SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

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

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.

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) 2 4 2013

Baylleid Co.

Zoning Dept.

CHICAGO Permit #: Refund: Date: Amount Paid #175 ある。 13-0119 120-01 11-1-13 \bigcirc

Michael & Contractor: Contractor: Mark TYPE OF PERMIT REQUESTED→ XShoreland Owner's Nam Existing Structure: (If permit being applied for is relevant to it)
Proposed Construction: ☐ Non-Shoreland of Completion Z. Value at Time I (we) declare that this application (including any acc am (are) responsible for the detail and accuracy of a may be a result by bayriad county beying on this i above described property at any reasonable time for Owner(s) Municipal Use donated time & ىرا PROJECT LOCATION Neg Page Commercial Use material Rec'd for Issuanc Residential Use **Proposed Use** include 500 Section 1/4, & Mary D Rasim Ussen (Person Signing Application on beh i□ ☐ Addition/Alteration (What are ★Is Property/Land within 1000 feet of Lake, Pond or Flowage
 If yes---continue Legal Description: (Use Tax Statement) ☐ Is Property/Land within 300 feet of River, Stream (Incl. Internal Creek or Landward side of Floodplain? If yes—continue Relocate (existing Conversion **New Construction** 300 May 6 , Township Project re you applyi 1/4 JE Y ers listed on < M ☐ LAND USE ☐ SANITARY racy of all information I (we) am (are) provide on this information I (we) am (are) provide on this information I (we) am (are) provide time for the purpose of inspection. Other: Special Use: (explain) Shore Conditional Use: (explain) 43 N, Range Principal Structure (first structure on property) Mobile Home (manufactured date) Bunkhouse w/ (sanitary, Residence Hickrea Accessory Building Addition/Alteration Accessory Building Addition/Alteration (specify) FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES are companying 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) accompanying information I (we) arm (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 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 ing for) 9 the Deed All Owners must sign f of Owner(s)) 4 # of Stories and/or basement with a Porch with (2nd) Porch (i.e. cabin, hunting shack, etc. with a Deck with Attached Garage with (2nd) Deck with Loft Basement No Basement 1-Story + Loft 1-Story 2-Story Foundation 6 Contractor Phone: 590 - 0776 Agent Phone: j j PIN: (23 digits)
04-034-2-43-06-(3-3 City/State/Zip Mailing Address ٤ 0180 Mare/E. or letter(s) of authorization must accompany this application) \square sleeping quarters, or \square cooking & food prep facilities) You Proposed Structure Seasonal
 Sear Round
 Length: Length: □ PRIVY Seasonal Use Town of: 3 33 Z Z Varia Growling ☐ CONDITIONAL USE HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp) Agent Mailing Address (include City/State/Zip): Plumber ➢ None Distance Structure is from Shoreline: Distance Structure is from Shoreline: bedrooms 18849 w N Lot(s) No. S, kagon 05-201(-54000) Recorded Docu able Width: ☐ Municipal/City☐ (New) Sanitary☐ Width: Class Sanitary (Exists) Specify Type: 4. The Privy (Pit) or Vaulted (min 200 gallon) Block(s) No. Portable (w/service contract) /Zip: Compost Toilet SPECIAL USE Sewer/Sanitary System Is on the property? What Type of Lot Size Subdivision: 64821 8 Specify Type d Document: (i.e. Property Ow Dimensions Is Property in Floodplain Zone?
XYes
No B.O.A. OTHER
Telephone: 7 **|** × \times \times × XXX Height: Height: 10-24 8 794-2949 Cell Phone: Plumber Phone: Written Authorization e. Property Ownership)
Page(s) 283 2,500 \lesssim Are Wetlands Footage Square Present? ⊈Yes □ No XWell Water

Spuctures

(A)

37.

SET BACKS!

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DE PO

Authorized Agent:

Address to send permit

Ö

0) xad

2010

54821

Attach

Copy of Tax Statement

Copy send your Recorded Deed

Date

letter of authorization

Date of Approval;	t:	Hold For Affidavit:	Signature of inspector: //// Off Ref Hold For TBA:
		things:	silfation of yet
3	ed to be attached.) To purent full	Of pla	Condition(s):Town, Committee or Board Conditions Attached? MUST USE DEST MUNICACIME
Date of Re-Inspection:	The state of the s	Inspected by:	Date of Inspection: //_ // Wywww.my.com
District $(\mathcal{R} \mathcal{A})$			Inspection Record:
XYes □ No	nted by Owner perty Surveyed	XYes □ No	ally Created Delineated
#:	Previously Granted by Variance (B.O.A.) Pes No Case		è L
Affidavit Required □ Yes XNo Affidavit Attached □ Yes XNo	Mitigation Required ☐ Yes X No /	Lot(s)) XNo	Is Parcel a Sub-Standard Lot
	3	Permit Date: 12-2-1	Permit #: 13-0419
Sanitary Date:	# of bedrooms:		Issuance Information (County Use Only)
<u>(HT), Privy (P)</u> , and <u>Well</u> (W). st begun. m Dwelling Code.	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.	Location(s) of New Construction, § se Permits Expire One (1) Year from the Vone & Two Family Dwelling: ALL Mark local Town, Village, City, State or Fear	(9) Stake or Mark Proposed L NOTICE: All Land Us For The Construction Of New The
visible from one previously surveyed corner to the setback must be measured must be visible from the proposed site of the structure, or must be	rhor to the placement or construction of a structure within ten (13) freet of the minimum required setback, the boundary line from which the setback must be measured must be wisb 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 perviously surveyed corner to the other 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 process and the owner's expense.	(10) reet of the minimum required setback, the bo or at the owner's expense. ten (10) feet but less than thirty (30) feet from the corner, or verifiable by the Department by use of	Frior to the placement or construction of a structure within teal (10) freet of the minimum required setback, 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 for proviously surveyed corner to the other previously surveyed corner, or verifiable by the Department by marked by a licensed surveyor at the owner's expense.
		1000	tback to Privy (Portable, Composting)
Feet	Setback to Well	Feet	tback to Septic Tank or Holding Tank
Feet	Elevation of Floodplain	Feet	Setback from the East Lot Line
25 Feet	Setback from Wetland	Feet	Setback from the South Lot Line Setback from the South Lot Line
Feet	Setback from the Bank or Bluff		Alteria de la companya de la company
	Setback from the Lake (ordinary high-water mark) Setback from the River Stream Creek	Feet	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way
Measurement	Description	Measurement '	Description
roved by the Planning & Zoning Dept.	Changes in plans must be approv	he closest point)	(8) Setbacks: (measured to the closest point)
		continuing)	Please complete (1) – (7) above (prior to continuing)
	<i>*</i>	*) Wetlands; or (*) Slopes over 20%	Show any (*):
or (*)	(*) Driveway and (*) From age road (vame From age road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond	*) Well (W); (*) Septic Tank (ST); (* *) Lake; (*) River; (*) Stream/Creek	
,	(Niamo Eroptago Book)	(*) Driveway and (*) Frontage Road (Name Frontage Road)	Show / indicate: Show Location of (*):

