

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
 AUG 15 2013
 Bayfield Co. Zoning Dept.

Permit #:	13-0681	ENTERED
Date:	9-3-13	
Amount Paid:	\$1780	
Refund:	8-15-13	

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: MICHAEL J. DALLY
 Address of Property: 16475 SAND HILL ROAD
 City/State/Zip: MASON, WI 54856
 Mailing Address: 302 N. BAOSER AVE.
 City/State/Zip: APPETON, WI 54914
 Contractor: MIK KLEHNER - BAUER RIVER BUILDERS
 Contractor Phone: 715-374-8998
 Plumber: DOUG MORTHELY - NICE PAUSE PLUMBERS
 Plumber Phone: 715-739-6255
 Authorized Agent: (Person Signing Application on behalf of Owner(s))
 Agent Phone: 715-348-2207
 Agent Mailing Address (include City/State/Zip):
 Written Authorization Attached: Yes No

PROJECT LOCATION: NELLY NW 1/4, NW 1/2 S1/4
 Legal Description: (Use Tax Statement)
 PIN: (23 digits) 04-028-2-47-07-22-2 01-000-30000
 Subdivision: SPIDER LAKE SHARES
 Volume: 758 Page(s): 474
 Section: 22, Township: 47 N, Range: 7 W
 Town of: KEYSTONE
 Lot(s): Gov't Lot: Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Lot Size: 233,100 sq ft. Acreage: 5.3

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If Yes---continue If Yes---continue

Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue If Yes---continue

Distance Structure Is from Shoreline: _____ feet
 Distance Structure Is from Shoreline: 134 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
\$ 160,000	<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 checked="" type="checkbox"/> Basement <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) <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"/> CITY <input checked="" type="checkbox"/> Sewell <input type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 36' Width: 28' Height: 32'
 Proposed Construction: Length: _____ Width: _____ Height: _____

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 nd) Porch with a Deck with (2 nd) Deck with Attached Garage	(28 X 36) (X X) (X X) (X X) (28 X 10) (X X) (X X) (X X)	1008 280
<input type="checkbox"/> Commercial Use	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities) Mobile Home (manufactured date) _____ Addition/Alteration (specify) _____ Accessory Building (specify) _____ Accessory Building Addition/Alteration (specify) _____	(X X) (X X) (X X) (X X) (X X)	
<input type="checkbox"/> Municipal Use		(X X) (X X)	
Rec'd for Issuance	Special Use: (explain) _____ Conditional Use: (explain) _____ Other: (explain) _____	(X X) (X X) (X X)	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

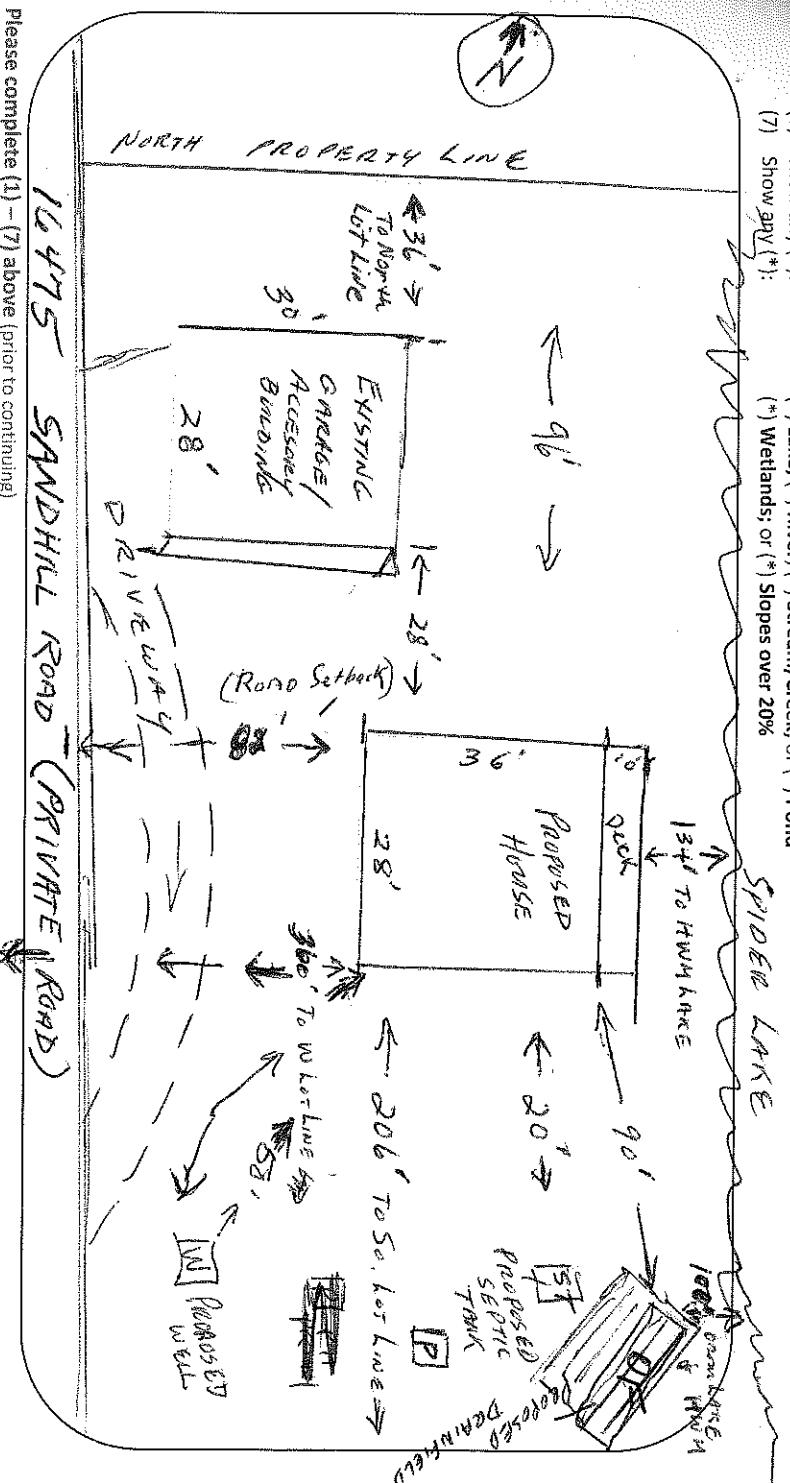
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) 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) consenting 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): Michael J. Dally
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
 Date: 8/14/2013

Address to send permit: 302 N. BAOSER AVE., APPETON, WI 54914
 APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE
 Copy of Tax Statement
 Attach
 If you recently purchased the property send your Recorded Deed

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	82 Feet	Setback from the Lake (Ordinary high-water mark)	134 Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	96 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	206 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	360 Feet	Setback from 20% Slope Area	Feet
Setback from the East Lot Line	134 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	20 Feet	Setback to Well	50 Feet
Setback to Drain Field	90 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.

Issuance Information (County Use Only) Sanitary Number: 13-955 # of bedrooms: 2 Sanitary Date: 8-30-13
 Permit Denied (Date): Reason for Denial:
 Permit #: 13-0281 Permit Date: 9-8-13

Is Parcel a Sub-Standard Lot Yes No (Deed of Record) Yes No
 Is Parcel in Common Ownership Yes (Fused/Contiguous lots) Yes No
 Is Structure Non-Conforming Yes No
 Granted by Variance (B.O.A.) Yes No Case #: N/A
 Was Parcel Legally Created Yes No
 Was Proposed Building Site Delineated Yes No
 Inspection Record: Were Property Lines Represented by Owner Yes No
 Was Property Surveyed Yes No

Date of Inspection: 8-27-13 Inspected by: CROSBY, MURPHY Date of Re-Inspection: N/A
 Condition(s): Town, Committee or Board Conditions Attached? Yes No (If No they need to be attached)
 HABITATION IN THE GARAGE SHALL BE REMOVED PRIOR TO START OF CONST.
 CHANGE OF USE + UDC PERMITS: UDC PERMIT FOR NEW DWELLING SHALL BE OBTAINED PRIOR TO START OF CONST.
 Signature of Inspector: [Signature] Date of Approval: 8-30-13
 Hold For Sanitary: Hold For TBA: Hold For Affidavit: Hold For Fees: