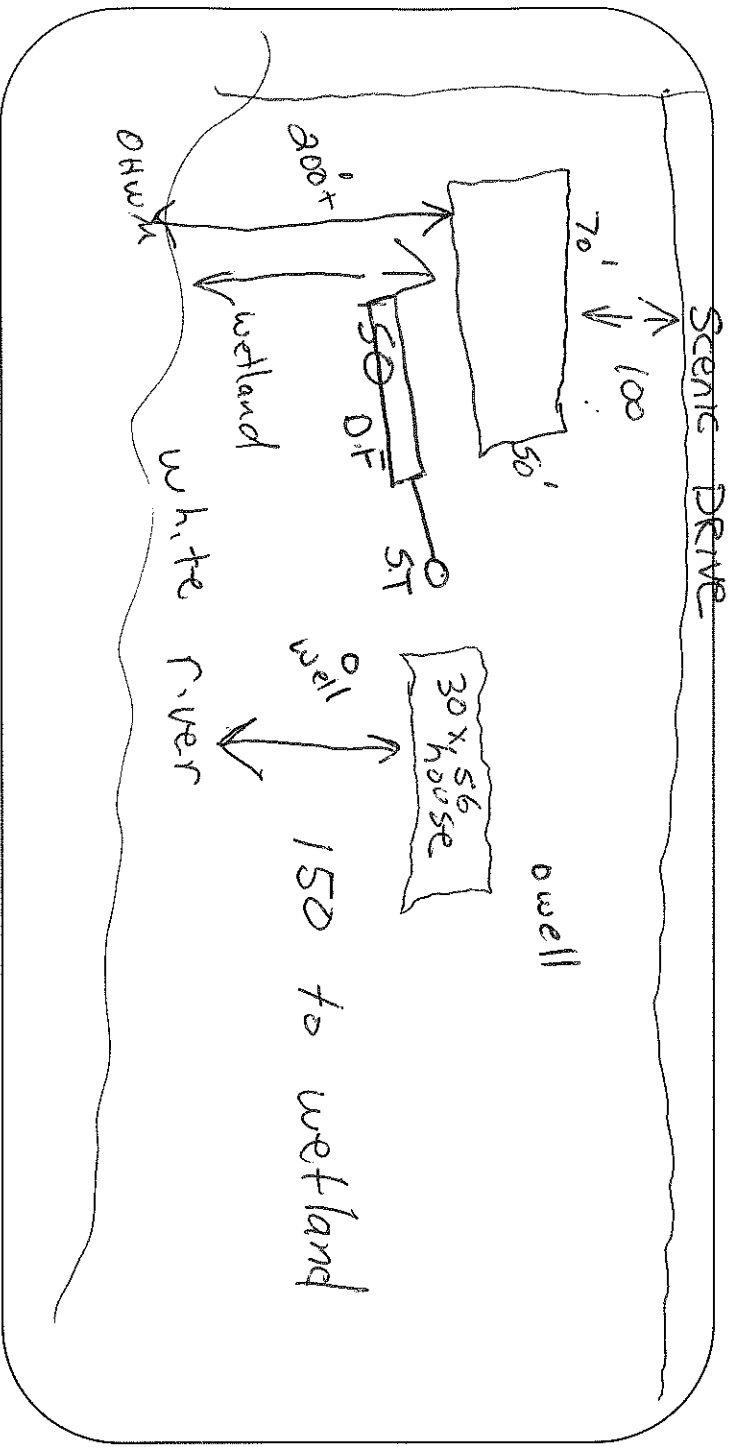


Draw or Sketch your Property (regardless of what you are applying for)

- (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	100 ⁺ Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	100 ⁺ Feet	Setback from the River, Stream, Creek	200 ⁺ Feet
Setback from the North Lot Line	N/A Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	N/A Feet	Setback from Wetland	150 ⁺ Feet
Setback from the West Lot Line	N/A Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	150 ⁺ Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	50 Feet	Setback to Well	50 ⁺ Feet
Setback to Drain Field	50 Feet		
Setback to Privy (Portable, Composting)	N/A 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: 404267	# of bedrooms: 2	Sanitary Date: 5-13-03
Permit Denied (Date):	Reason for Denial:			
Permit #: 14-0104	Permit Date: 6-9-14			
<input type="checkbox"/> Parcel a Sub-Standard Lot <input type="checkbox"/> 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"/> No	<input type="checkbox"/> Mitigation Required <input type="checkbox"/> Mitigation Attached <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No	<input type="checkbox"/> Affidavit Required <input type="checkbox"/> Affidavit 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
<input type="checkbox"/> Granted by Variance (B.O.A.) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	<input type="checkbox"/> Previously Granted by Variance (B.O.A.) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	
<input type="checkbox"/> Was Parcel Legally Created <input type="checkbox"/> Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Were Property Lines Represented by Owner <input type="checkbox"/> Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No <input type="checkbox"/> No
Inspection Record: Well Staked. Meets all setbacks.				
Date of Inspection: 6-5-14	Inspected by: M. Furtak	Zoning District (F-1)	Lakes Classification (3)	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. May not be used for human habitation. No water under pressure in structure.				
Signature of Inspector: Michael Tuttle				Date of Approval: 6-6-14
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>



APPLICATION FOR RECREATIONAL VEHICLE

Bayfield County Planning and Zoning Department
P.O. Box 58
117 East Sixth Street
Washburn, WI 54891
Phone - (715) 373-6138

RECEIVED
MAY 28 2014
Bayfield Co. Zoning Dept.

Office Use:
Zoning District/Lakes Class <u>R-1, 2</u>
Application No. <u>14-0109</u>
Date <u>6-9-14</u>
Fee Paid <u>BS 519-14</u>

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. Changes in plans must be approved by the Zoning Department

Property Owner Colleen & Greg Elonen
Mailing Address 1513 N. 21st St
Superior WI 54880
Telephone 715-394-9195

Property Address 63960 Musky Lake Rd
of RV placement Iron River, WI 54847
Agent: self
Written Authorization Attached: Yes () No (X)

Accurate Legal Description involved in this request:

NW 1/4 of NE 1/4 of Section 4 Township 46 N. Range 8 W. Town of Delta
Gov't Lot 2 Block 2 Subdivision V.7, P.9 CSM # 1074
Volume 917 Page 921 of Deeds Parcel I.D. # 04-016-2-46-08-04-2 01-000-10000 Acreage 2.72

Additional Legal Description: and the NE 1/4 - NE 1/4

ATTACH Copy of Tax Statement

Is your RV in a Shoreland Zone? Yes No If Yes, Distance from Shoreline: 75' or greater < 75' to 40' less than 40'

RV: New Replacement Year: 2000 Vin #: 1UJBJ02P9Y1C80171
Make of RV: Jayco Model of RV: Eagle

FAILURE TO OBTAIN A PERMIT or PLACING RV ON PROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES

APPLICANT - PLEASE COMPLETE REVERSE SIDE

For Office Use Only		Zoning District/Lakes Class: <u>A-1, 2</u>
Permit Issued:	Sanitary Number <u>327497</u>	Date <u>12-14-89</u>
Issuance Date <u>6-9-14</u>	Permit Number <u>14-0109</u>	Permit Denied (Date) _____
Reason for Denial:	_____	
Inspection Record: <u>Meets all set backs</u>	_____	
By <u>M. Furtak</u>	Date of Inspection <u>6-6-14</u>	_____
Variance (B.O.A.) # _____	_____	
Condition: <u>RV may be placed up to 4 months from issuance date.</u>	Must be removed by: <u>10-10-14</u>	
Rec'd for Issuance JUN 09 2014 Secretarial Staff	Signed <u>Michael Furtak</u> Inspector	Date of Approval <u>6-9-14</u>

and use frontage road as a guideline, and indicate North (N) on plot plan

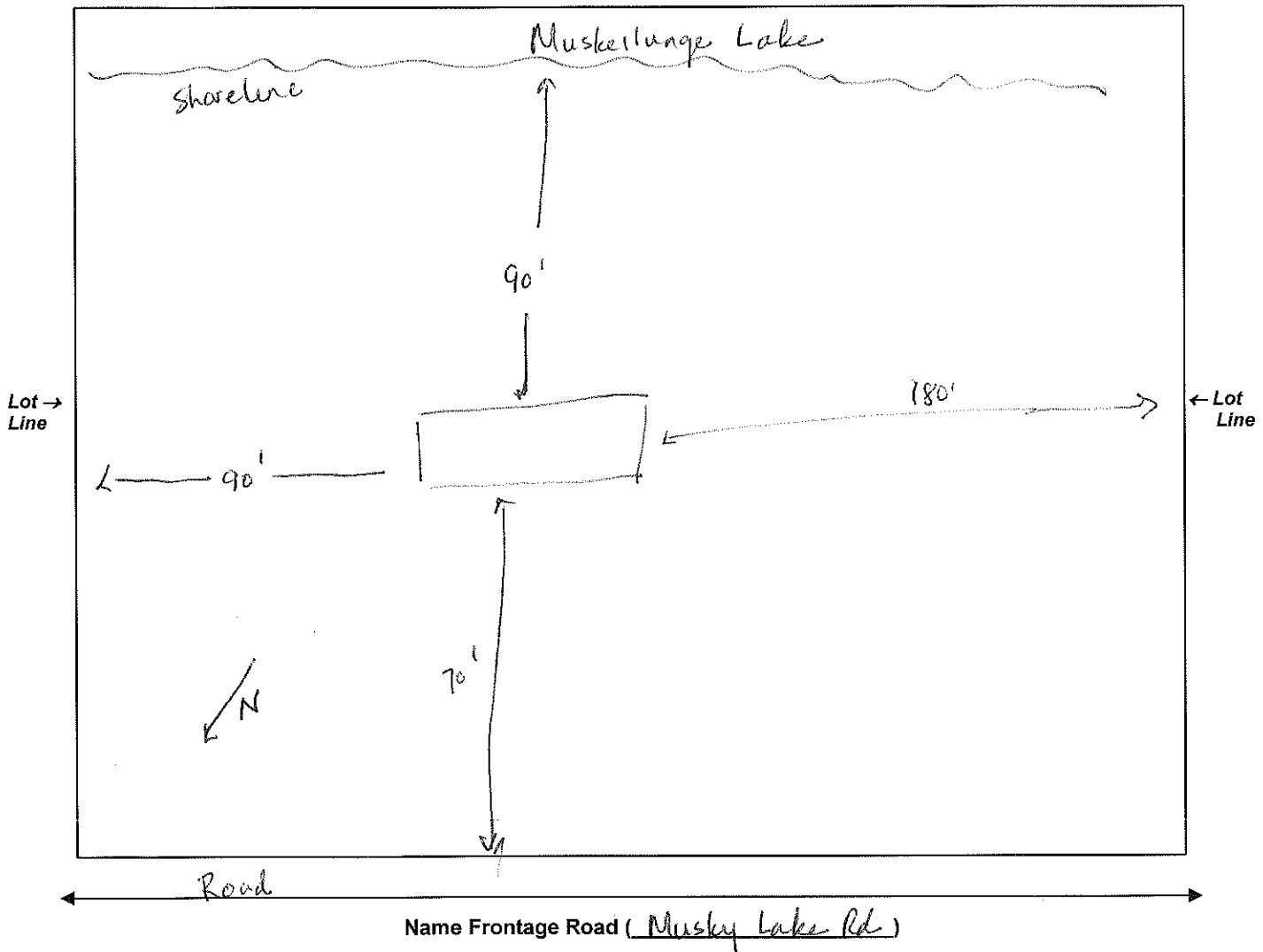
show the RV (Recreation Vehicle) location

IMPORTANT
Detailed Plot Plan is Necessary

3. Show dimensions in feet on the following:

- a. RV from centerline of road(s)
- b. RV from right-of-way line
- c. RV from property lines
- d. RV from lake, river, stream or pond
- e. RV from Privy

Lot Line



NOTICE: The local town, village, city, state or federal agencies may also require permits.

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 or Authorized Agent Colleen + Greg Elonen CM Elonen Date 5/27/14

Address to send permit 1913 N. 21st St Superior WI 54880