

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

ENTERED

Date Stamp (Required)
JAN 28 2014

Permit #:	14-0018
Date:	0-07-14
Amount Paid:	\$75.00-14
Refund:	

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: Donald (Skip) Meider Mailing Address: 3599 10th St City/State/Zip: Chippewa Falls 54729 Telephone: 715

Address of Property: 60130 Hoastman Rd Contractor Phone: Mason Plumber: 59856 Cell Phone: 829 8624

Contractor: Self 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: SE 1/4, NW 1/4 Hwy 160 of Hoastman Rd Gov't Lot: Lot(s): CSM: Vol & Page: Lot(s) No.: Block(s) No.: Subdivision: Recorded Document: (i.e. Property Ownership) Volume: 1069 Page(s): 818

Section: 24, Township: 46 N, Range: 7 W Town of: Delta Lot Size: Acreage: 18

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

Non-Shoreland Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue Distance Structure is from Shoreline: feet 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
\$ <u>200.00</u>	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: <u> </u>	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>CONV</u>	<input type="checkbox"/> <u> </u>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/> <u> </u>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> <u> </u>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> <u> </u>
	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> Foundation	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> <u> </u>
	<input checked="" type="checkbox"/> <u>garage</u>	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> None	<input type="checkbox"/> <u> </u>

Existing Structure: (if permit being applied for is relevant to it) Length: 32 Width: 28 Height:

Proposed Construction: Length: 32 Width: 28 Height:

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Residential Use	Principal Structure (first structure on property)	(<u> </u>)	(<u> </u>)
	Residence (i.e. cabin, hunting shack, etc.)	(<u> </u>)	(<u> </u>)
	with Loft	(<u> </u>)	(<u> </u>)
	with a Porch	(<u> </u>)	(<u> </u>)
	with (2 nd) Porch	(<u> </u>)	(<u> </u>)
	with a Deck	(<u> </u>)	(<u> </u>)
	with Attached Garage	(<u> </u>)	(<u> </u>)
<input type="checkbox"/> Commercial Use	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(<u> </u>)	(<u> </u>)
	Mobile Home (manufactured date) <u> </u>	(<u> </u>)	(<u> </u>)
	Addition/Alteration (specify) <u> </u>	(<u> </u>)	(<u> </u>)
<input type="checkbox"/> Municipal Use	Accessory Building (specify) <u>garage</u>	(<u>28</u> x <u>32</u>)	(<u>896</u>)
	Accessory Building Addition/Alteration (specify) <u> </u>	(<u> </u>)	(<u> </u>)
	Special Use: (explain) <u> </u>	(<u> </u>)	(<u> </u>)
	Conditional Use: (explain) <u> </u>	(<u> </u>)	(<u> </u>)
	Other: (explain) <u> </u>	(<u> </u>)	(<u> </u>)

REC'D FOR ISSUANCE
 FEB 27 2014
 Secretarial Staff

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 the 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 the 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): Donald Meider Date: 1-25-14
 (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)

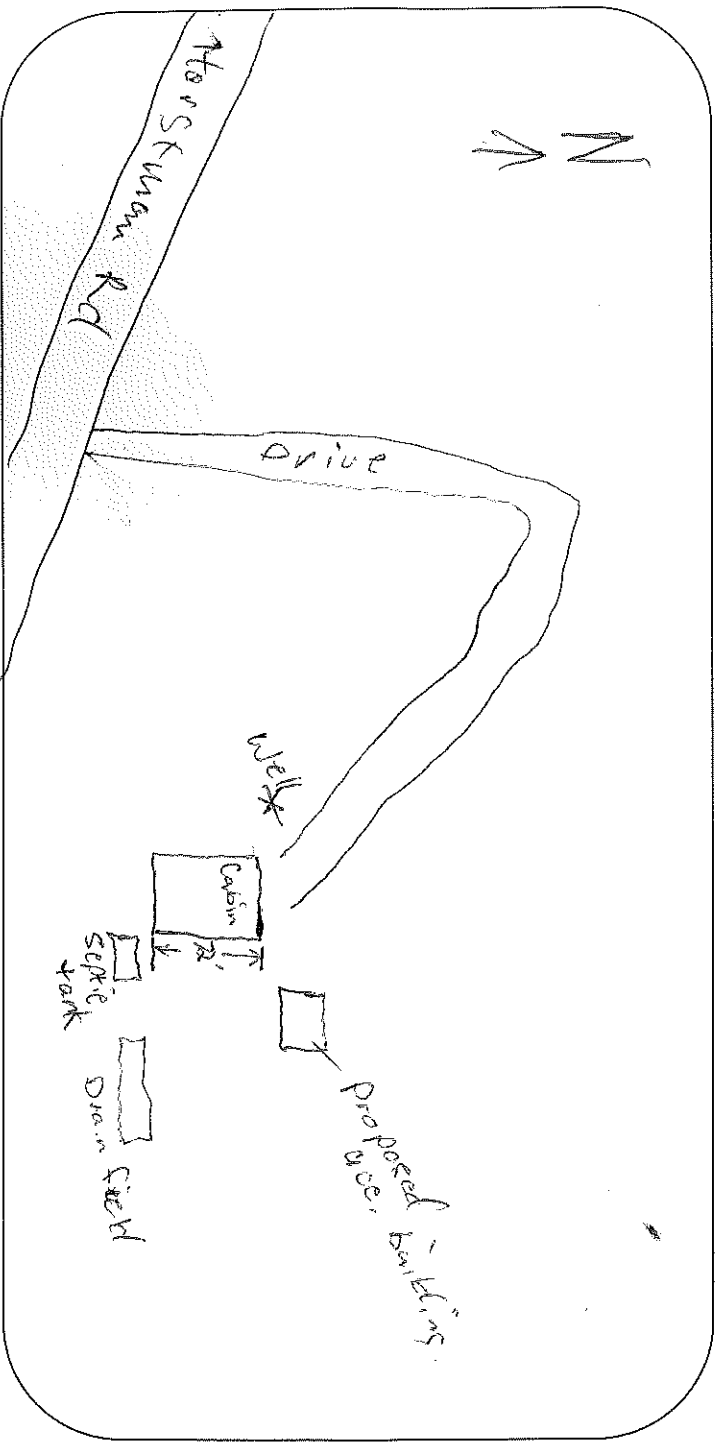
Address to send permit: same as above Attach
 Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

If you recently purchased the property send your Recorded Deed

Box 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%**



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	600 + Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	1000 + Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	5000 + Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	2000 + Feet	Setback from 20% Slope Area	NA Feet
Setback from the East Lot Line	3000 + Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	60 + Feet	Setback to Well	60 + Feet
Setback to Drain Field	60 + Feet		
Setback to Privy (Portable, Composting)	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 #: 14-0018	Permit Date: 2-27-14			
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	Case #:	Were Property Lines Represented by Owner	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Inspection Report:		Zoning District (F-1)		
<i>Meets all requirements</i>		Lakes Classification (NA)		
Date of Inspection: 2-26-14	Inspected by: <i>M. Fitchel</i>	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)				
<i>May not be used for human habitation.</i>				
<i>No water under pressure in structure.</i>				
Signature of Inspector: <i>Michael Stetzel</i>				Date of Approval: 2-27-14
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	