

**APPLICATION FOR SIGN**

Bayfield County Planning and Zoning Department  
P.O. Box 58  
117 East Sixth Street  
Washburn, WI 54891  
Phone - (715) 373-6138

**R E C E I V E D**  
APR 23 2012

Office Use:  
Application No. 13-0048  
Date 4-22-13  
Fee Paid \$50.00 205  
4/25/12

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department, Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED BY APPLICANT.  
Changes in plans must be approved by the Zoning Department

Applicant William Walsh Contractor self

Address 44890 Century Dr Authorized Agent \_\_\_\_\_

CAVE WI 54821 Agent's Telephone \_\_\_\_\_

Telephone 715-794-2126 Written Authorization Attached: Yes ( ) No ()

Accurate Legal Description involved in this request: Zoning District: R-1

1/4 of 1/4 of Section 11 Township A3 N. Range 6 W. Town of Neenah

Gov't Lot 3 Lot 1 Block \_\_\_\_\_ Subdivision 04-034-2-43-00-11-2 05-003-60000 CSM # 982

Volume 709 Page 219 of Deeds Parcel I.D. # located Gov't V.6, P.248 (LOT 3) 381D ACREAGE 0.61D

Additional Legal Description: LOT 1 CSM # 982, V.6 P. 248 (LOT 3) 381D ATTACH Copy of Tax Statement

Sign: On-premise  Off-premise  Sign: New  Replacement

Size of Sign: 8' Feet by 12' Feet Height of Sign: 10' Feet from grade to top of Sign

If this sign is off-premise, owner of property must complete the following:  
I, \_\_\_\_\_, owner of the above described property, do hereby give

my authorization for \_\_\_\_\_ to erect and maintain a sign on my property.  
Signed \_\_\_\_\_ Date \_\_\_\_\_

Property Owner  
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
APPLICANT - PLEASE COMPLETE REVERSE SIDE

For Office Use Only

Permit Issued: \_\_\_\_\_ Permit Number 13-0048 Permit Denied (Date) \_\_\_\_\_  
Date 4-22-13

Reason for Denial: \_\_\_\_\_  
Inspection Record: Michael Furtak  
By MM Furtak Date of Inspection 4-18-13

Variance (B.O.A.) # \_\_\_\_\_

Condition Rec'd for Issuance  
APR 22 2013  
Signed Michael Furtak Date of Approval 4-22-13  
Inspector  
Secretarial Staff

and use frontage road as a guideline, and indicate North (N) on plot plan

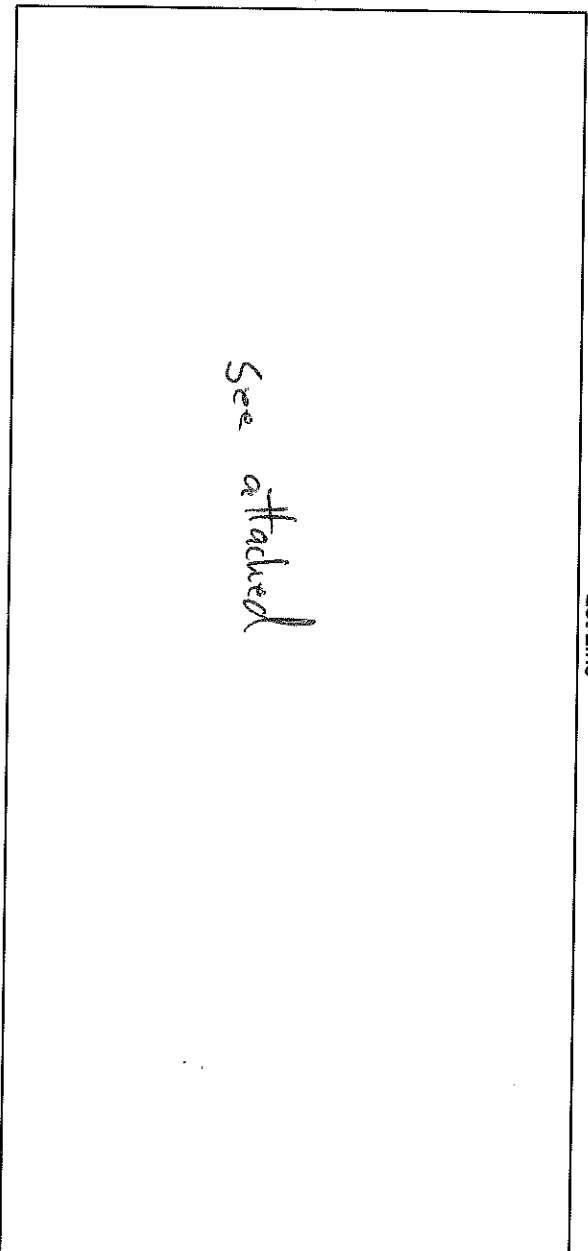
Show the sign location

**IMPORTANT**  
Detailed Plot Plan is Necessary

3. Show dimensions in feet on the following:

- a. Sign from centerline of road(s)
- b. Sign from right-of-way line
- c. Sign from property lines
- d. Sign from lake, river, stream or pond
- e. Sign from other signs

Lot Line



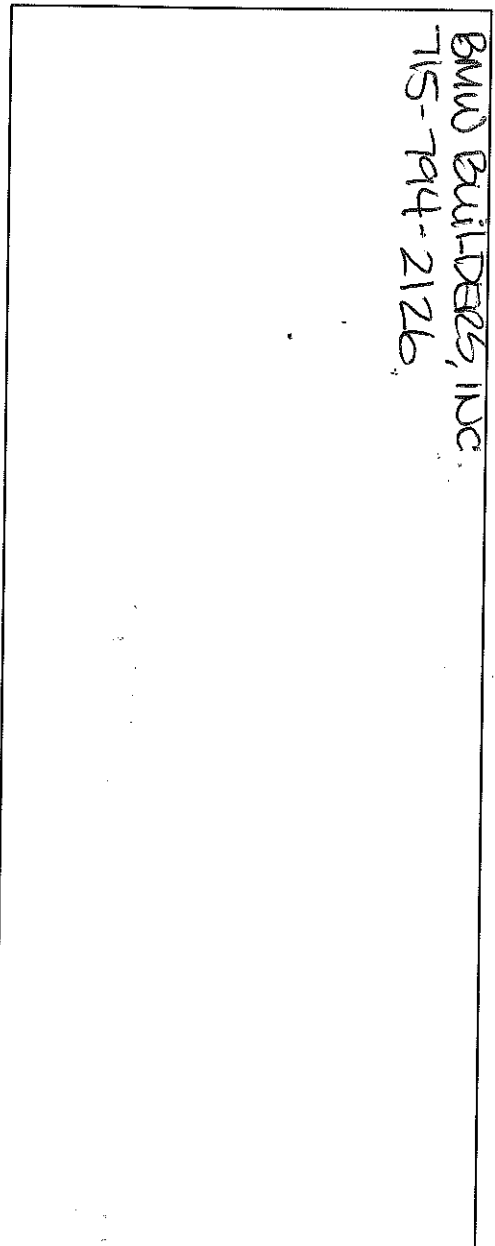
Lot →  
Line

See attached

← Lot  
Line

Name Frontage Road County Road D,  
 NOTICE: The local town, village, city, state or federal agencies may also require permits.  
 Sign Plan

(Fill in Information Desired on Sign)



BMW BUILDERS, INC.  
 715-794-2126

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.

I, the undersigned, attest that the information contained herein is accurate and true.

[Signature]  
 Applicant's/ Agent's Signature

4/18/12  
 Date

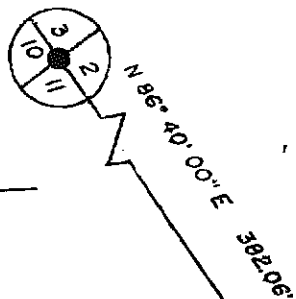
Address to Mail Permit to



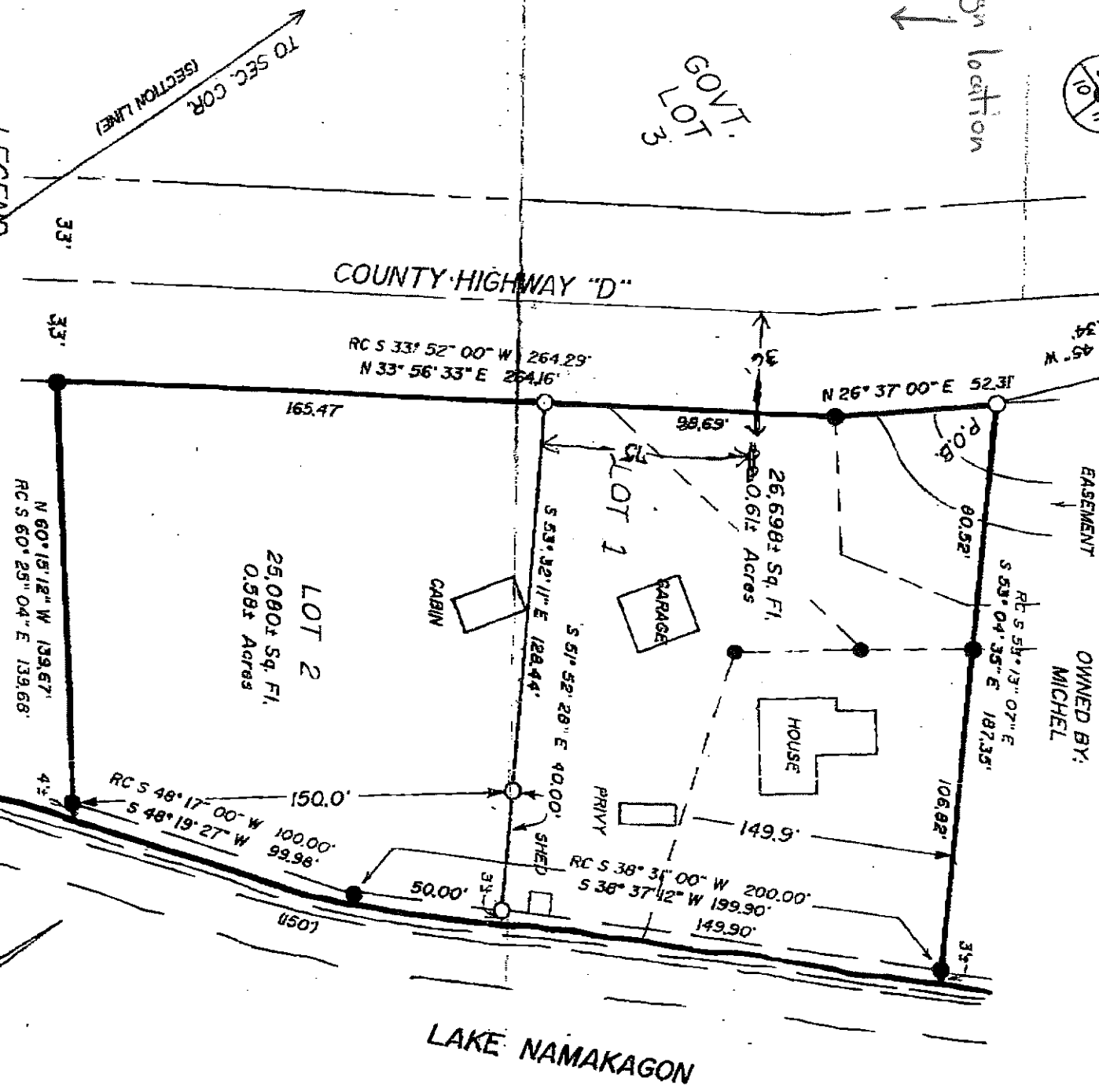
# BAYFIELD COUNTY CERTIFIED SURVEY MAP #

SHEET 1 OF 2

LOCATED IN GOVT. LOT 3, SECTION 11, T. 43 N.,  
R. 6 W., NAMAKAGON TOWNSHIP, BAYFIELD  
COUNTY, WISCONSIN.



Sign location  
↑



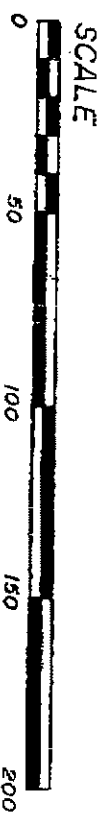
### LEGEND

- = IRON PIPE OR ROD FOUND
- = 1/2" SQUARE ROD FOUND
- = 3/4" x 24" IRON ROD WEIGHING 163 LBS./LINEAL FOOT SET
- RC = RECORDED AS...

BEARINGS BASED ON THE NORTH LINE OF SECTION 11, AND TAKEN TO BE N 86° 40' 00" E.  
NOVEMBER 10, 1997

SUPERIOR SURVEYS, INC.  
Route 3, Box 3215  
Washburn, WI 54891

Received Time Apr. 22. 8:33AM



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  
 MAR 14 2013  
 Bayfield Co. Zoning Dept.  
 HOW NOT FILE OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

ENTERED  
 Permit #: 13-0055  
 date: 4-30-13  
 Amount Paid: \$75  
 Refund: 3-15-13

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.

TYPE OF PERMIT REQUESTED:  LAND USE  SANITARY  PRIVATE  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER

Owner's Name: DAN TILUSE & ALISON HAYWOOD Mailing Address: 930 COLT RD. BOZEMAN, MT 59715 Telephone: (715) 794 2111

Address of Property: 43107 Nelsons Point Rd. City/State/Zip: COOLE, WI 54821

Contractor: HC Construction Contractor Phone: (715) 765 4788 Plumber: N/A Plumber Phone: N/A

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: - Agent Mailing Address (include City/State/Zip): - Written Authorization Attached  Yes  No

PROJECT LOCATION: Legal Description: (Use Tax Statement) 1/4, 1/4 Gov't Lot 1 Lot(s) 3 CSM 1101 Vol & Page V7, PG3 Lot(s) No. Block(s) No. 30000 Recorded Document: (i.e. Property Ownership) 1890 Page(s) 1894

Section 17, Township 43 N, Range 6 W Town of: Nonomagow Subdivision: SEE ATTACHED PROPERTY Lot Size 1.250 ACRES. Acreage

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? → If Yes--continue → Distance Structure Is from Shoreline: 25 feet

Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes--continue → Distance Structure Is from Shoreline: 54 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
\$ 6,000	<input type="checkbox"/> New Construction <input checked="" type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property <input type="checkbox"/> Foundation	<input checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary Specify Type: <u>LOW</u> <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>SE &amp; POT &amp; C</u> <input type="checkbox"/> Privy (Pri) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 25' Width: 20' Height: 23'

Proposed Construction: Length: 80' Width: 8' Height: 14'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	( ) ( ) ( )	( )
<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( ) ( ) ( )	( )
<input checked="" type="checkbox"/>	Residential Use	( ) ( ) ( )	( )
<input type="checkbox"/>	Commercial Use	( ) ( ) ( )	( )
<input type="checkbox"/>	Municipal Use	( ) ( ) ( )	( )

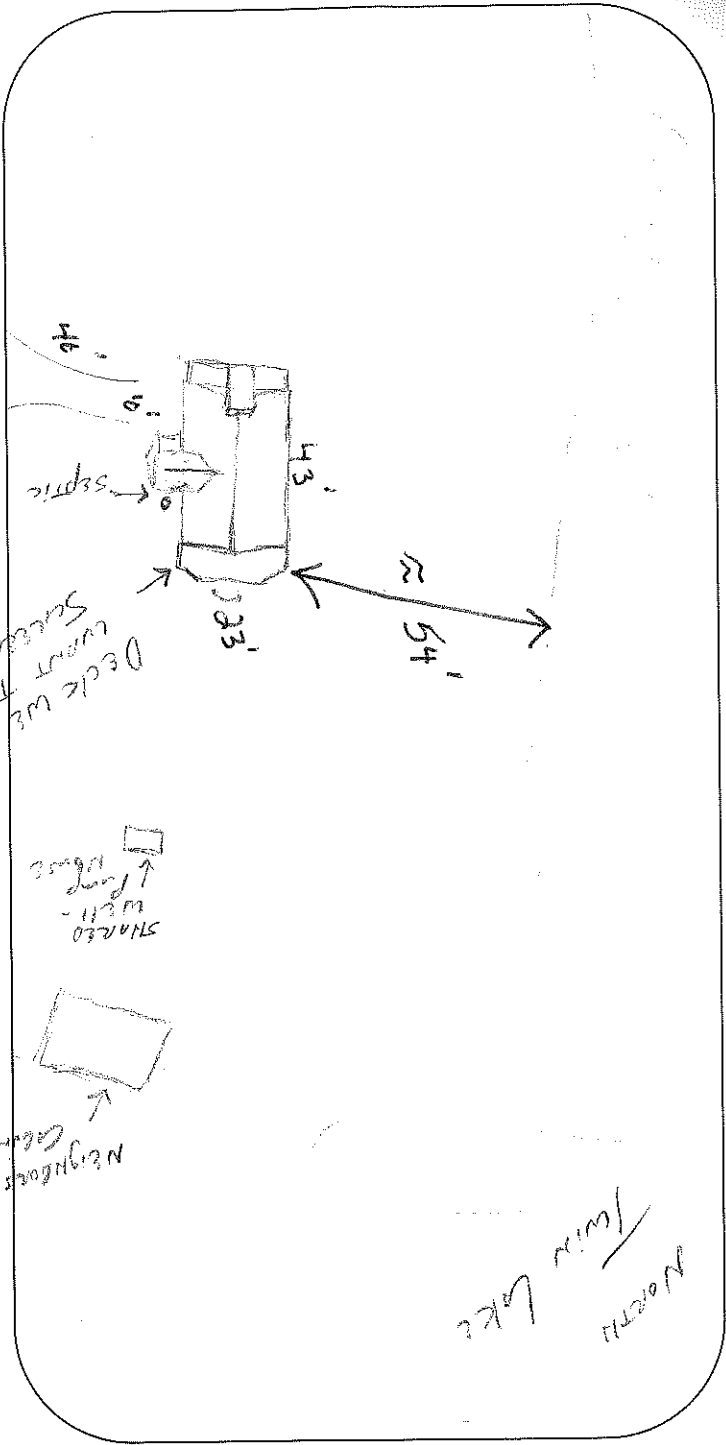
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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 responsible time for the purpose of inspection.

Owner(s): Dan Tiluse & Alison Haywood Date 1/25/12  
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: PO, Box 13164 Hayward, WI 54843 Date 1/25/12  
 (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Attach ✓  
 Address to send permit PO, Box 13164 Hayward, WI 54843 Copy of Tax Statement ✓  
 If you recently purchased the property send your Recorded Deed

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

- Proposed Construction**
- (1) Show Location of: North (N) on Plot Plan
  - (2) Show / Indicate: (\*) Driveway and (\*) Frontage Road (Name Frontage Road)
  - (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: (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
  - (6) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%
  - (7) Show any (\*):



Please complete (1) - (7) above (prior to continuing)  
 (8) Setbacks: (measured to the closest point) *EXISTING RD 12'*

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	54' Feet	Setback from the Lake (ordinary high-water mark)	54' Feet
Setback from the Established Right-of-Way	N/A Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	45' Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	30' Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	N/A Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	N/A Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	1' Feet	Setback to Well	45' Feet
Setback to Driveway	N/A 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 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)**

Permit Denied (Date): \_\_\_\_\_ Sanitary Number: **207723** # of bedrooms: **2** Sanitary Date: **9-23-93**

Permit #: **13-0055** Permit Date: **4-30-13**

Is Parcel a Sub-Standard Lot  Yes (Deed of Record)  No  
 Is Parcel in Common Ownership  Yes (Fused/Contiguous Lots)  No  
 Is Structure Non-Conforming  Yes  No

Granted by Variance (B.O.A.) Case #: \_\_\_\_\_ Previously Granted by Variance (B.O.A.)  Yes  No

Was Parcel Legally Created  Yes  No Were Property Lines Represented by Owner  Yes  No  
 Was Proposed Building Site Delineated  Yes  No Existing Footprint  Yes  No Was Property Surveyed  Yes  No

Inspection Record:  
 Non-conforming structure 254' from OHW M1  
 Date of Inspection: **3-21-13** Inspected by: **MM Fuchs** Zoning District: **(RRB)**  
 Conditions: Town, Committee or Board Conditions Attached?  Yes  No (If No they need to be attached.)  
 Lakes Classification: **(3)** Date of Re-Inspection: \_\_\_\_\_

Signature of Inspector: *see affidavit*  
 Signature of Applicant: *see affidavit*

Hold For Sanitary:  \_\_\_\_\_ Hold For TBA:  \_\_\_\_\_ Hold For Affidavit:  \_\_\_\_\_ Hold For Fees:  \_\_\_\_\_ Date of Approval: **3-22-13**

\* Image from Google Earth N