

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
 RECEIVED
 AUG 04 2014
 Bayfield Co. Zoning Dept.

Permit #: 14-00979
 Date: 8-18-14
 Amount Paid: \$88005
 Refund: 8-4-14

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 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: Daniel J. Murphy Jr Mailing Address: 1724 Colfax Ave Minneapolis, MN 55403 Telephone: _____
 Address of Property: 31235 Birch Grove Rd City/State/Zip: Washburn WI 54891 Cell Phone: 612-886-3955
 Contractor: _____ Contractor Phone: Plumber: Written Authorization Attached Yes No
 Authorized Agent: (Person Signing Application on Behalf of Owner(s)) Agent Phone: 612-386-5861 Agent Mailing Address (include City/State/Zip): 55345
Bruce Carver PIN: (23 digits) 14921 Excelsior Blvd Minnetonka MN Recorded Document: (i.e. Property Ownership) Volume 1078 Page(s) 88 & 84

PROJECT LOCATION: Legal Description: (Use Tax Statement) 1/4, _____ 1/4 Gov't Lot 1 Lot(s) _____ CSM _____ Vol & Page _____ Lot(s) No. _____ Block(s) No. _____ Subdivision: _____
 Section 19, Township 48 N, Range 4 W Town of: Barkdale Lot Size _____ Acreage 6.06

Shoreland Non-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: 160 feet
 Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes--continue Distance Structure is from Shoreline: 160 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>955,000</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 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> None | <input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None | <input checked="" type="checkbox"/> City <input type="checkbox"/> Well |

Existing Structure: (if permit being applied for is relevant to it) Length: _____ Width: 99'-10" Height: 35'
 Proposed Construction: Length: 108'-8" Width: 65'-2 1/2" Height: 35'

| 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) Deck with (2nd) Deck with Attached Garage | <u>108'-8" x 65'-2 1/2"</u> <u>2nd level</u> <u>3rd porch</u> <u>inexp. lar</u> | <u>5889</u> <u>3146</u> <u>1332</u> <u>1414</u> <u>1005</u> <u>985</u> <u>182</u> <u>219</u> <u>85.25</u> <u>600</u> <u>702</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) Mobile Home (manufactured date) _____ Addition/Alteration (specify) _____ Accessory Building (specify) _____ Accessory Building Addition/Alteration (specify) _____ | () () () () () | () () () () () |
| <input type="checkbox"/> Municipal Use | Special User: (explain) _____ Conditional Use: (explain) _____ Other: (explain) _____ | () () () | () () () |

REC'D for Issuance AUG 18 2014

Secretarial Staff

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES. However, regarding 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.

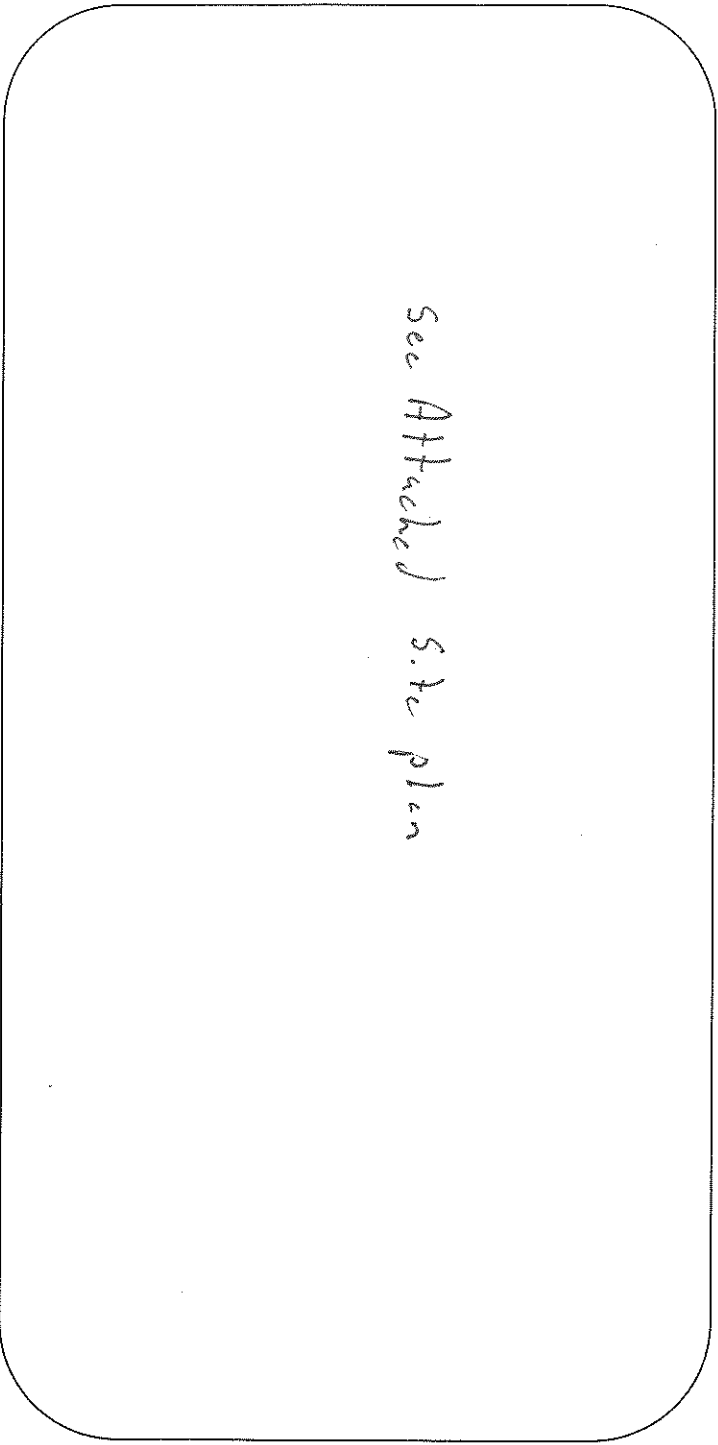
Owner(s): _____ Date: 7-31-14
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: Bruce Carver Date: 7-31-14
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
 Address to send permit 14921 Excelsior Blvd Minnetonka, MN 55345
 (If you recently purchased the property send your Recorded Deed)

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

- See Attached

- (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%

See Attached Site Plan



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 | 175' Feet | Setback from the Lake (ordinary high-water mark) | 160 Feet |
| Setback from the Established Right-of-Way | Feet | Setback from the River, Stream, Creek | Feet |
| Setback from the North Lot Line | 120' Feet | Setback from the Bank or Bluff | 130 Feet |
| Setback from the South Lot Line | 125' Feet | Setback from Wetland | Feet |
| Setback from the West Lot Line | 590' Feet | Setback from 20% Slope Area | Feet |
| Setback from the East Lot Line | 160' Feet | Elevation of Floodplain | Feet |
| Setback to Septic Tank or Holding Tank | 30' Feet | Setback to Well | Feet |
| Setback to Drain Field | 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 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 or 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.

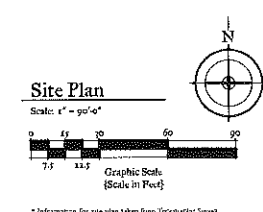
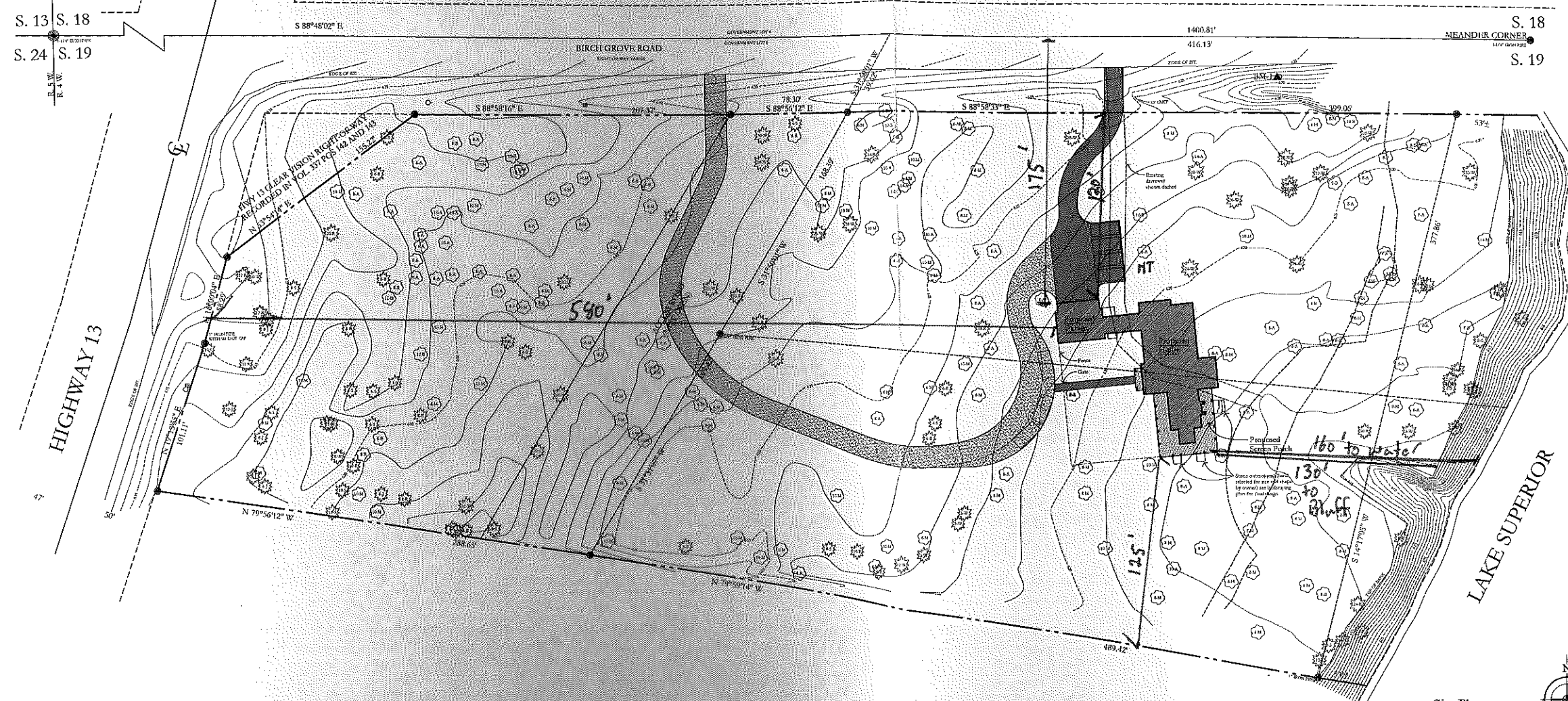
The local Town, Village, City, State or Federal agencies may also require permits.

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Issuance Information (County Use Only) | Sanitary Number: 14-488 | # of bedrooms: 4 | Sanitary Date: 7-16-2014 |
| Permit Denied (Date): | Reason for Denial: | | |
| Permit #: 14-08722 | Permit Date: 8-18-14 | | |
| Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lots(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Mitigation Required Mitigation Attached | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Granted by Variance (B-Q.A.) Case #: | Previously Granted by Variance (B Q.A.) Case #: | Affidavit Required Affidavit Attached | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 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: Property in its natural state - well staked. | | Zoning District: (R-1) | Lakes Classification: (1 - Superior) |
| Date of Inspection: 8-8-14 | Inspected by: J. KERNBERGER - MURPHY | Date of Re-Inspection: | |
| Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - If No they need to be attached. | | | |
| BUILDING - INCLUDE CHIMNEY - SHOW NOT EXCEED 35' IN HEIGHT AS MEASURED FROM THE HIGHEST POINT AND DIVERS POINT OF INTERSECTION IN THE GROUND LEVEL. THE TOP OF THE SHEDS AND VEGETATIVE BUFFER 50 FT DEEP THAT RUNS PARALLEL TO THE TOP OF THE BLUFF. ONE 30 FT VIEW CORRIDOR FOR AUTOMOBILE CLEARING IN VIEW CORRIDOR PREVIOUSLY SURVEYED CUT 30 FT CORRIDOR FOR FILTERED VIEW OF LAKE. Silt Fence shall be | | | |
| Signature of Inspector: | | | |
| Hold For Sanitary: <input type="checkbox"/> | Hold For TBA: <input type="checkbox"/> | Hold For Affidavit: <input type="checkbox"/> | Hold For Fees: <input type="checkbox"/> |

INSTALLED OUTSIDE 50 FT BUFFER TO PROTECT LAKE FROM SEWAGE TREATMENT PLANT CONSTRUCTION site erosion control BMPs required.

©January 2012

| Sheet No. | Description |
|-----------|--------------------------------------------------|
| A1 | Site Plan |
| A2 | Lower Level Plan |
| A3 | Man Level Plan |
| A4 | Upper Level Plan |
| A5 | Roof Plan |
| A6 | External Elevations / Typical Construction Notes |
| A7 | Interior Elevations |
| A8 | Building Section |
| A9 | Building Section |
| A10 | Construction Details |
| A11 | Construction Details |
| A12 | Interior Elevations |
| A13 | Interior Elevations |
| A14 | Interior Elevations |
| A15 | Interior Elevations |
| A16 | Interior Elevations |
| A17 | Interior Elevations |
| A18 | Interior Elevations |
| A19 | Interior Elevations |
| A20 | Interior Elevations |
| S1 | Foundation Plan |
| S2 | Lower Level Slab Plan |
| S3 | Man Level Slab Plan |
| S4 | Upper Level Slab Plan |
| L1 | Lower Level Lighting Plan |
| L2 | Man Level Lighting Plan |
| L3 | Upper Level Lighting Plan |



* Information for site plan taken from Topographic Survey
done and by Nelson Engineering Inc. dated July 20, 2011

PROJECT NUMBER: 13-141
DRAWN BY: JED/JES
CHECKED BY: TJA
SITE ADDRESS: 1545 Birch Grove Road, Barkdale, Wisconsin

CONTRACTOR: J. Murphy, Inc.
INTERIOR DESIGNER:

DILLON - MURPHY RESIDENCE
Barkdale, Wisconsin

MURPHY & CO. DESIGN
1915 DIVISION STREET EAST - ST. PAUL, MINNESOTA 55111

DATE: MAY 26, 2011 (Land Use / Site Plan)
LIFE OF PERM: PERMITS
ISSUE DATE: (Event)

