

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 05 2014
 Bayfield Co. Zoning Dept

ENTERED Permit #:	14-0087
Date:	5-29-14
Amount Paid:	\$1655.614
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: DAVID E. JUSTICE L. SON
 Address of Property: 3364 N. View Lane Woodbury, MN 55125
 87445 Stage Road
 Contractor: The Shed Shop
 Authorized Agent: (Person Signing Application on behalf of Owner(s))
 Mailing Address: 3364 N. View Lane Woodbury, MN 55125
 City/State/Zip: Woodbury, MN 55125
 Contractor Phone: 651-738-7433
 Agent Phone: 651-738-7433
 Agent Mailing Address (include City/State/Zip):
 Telephone: 651-470-9084
 Call Phone: (same)
 Written Authorization Attached Yes No

PROJECT LOCATION: SW 1/4, SW 1/4
 Legal Description: (Use Tax Statement) 04-010-2-50-06-02-3-01-000-1104
 PIN: (123 digits) 04-010-2-50-06-02-3-01-000-1104
 Gov't Lot: 1104
 CSM: P. 417
 Vol & Page: 1104 P. 417
 Lot(s) No.: 1104
 Block(s) No.: 30000
 Subdivision:
 Section: 02, Township: 50N N, Range: 06 W
 Town of: Bell
 Lot Size: 10 acres
 Acreage: 10 acres

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: 600 ft.
 Is Property in Floodplain Zone? Yes No
 Are Wetlands Present? Yes No

Non-Shoreland

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
\$ 365,000	<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 checked="" type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing blade)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> No Basement	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
		<input type="checkbox"/> Foundation	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> Compost Toilet	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____
				<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> _____

Existing Structure: (If permit being applied for, is relevant to it) Length: 24 ft. Width: 16 ft. Height: 16 ft.
 Proposed Construction: Length: 24 ft. Width: 16 ft. Height: 16 ft.

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	(24' x 16')	384'
	Residence (i.e. cabin, hunting shack, etc.)	(24' x 16')	384'
	with Loft	(24' x 16')	384'
	with a Porch	())
	with a 2 nd Porch	())
	with a Deck	())
	with (2 nd) Deck	())
	with Attached Garage	())
<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)	())
	Mobile Home (manufactured date)	())
<input type="checkbox"/> Municipal Use	Addition/Alteration (specify)	())
	Accessory Building (specify)	())
	Accessory Building Addition/Alteration (specify)	())
	Special Use: (explain)	())
	Conditional Use: (explain)	())
	Other: (explain)	())

Secretarial Staff

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

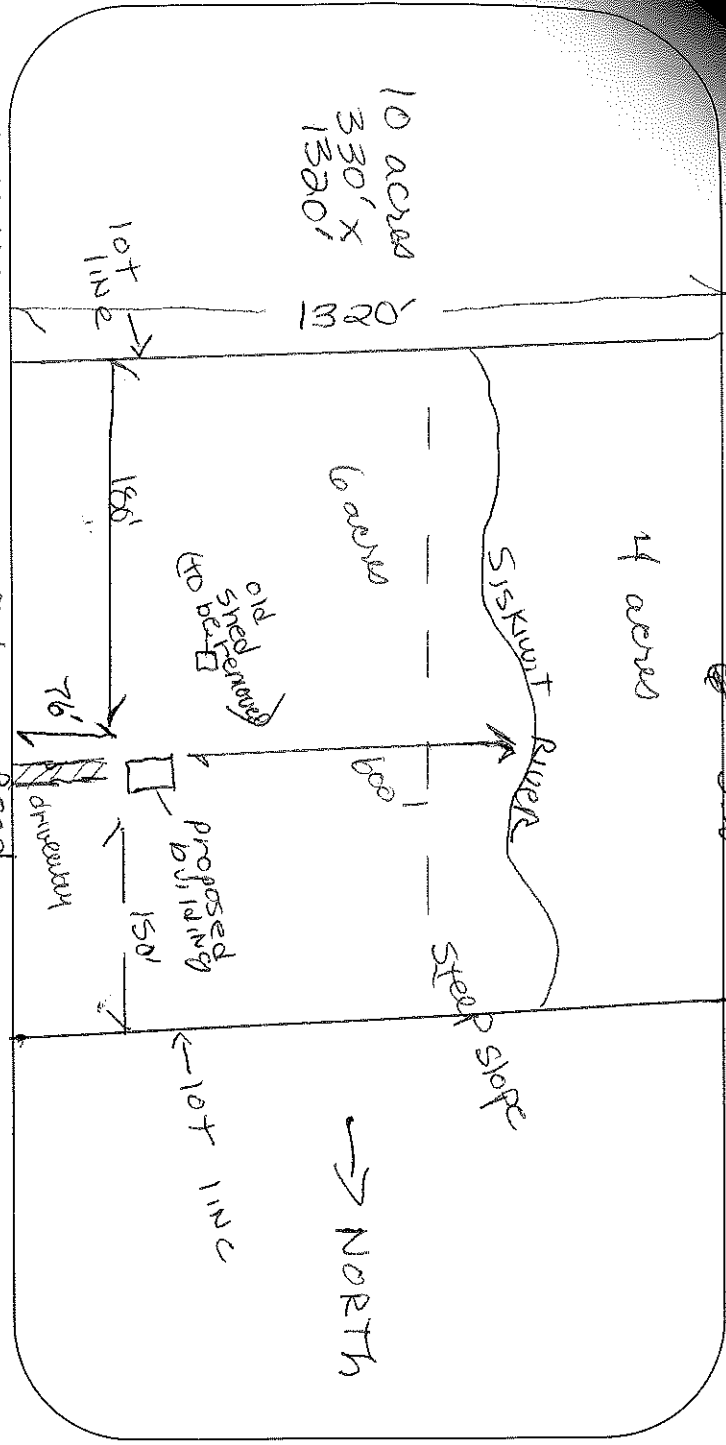
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) 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): Justin Broderick & Jane Broderick Date 4-24-2014
 (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 3364 N. View Lane, Woodbury, MN 55125 Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

Location of:
 Proposed Construction
 North (N) on Plot Plan
 (*) Driveway and (*) Frontage Road (Name Frontage Road)
 All Existing Structures on your Property
 (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) N/A
 (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 (*) Wetlands; or (*) Slopes over 20% 330' COMPOSTING TOILET



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	86 Feet	Setback from the Lake (Ordinary high-water mark)	Feet
Setback from the Established Right-of-Way		Setback from the River, Stream, Creek	600 Feet
Setback from the North Lot Line	150 Feet	Setback from the Bank or Bluff	500 Feet
Setback from the South Lot Line	180 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	1200 Feet	Setback from 20% Slope Area	500 Feet
Setback from the East Lot Line	75 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	N/A Feet	Setback to Well	N/A Feet
Setback to Drain Field			
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 Dwelling: 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)
 Permit Denied (Date): _____ Sanitary Number: County non-plumbing # of bedrooms: _____ Sanitary Date: _____
 Reason for Denial: _____

Permit #: 14-0087 Permit Date: 5-29-14

Is Parcel a Sub-Standard Lot Yes No (Deed of Record) No
 Is Parcel in Common Ownership Yes No (Fused/Contiguous Lot(s)) No
 Is Structure Non-Conforming Yes No
 Mitigation Required Yes No
 Affidavit Attached Yes No

Granted by Variance (B.O.A.) Yes No
 Case #: _____ Previously Granted by Variance (B.O.A.) Yes No
 Case #: _____

Was Parcel Legally Created Yes No
 Were Property Lines Represented by Owner Yes No
 Was Proposed Building Site Delineated Yes No
 Was Property Surveyed Yes No

Inspection Record:
 Date of Inspection: 5-15-14 Inspected by: C. Cronberger, Murphy Zoning District: (R-1)
 Condition(s): Town, Committee or Board Conditions Attached? Yes No - (If No they need to be attached.)
Uniform Dwelling Code permit & inspection required.
Building shall not be serviced by pressurized water.
UNITS APPROVED POINTS IN STRUCTURE.
 Date of Re-Inspection: 3 (week)

Signature of Inspector: _____ Date of Approval: 5-16-14

Hold For Sanitary: _____ Hold For TBA: _____ Hold For Affidavit: _____ Hold For Fees: _____