

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

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN
 DATE SUBMITTED: MAY 02 2013
 Bayfield Co. Zoning Dept.
 HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

Permit #: 13-0169
 Date: 7-3-13
 Amount Paid: \$75
 Refund: 53.13

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 PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: ROBERT B BLAIR
 Address of Property: 43109 HAMS POINT RD
 City/State/Zip: Cable WI 54821
 Mailing Address: 22801 PEISCUSA ST ST PAUL MN 55108
 City/State/Zip: ST PAUL MN 55108
 Telephone: 612-624-2198
 Cell Phone: 651-644-1591

Contractor: _____
 Contractor Phone: _____
 Plumber: _____
 Plumber Phone: _____

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: Section 17, Township 43 N, Range 06 W, Town of: NAMAWA GON

Legal Description: (Use Tax Statement)
 1/4, 1/4 Gov't Lot 1, Lot(s) 2, CSM 1191, Vol & Page 7 63, Lot(s) No. _____, Block(s) No. _____, Subdivision: _____

Recorded Document: (i.e. Property Ownership) Volume 1003, Page(s) 450

Distance Structure is from Shoreline: _____ feet
 Distance Structure is from Shoreline: 100 feet

Is Property in Floodplain Zone? Yes No
 Are Wetlands Present? Yes No

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? Yes No
 If yes--continue \rightarrow

Is Property/Land within 1000 feet of Lake, Pond or Flowage? Yes No
 If yes--continue \rightarrow

Distance Structure is from Shoreline: _____ feet
 Distance Structure is from Shoreline: 100 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
\$25,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>SEWERSIAL</u>	
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>	<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it)
 Length: 16' Width: 16' Height: 14'
 Proposed Construction: Length: 16' Width: 16' Height: 14'

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	() ()	()
<input type="checkbox"/> Commercial Use	with (2 nd) Deck	() ()	()
	with Attached Garage	() ()	()
	Bunkhouse w/ <input checked="" type="checkbox"/> sanitary, or <input checked="" type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(16 X 16)	256
	Mobile Home (manufactured date)	() ()	()
	Addition/Alteration (specify)	() ()	()
	Accessory Building (specify)	() ()	()
	Accessory Building Addition/Alteration (specify)	() ()	()
	Special Use: (explain)	() ()	()
	Conditional Use: (explain)	() ()	()
	Other: (explain)	() ()	()

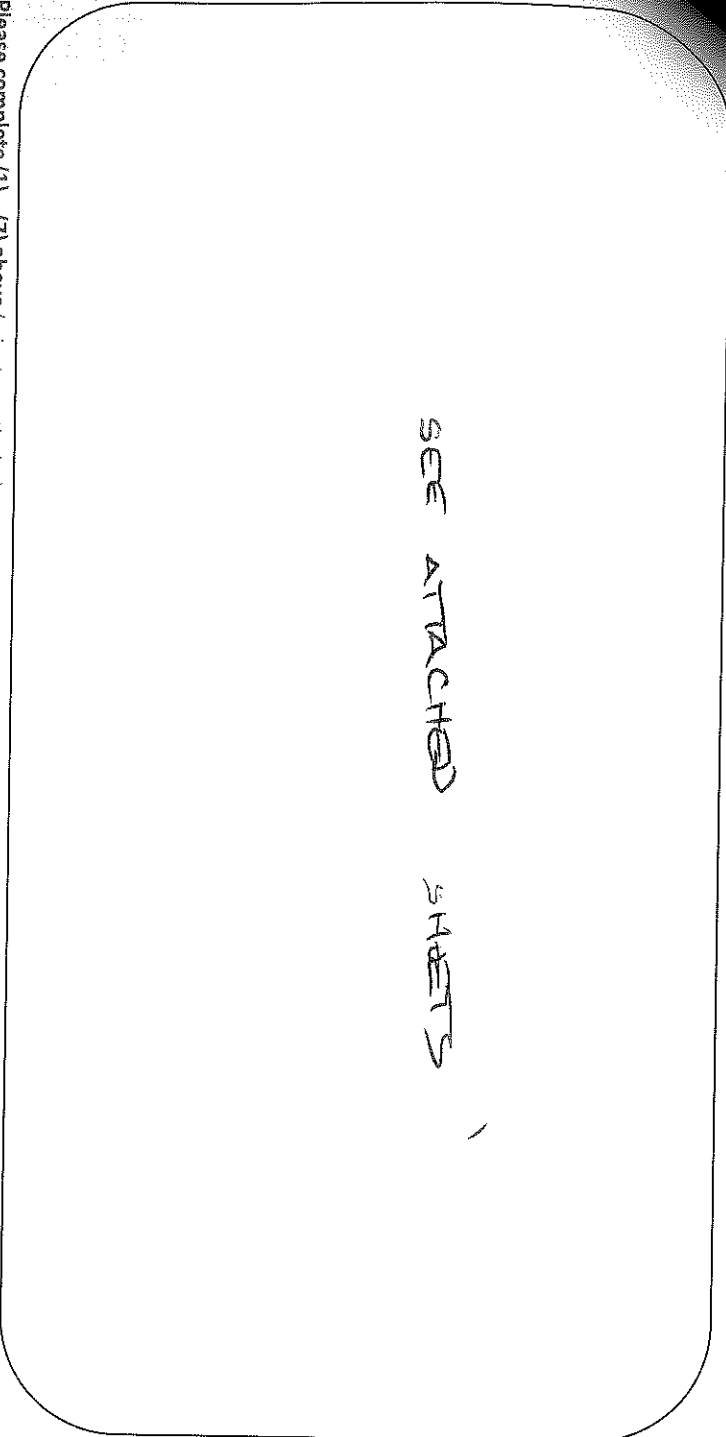
JUL 03 2013
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information. 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 is hereby assumed by the applicant for any and all information provided in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the information provided 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 information provided on this information.

Owner(s): Robert B Blair
 Date: 26 APR 13
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Address to send permit: 2281 PISCUSA ST, ST PAUL, MN 55108
 MICHELE SAID NEWS SANITARY ISSUES.
 NEEDS PRIVATE INTERCEPT & ASD.
 DOES IT NEED FLOW COADS AS WELL? -NO

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE
 Attach Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

- Indicate your Property (regardless of what you are applying for)
- Proposed Construction
 North (N) on Plot Plan
 (*) Driveway and (*) Frontage Road (Name Frontage Road)
 All Existing Structures on your Property
 (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
 (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 (*) Wetlands; or (*) Slopes over 20%



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	~ 300 Feet	Setback from the Lake (ordinary high-water mark)	100 Feet
Setback from the Established Right-of-Way	~ 300 Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	SEE DRAWING	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	SEE DRAWING	Setback from Wetland	N/A Feet
Setback from the West Lot Line	SEE DRAWING	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	SEE DRAWING	Elevation of Floodplain	1413 ? Feet
Setback to Septic Tank or Holding Tank	~ 125 Feet	Setback to Well	~ 120 Feet
Setback to Drain Field	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: 298042 # of Bedrooms: 5 Sanitary Date: 6-4-97

Permit #: 13-0169 Reason for Denial: 6176-10592 13555

Permit Date: 7-3-13

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.): Yes No Case #: _____

Was Parcel Legally Created: Yes No

Was Proposed Building Site Delineated: Yes No

Were Property Lines Represented by Owner Was Property Surveyed: Yes No

Inspection Record: Metal all setbacks.

Date of Inspection: 6-13-13 Inspected by: M. Fuchs

Condition(s): Town, Committee or Board (Conditions Attached)? Yes No (If No they need to be attached)

Zoning District: RRB

Lakes Classification: (3)

Date of Re-Inspection: _____

Signature of Inspector: Michael Fuchs

Hold For Sanitary: _____ Hold For TBA: _____

Hold For Affidavit: _____ Hold For Fees: _____

Date of Approval: 6-13-13

THIS IS THE PROPOSED SITING OF THE BUNKHOUSE
I ADDED THE DETAILS REQUESTED IN THE PERMIT APPLICATION
BY HAND. -- ROB BLAIZ

LOT #2 OF CSM #1101 V.7/P. 63-65
BAYFIELD COUNTY, WISCONSIN

CONCEPT #3
PROPOSED BUNKHOUSE

