

STATUS: 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
 Date Stamp (Required)
JUN 07 2013
 Bayfield Co. Zoning Dept.

Permit #: **13-033** **ENTERED**
 Date: **6-11-13**
 Amount Paid: **\$185**
 Refund: **6-10-13**

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

Owner's Name: **Oliver Borgstrom** Mailing Address: **2040 City Rd C Somerset WI 54085** Telephone: **715-246-5702**

Address of Property: **9790 East Bay Rd** City/State/Zip: **Port Wing WI 54865** Cell Phone: **651-341-9684**

Contractor: **Self** Contractor Phone: _____ Plumber: _____ Written Authorization Attached Yes No

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: _____ Agent Mailing Address (include City/State/Zip): _____

PROJECT LOCATION: **SE 1/4, SE 1/4** Gov't Lot _____ Lot(s) _____ CSM _____ Vol & Page _____ Lot(s) No. _____ Block(s) No. _____ Subdivision: _____

Section **9**, Township **49** N, Range **2** W Town of: **Port Wing** Lot Size **4.5** Acreage **40**

Legal Description: (Use Tax Statement) **042 249080940400010000** PIN: (23 digits)

Distance Structure is from Shoreline: _____ feet Is Property in Floodplain Zone? Yes No

Distance Structure is from Shoreline: _____ feet Ave Wetlands Present? Yes No

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (find, intermittent) Creek or Landward side of Floodplain? If yes---continue →

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

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
\$6000	<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 type="checkbox"/> 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 type="checkbox"/> (New) Sanitary Specify Type: _____ <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <input type="checkbox"/> .Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input checked="" type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: **48** Width: **36** Height: **20**
 Proposed Construction: Length: **48** Width: **36** Height: **20**

Proposed Use: Residential Use Commercial Use Municipal Use

Principal Structure (first structure on property) **Storage Bldg**

Residence (i.e. cabin, hunting shack, etc.) _____

with Loft _____

with a Porch _____

with (2nd) Porch _____

with a Deck _____

with (2nd) Deck _____

with Attached Garage _____

Bunkhouse w/ sanitary, or sleeping quarters, or cooking & food prep facilities) _____

Mobile Home (manufactured date) _____

Addition/Alteration (specify) _____

Accessory Building (specify) _____

Accessory Building Addition/Alteration (specify) _____

Special Use: (explain) _____

Conditional Use: (explain) _____

Other: (explain) _____

Dimensions: **(36 x 48)** Square Footage: **1732**

Rec'd for Issuance: **JUN 11 2013**

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

Secretary of Planning and Zoning (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 any reasonable time for the purpose of inspection.

Owner(s): **[Signature]** Date: **6/7/13**
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

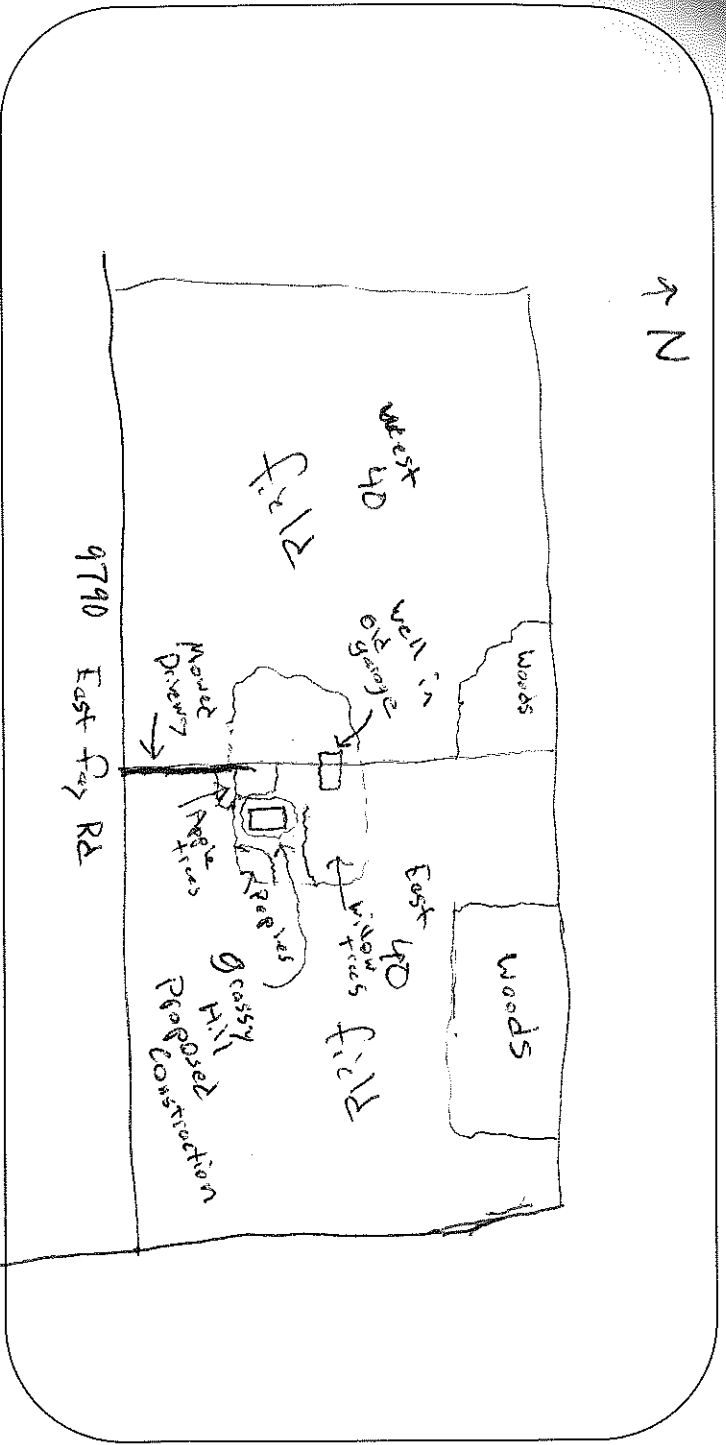
Authorized Agent: **[Signature]** Date: _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: **Same as Above** Attach **Copy of Tax Statement**
 If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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 (*): 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)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	445 368 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	445 385 Feet	Setback from the River Stream, Creek	N/A Feet
Setback from the North Lot Line	445 927 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	445 335 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	1445 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	1080 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	445 365 Feet
Setback to Drain Field	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)		Sanitary Number:	# of bedrooms:		Sanitary Date:
Permit Denied (Date):		Reason for Denial:			
Permit #: 13-0133	Permit Date: 6-11-13				
<input type="checkbox"/> Is Parcel a Sub-Standard Lot <input type="checkbox"/> Is Parcel in Common Ownership <input type="checkbox"/> Is Structure Non-Conforming	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> No	<input type="checkbox"/> Mitigation Required <input type="checkbox"/> Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Affidavit Required <input type="checkbox"/> Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Granted by Variance (B.O.A.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Case #: NA	<input type="checkbox"/> Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #: NA		
<input type="checkbox"/> Was Parcel Legally Created <input checked="" type="checkbox"/> Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Were Property Lines Represented by Owner <input checked="" type="checkbox"/> Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record: Building site as identified by owner appears to identify Code compliant location OK to issue LU permit		Inspected by: Robert Schirmer		Zoning District: (A-1) Lakes Classification: (NA)	
Date of Inspection: 6/10/2013		Date of Re-Inspection:			
Conditions: Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (if No they need to be attached.) Not to be used for human habitation.					
Signature of Inspector:		Date of Approval: 6/11/2013			
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>	
		Hold For Fees: <input type="checkbox"/>		<input type="checkbox"/>	