

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
 MAY 31 2013
 Bayfield Co Zoning Dept
 HOW NOT FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

Permit #:	13-017	ENTERED
Date:	6-5-13	
Amount Paid:	\$605	
Refund:	6-5-13	

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: Wilderness Inquiry
 Address of Property: 3309S Little Sand Bay Rd
 City/State/Zip: Rosell, WI 54884
 Telephone: _____
 Cell Phone: _____

Mailing Address: 408 14th Ave SE
 City/State/Zip: Minneapous, MN 55414

Contractor Phone: 715-779-3150
 Contractor: Todd Bonney
 Plumber: KICK W3221EK
 Agent Phone: 651-246-8825
 Agent Mailing Address: 808 14th Ave
 City/State/Zip: Minneapous, MN 55414

Authorized Agent: (Person Signing Application on behalf of Owner(s))
 Hilary Bolger
 Agent Phone: 651-246-8825
 Agent Mailing Address: 808 14th Ave
 City/State/Zip: Minneapous, MN 55414

Recorded Document: (i.e. Property Ownership) _____
 Page(s) _____

PROJECT LOCATION: Section 33, Township S2 N, Range 4 W
 Legal Description: (Use Tax Statement) 04-046-2-52-04-33-2 03-000-20000
 Gov't Lot: _____ Lot(s): 1745 CSM: _____ Vol & Page: _____ Lot(s) No.: _____ Block(s) No.: _____ Subdivision: _____
 Section 33, Township S2 N, Range 4 W, Town of: Rosell

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

Value at Time of Completion * Include donated time & material \$36,000	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	
							<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
Existing Structure: (if permit being applied for is relevant to it)	Length: 35' 0"	Width: 24' 0"	Height: _____	Proposed Construction:	Length: _____	Width: 28' 0"	Height: _____

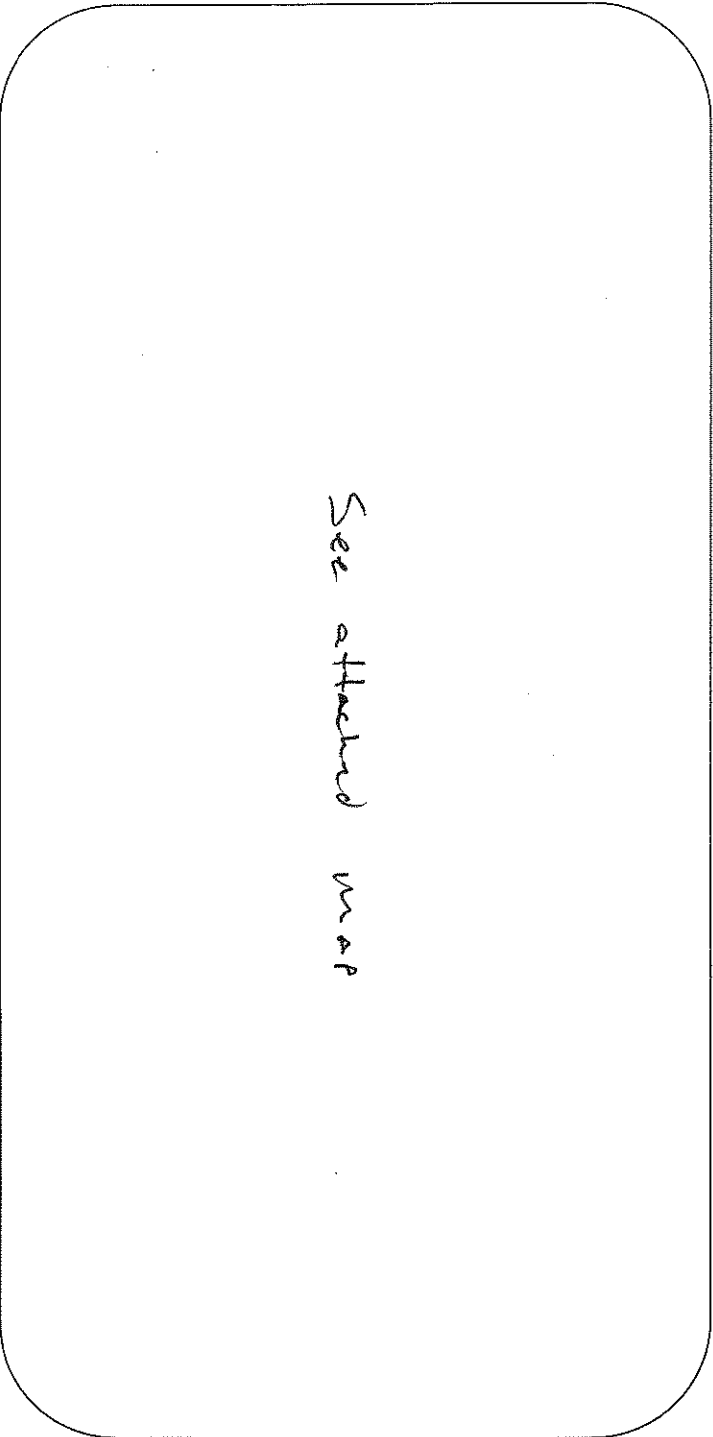
Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	() () ()	()
<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.) with Loft	() () ()	()
<input type="checkbox"/>	with a Porch	() () ()	()
<input type="checkbox"/>	with (2 nd) Porch	() () ()	()
<input type="checkbox"/>	with a Deck	() () ()	()
<input type="checkbox"/>	with (2 nd) Deck	() () ()	()
<input checked="" type="checkbox"/>	Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	() () ()	()
<input type="checkbox"/>	Mobile Home (manufactured date)	() () ()	()
<input type="checkbox"/>	Addition/Alteration (specify)	() () ()	()
<input checked="" type="checkbox"/>	Accessory Building (specify) Accessory Building	() () ()	()
<input checked="" type="checkbox"/>	Accessory Building Addition/Alteration (specify) Partial old cabin removal	() () ()	()
<input checked="" type="checkbox"/>	PUBLIC POOL/ION CONSTRUCTED + 2 SWIMMER STAIRS + LOFTY DECK	() () ()	()
<input type="checkbox"/>	Special Use: (explain)	() () ()	()
<input type="checkbox"/>	Conditional Use: (explain)	() () ()	()
<input type="checkbox"/>	Other: (explain)	() () ()	()

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 any reasonable time for the purpose of inspection.

Owner(s): _____ Date: 5-16-13
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: _____ Date: _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
 Address to send permit: _____
 (If you recently purchased the property send your Recorded Deed)

Below: 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%



See attached map

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	84 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	61 Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	61 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	1208 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	325 Feet	Setback from 20% Slope Area	Feet
Setback from the East Lot Line	900 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	7 Feet	Setback to Well	Feet
Setback to Drain Field	7 Feet		
Setback to Privy (Portable, Composting)	3 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: 08-69	# of bedrooms:	Sanitary Date: 6/19/2008	
Permit Denied (Date):		Reason for Denial:			
Permit #: B-0117	Permit Date: 6-5-13				
<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 checked="" type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> No	<input checked="" type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No	<input type="checkbox"/> Mitigation Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Affidavit Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) Yes <input checked="" type="checkbox"/> No	Case #:	N/A	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	N/A
Was Parcel Legally Created Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No <input type="checkbox"/> No
Inspection Record: Site & Setbacks ok to issue.	Date of Re-Inspection: ~				
Date of Inspection: 5/31/2013	Inspected by: Robert Schirman	Zoning District (RRS) Lakes Classification (-)			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (if No they need to be attached)					
Signature of Inspector: [Signature]	Date of Approval: 6/4/2013				
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>		

Wood County, WI

Shelter Addition

