

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 23 2014
 Bayfield Co. Zoning Dept.



Permit #:	140076
Date:	5-23-14
Amount Paid:	\$75,500.14
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: THOMAS O. JOHNSON Mailing Address: 2916 N. PUMPKIN City/State/Zip: MENDOTA, WI 53181 Telephone: 715-235-2569
 Address of Property: 48464 LARSD RIND City/State/Zip: DRUMMOND, WI 54832 Call Phone: 715-308-0330
 Contractor: SELC Contractor Phone: 715-739-6647 Plumber: N/A Plumber Phone: N/A
 Authorized Agent: (Person Signing Application on behalf of Owner(s)) N/A Agent Phone: N/A Agent Mailing Address (include City/State/Zip): N/A Written Authorization Attached Yes No

PROJECT LOCATION Legal Description: (Use Tax Statement) PLN: (23 digits) 04-018-2-44-07-22-3-05-002-3500 Recorded Document: (i.e. Property Ownership) 8 Page(s) 502
 1/4, 1/4 Gov't Lot Lot(s) 1 CSM 1447 Vol & Page 987* Lot(s) No. 2 Block(s) No. - Subdivision: -
 Section 22, Township 44 N, Range 02 W Town of: Drummond Lot Size 129,450 Acreage 2.97

Shoreland Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If yes---continue -->
 Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue -->
 Distance Structure is from Shoreline: 480 feet
 Distance Structure is from Shoreline: 480 feet
 Is Property in Floodplain Zone? Yes No
 Are Wetlands Present? Yes No

Value at Time of Completion \$24,000 (What are you applying for?) Project # of Stories and/or basement 1 Use Seasonal # of bedrooms 1 What Type of Sewer/Sanitary System is on the property? Municipal/City Water City Well

New Construction 1-Story Seasonal 1 Municipal/City (New) Sanitary Specify Type: CONV
 Addition/Alteration 1-Story + Loft Year Round 2 Sanitary (Exists) Specify Type: CONV
 Conversion 2-Story Basement 3 Privy (Pit) or Vaulted (min 200 gallon)
 Relocate (existing bldg) Basement None Portable (w/service contract)
 Run a Business on Property Foundation None Compost Toilet

Existing Structure: (if permit being applied for is relevant to it) Length: 22 Width: 78 Height: 18
 Proposed Construction: Length: 22 Width: 78 Height: 18

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	()	()
	with (2 nd) Deck	()	()
<input type="checkbox"/> Commercial Use	with Attached Garage	()	()
	Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	()	()
	Mobile Home (manufactured date)	()	()
<input type="checkbox"/> Municipal Use	Addition/Alteration (specify)	()	()
	Accessory Building (specify) <u>CARAGE</u>	(<u>16</u> X <u>20</u>)	<u>320</u>
	Accessory Building Addition/Alteration (specify)	()	()
	Special Use: (explain)	()	()
	Conditional Use: (explain)	()	()
	Other: (explain)	()	()

RECORD: MAY 23 2014

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

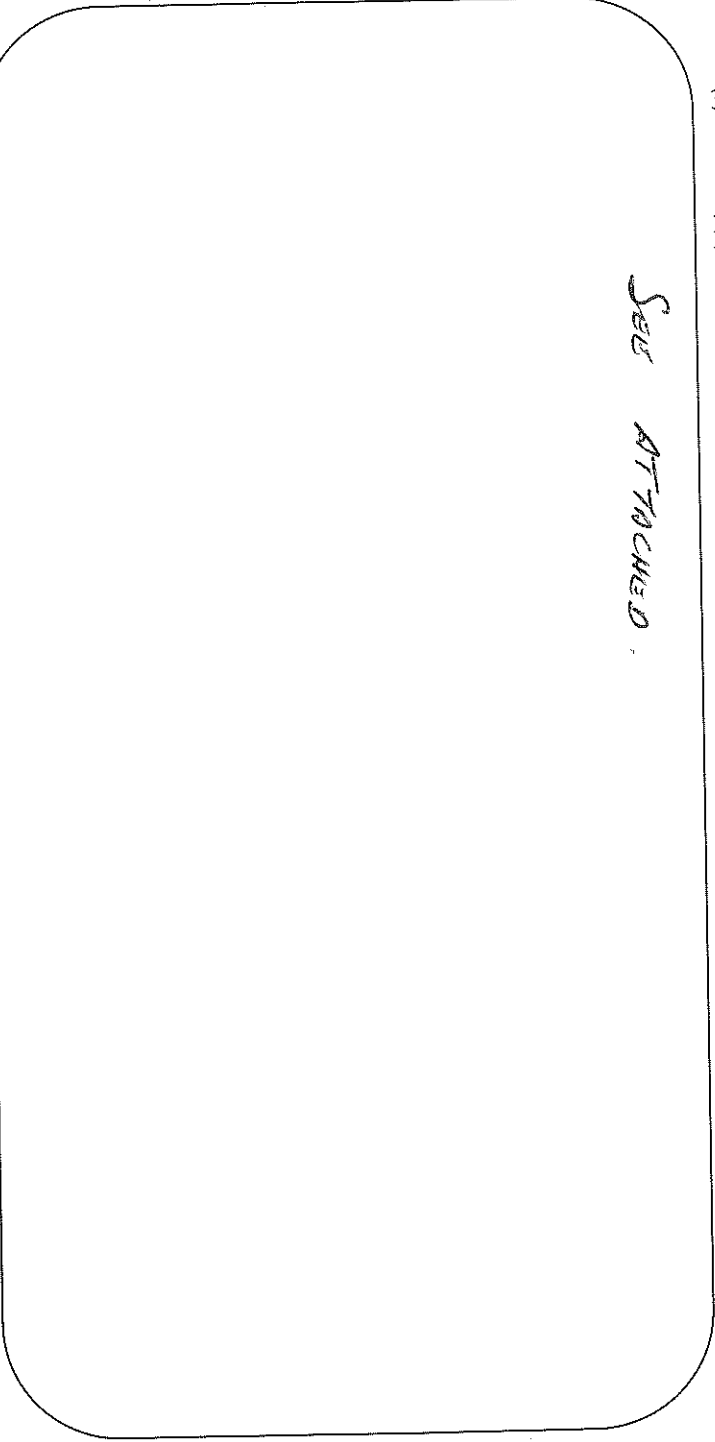
I (we) certify that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the accuracy of all information I (we) am (are) providing 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): Thomas O. Johnson Date 5/22/14
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: Saw e as above Date _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
 Address to send permit _____
 Attach Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

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

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

See ATTACHED



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	500 Feet	Setback from the Lake (ordinary high-water mark)	300 Feet
Setback from the Established Right-of-Way	500 Feet	Setback from the River, Stream, Creek	NA
Setback from the North Lot Line	10 Feet	Setback from the Bank or Bluff	NA
Setback from the South Lot Line	133 Feet	Setback from Wetland	133 Feet
Setback from the West Lot Line	495 Feet	Setback from 20% Slope Area	NA
Setback from the East Lot Line	480 Feet	Elevation of Floodplain	118 Feet
Setback to Septic Tank or Holding Tank	131 Feet	Setback to Well	
Setback to Drain Field	120 Feet		
Setback to Privy (Portable, Composting)	NA		

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 #: <u>14-00976</u>	Permit Date: <u>5-03-14</u>			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/contiguous lots) <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No	<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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	
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"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: <u>Well Stabbing! Meetall setbacks.</u>				
Date of Inspection: <u>5-22-14</u>	Inspected by: <u>M. Furdak</u>	Zoning District: <u>(R-1)</u>	Lakes Classification: <u>(1)</u>	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If No they need to be attached.				
<u>No water under pressure in structure. May not be used for humans habitation.</u>				
Signature of Inspector: <u>Michael Stutak</u>				Date of Approval: <u>5-23-14</u>
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"/>



IN - 018102406000

PIN - 018102407000

PIN - 018102406000

S 89°39'08" E

995.60'

600'

480'

NOTE: PER CLIENT'S REQUEST THE REMAINDER OF THE DRIVEWAY TO LARSON ROAD WAS NOT LOCATED OR MAPPED

LOT 1
CSM NO. 1447

DETAIL
SCALE: 1" = 30'

S 89°39'08" E

687.64'

1-1/4" IRON PIPE

50'±

Larson Road

Lake Owen

CLIENT: THOMAS JOHNSON

JOB NO.: H13/113
SCALE: 1" = 60'
DATE: 10/25/13
NB. B-23/PG.54

DRAFTED BY: JRN
FILE: T44NR7W/SEC22
ACAD: H13_113
PAC: H06005

**HEART OF THE NORTH
SURVEYING OF HAYWARD, INC.**

PH: 715/634-2442
FAX: 715/634-6444
10339 N. DUFFY ROAD
HAYWARD, WI. 54843
WWW.HONSURVEYING.COM

