

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
 Date Stamp (Received)
 MAY 19 2014
 Bayfield Co. Zoning Dept.

Permit #:	14-0073
Date:	5-20-14
Amount Paid:	\$75 Cash
Refund:	5-15-14

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 FILE OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

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

Owner's Name: Don Levine Mailing Address: 2116 Hillcrest City/State/Zip: Duluth MN 55811 Telephone: 318 722 5760

Address of Property: 50095 Pease Resort Rd City/State/Zip: Barnes Wis 54873 Cell Phone: 218 391 9232

Contractor: self 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 Legal Description: (Use Tax Statement) 1/4, 1/4 Gov't Lot 5 CSM 1323 Vol & Page V.8 P.106 Lot(s) No. 1 Block(s) No. _____ Subdivision: _____

Section 11, Township 44 N, Range 9 W Town of: Barnes Recorded Document: (i.e. Property Ownership) 724 Page(s) 386

Lot Size 23141-160 Acreage .75
180-223-21

Shoreland Non-Shoreland

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

Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes—continue 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	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>14,000.00</u>	<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"/> Seasonal <input checked="" type="checkbox"/> Year Round <u>Garage</u>	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary Specify Type: _____ <input checked="" type="checkbox"/> Sanitary (exists) Specify Type: <u>Cow</u> <input type="checkbox"/> Privy (Pvt) or 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: 28' Width: 24' Height: 14'

Proposed Construction: Length: _____ Width: _____ Height: _____

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	(X)	
<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
<input type="checkbox"/>	with Loft	(X)	
<input checked="" type="checkbox"/>	Residential Use with a Porch	(X)	
<input type="checkbox"/>	with (2 nd) Porch	(X)	
<input type="checkbox"/>	with a Deck	(X)	
<input type="checkbox"/>	with (2 nd) Deck	(X)	
<input type="checkbox"/>	with Attached Garage	(X)	
<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
<input type="checkbox"/>	Addition/Alteration (Specify) _____	(X)	
<input checked="" type="checkbox"/>	Accessory Building (Specify) <u>garage</u>	(<u>24 x 28</u>)	<u>672</u>
<input type="checkbox"/>	Accessory Building Addition/Alteration (Specify) _____	(X)	
<input type="checkbox"/>	Special Use: (explain) _____	(X)	
<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
<input type="checkbox"/>	Other: (explain) _____	(X)	

Rec'd for Issuance
 MAY 21 2014

Secretarial Staff (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) and (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.

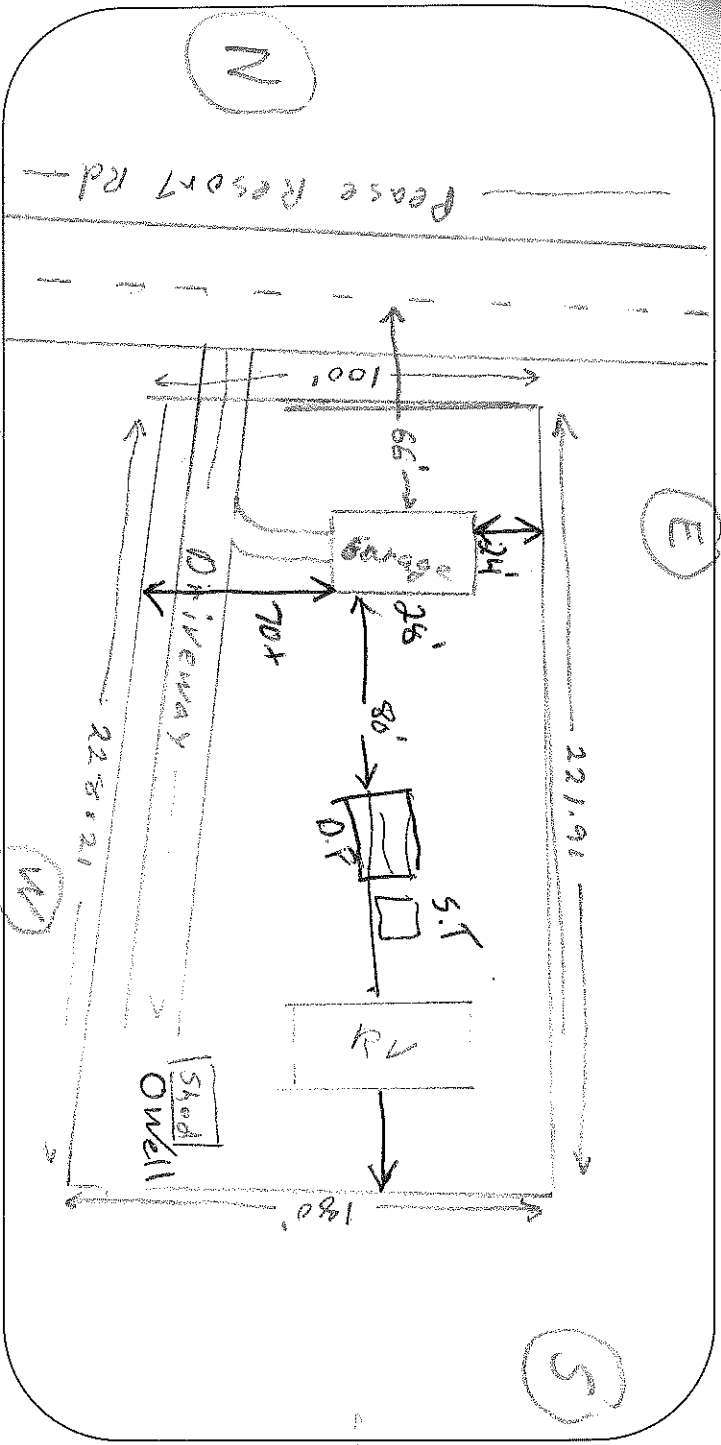
Owner(s): _____ Date 5-15-14
 (if there are Multiple Owners listed on the Deed All Owners must sign OR letter(s) of authorization must accompany this application)

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: SCM & above Attach

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

- Show Location of:
 - (*) Show / Indicate: North (N) on Plot Plan
 - (*) Frontage Road (Name Frontage Road)
 - (*) Driveway and (*) Frontage Road (Name Frontage Road)
 - (*) 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)

(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	64'	Setback from the Lake (ordinary high-water mark)	N/A
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	N/A
Setback from the North Lot Line	66'	Setback from the Bank or Bluff	N/A
Setback from the South Lot Line	158'	Setback from Wetland	N/A
Setback from the West Lot Line	76'	Setback from 20% Slope Area	N/A
Setback from the East Lot Line	66'	Elevation of Floodplain	N/A
Setback to Septic Tank or Holding Tank	70'	Setback to Well	100'
Setback to Drain Field	80'		
Setback to Privy (Portable, Composting)	N/A		

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 #: 14-0073	Permit Date: 5-20-14				
<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 type="checkbox"/> Yes (Fused/contiguous lot(s)) <input checked="" type="checkbox"/> No	<input checked="" 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
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		Case #:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Parcel Legally Created		Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated		Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: Well status: <i>Met all setbacks.</i>		Date of inspection: 5-20-14 Inspected by: <i>M. F. Smith</i>			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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>		Zoning District (RRB) Lakes Classification (A/A)		Date of Re-Inspection:	
Signature of inspector: <i>Michael Smith</i>		Date of Approval: 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"/>	