveys marked by a licensed s
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 it on the placement or construction of a structure within ten (10) feet of the owner's expense, other previously surveyed corner or marked by a licensed surveyor at the owner's expense, 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 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 the minimum required setback, the boundary line from which the setback must be measured must be visible from the minimum required setback, the boundary line from which the setback must be measured must be visible from the minimum required setback, the boundary line from which the setback must be measured must be visible from the minimum required setback, the boundary line from which the setback must be measured must be visible from the minimum required setback.	Prior to the placement other previously surve
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30 3 Feet Sethack to Well	Setback from th
	Setback from th Setback from th Setback from th
Itted Road Feet Setback from the Lake (ordinary night-water mark) Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff NA Setback from the Bank or Bluff	Setback from th Setback from th
Description Measurement Description	
complete (1) (7) above (prior to continuing) (B) Setbacks: (measured to the closest point)	Please compl
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	Annor Anno Anno Anno Anno Anno Anno Anno
ED Carlson Ro	
Starting to your Center RD	200
e transfer	1
of (*):	(3) (4) (5)
Show / Indicate: North (N) on Plot Plan	