

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)
 JUL 16 2014
 Bayfield Co. Zoning Dept.

ENTERED
 Permit #: 14-0805
 Date: 8-29-14
 Amount Paid: \$105 7-16-14
 Refund: \$100

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.

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

Owner's Name: Remington Family Properties
 Mailing Address: 1214 Dartmouth Rd Washburn, WI 53705
 Telephone: 608-217-2644
 City/State/Zip: ITCM Riven, WI 54847
 Call Phone:

Address of Property: 6665 Kolling Rd
 City/State/Zip: ITCM Riven, WI 54847

Contractor: Scott Nielsen
 Contractor Phone: 715-332-6051
 Plumber: Scott Nielsen
 Plumber Phone:

Authorized Agent: (Person Signing Application on behalf of Owner(s))
 Patrick Remington
 Agent Phone: 608-217-2644
 Agent Mailing Address: 1214 Dartmouth Rd Washburn, WI 53705
 Written Authorization Attached: Yes No

PROJECT LOCATION: Section 24, Township 47 N, Range 09 W, Town of: Hughes
 Legal Description: (Use Tax Statement) 1/4, 1/4 Govt Lot 5 Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision:
 Recorded Document: (i.e. Property Ownership) PIN: (23 digits) 04-022-2-43-09-24-3 05-205-0300 Volume 652 Page(s) 427
 Lot Size 100' x 380' Acreage 0.7/0.891

Shoreland Non-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: _____ feet
 Distance Structure is from Shoreline: 50 feet
 Is Property in Floodplain Zone? Yes No
 Are Wetlands Present? Yes No

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$35,000	<input type="checkbox"/> New Construction <input checked="" 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 checked="" type="checkbox"/> Seasonal <input type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: Septic <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 type="checkbox"/> City <input checked="" type="checkbox"/> Well

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

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	() () ()	()
	with Attached Garage	() () ()	()
<input type="checkbox"/> Commercial Use	Bunhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	() () ()	()
	Rec'd for Issuance	() () ()	()
	Mobile Home (manufactured date)	() () ()	()
<input type="checkbox"/> Municipal Use	Accessory Building (specify)	() () ()	()
	Accessory Building Addition/Alteration (specify)	() () ()	()
	Rec'd for Issuance	() () ()	()
	Special Use: (explain)	() () ()	()
	Conditional Use: (explain)	() () ()	()
	Other: (explain)	() () ()	()

Secretarial Staff
 AUG 29 2014
 AUG 19 2014

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES.
 The undersigned hereby certifies that the information provided herein 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): Remington Family Properties
 Date: 7/9/14
 (If there are Multiple Owners listed on the deed all owners must sign or letter(s) of authorization must accompany this application)

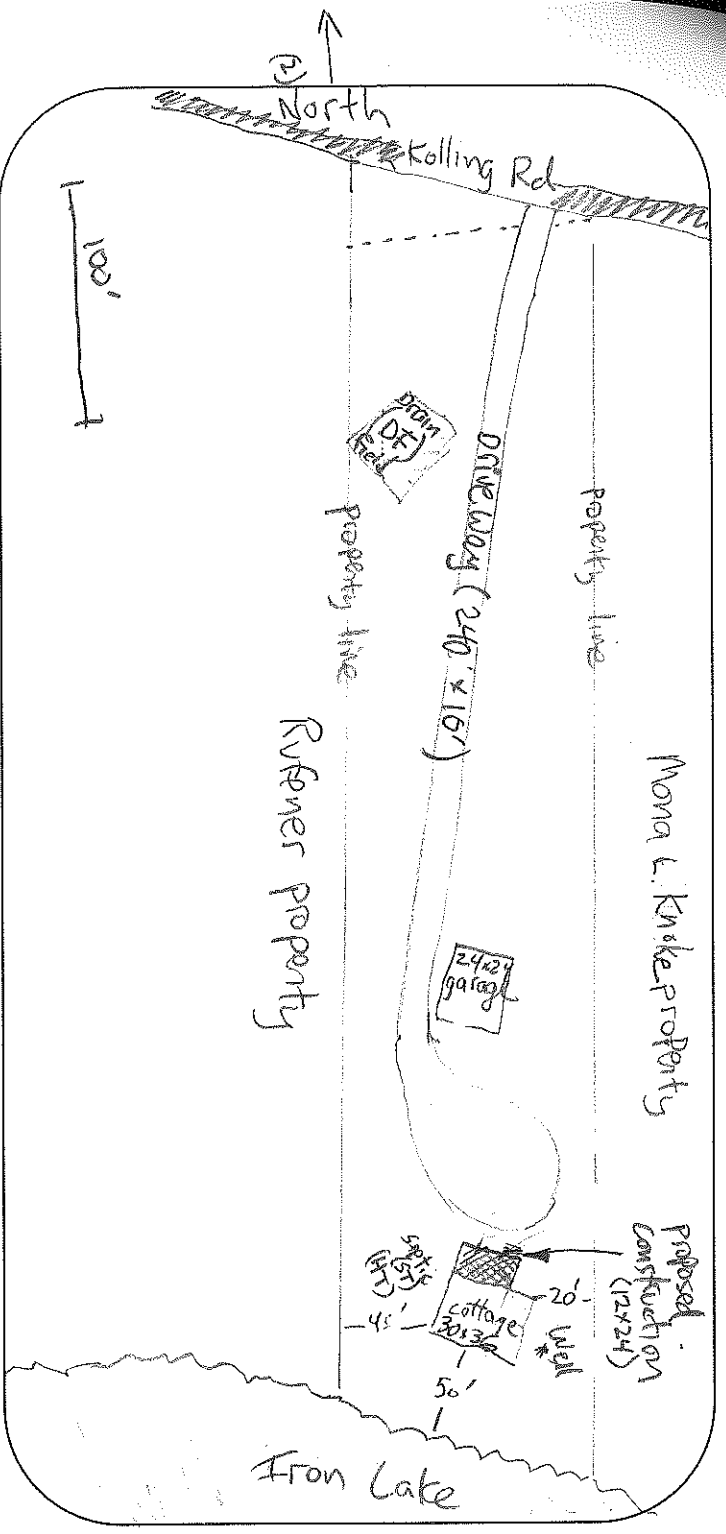
Authorized Agent: [Signature] Managing Partner
 Date: 7/9/14
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: 1214 Dartmouth Rd Washburn, WI 53705
 Copy of Tax Statement
 Attach:

NEEDS LETTER THAT WAS ATTACHED TO MITIGATION of IT NEEDS TO BE RECORDED!

Below: 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	310' Feet	Setback from the Lake (ordinary high-water mark)	80' Feet
Setback from the Established Right-of-Way	- Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	300' Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	90' Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	45' Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	30' Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	20' Feet	Setback to Well (New well will be drilled)	Current 25' Feet
Setback to Drain Field	300' 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: 235440 # of bedrooms: 2 Sanitary Date: 5-18-95

Permit Denied (Date): _____ Reason for Denial: _____

Permit #: 14-0305 Permit Date: 8-29-14

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 50' from DFWM No

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

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: Non-conforming structure 50' from DFWM.

Date of Inspection: 7-9-14 Inspected by: M. Fuchs

Condition(s): Town, Committee or Board Conditions Attached? Yes No (If No they need to be attached.)

Signature of Inspector: see Mitigation Affidavit

Signature of Applicant: Michael Grottel

Hold For Sanitary: _____ Hold For TBA: _____ Hold For Affidavit: M.F. Hold For Fees: \$300

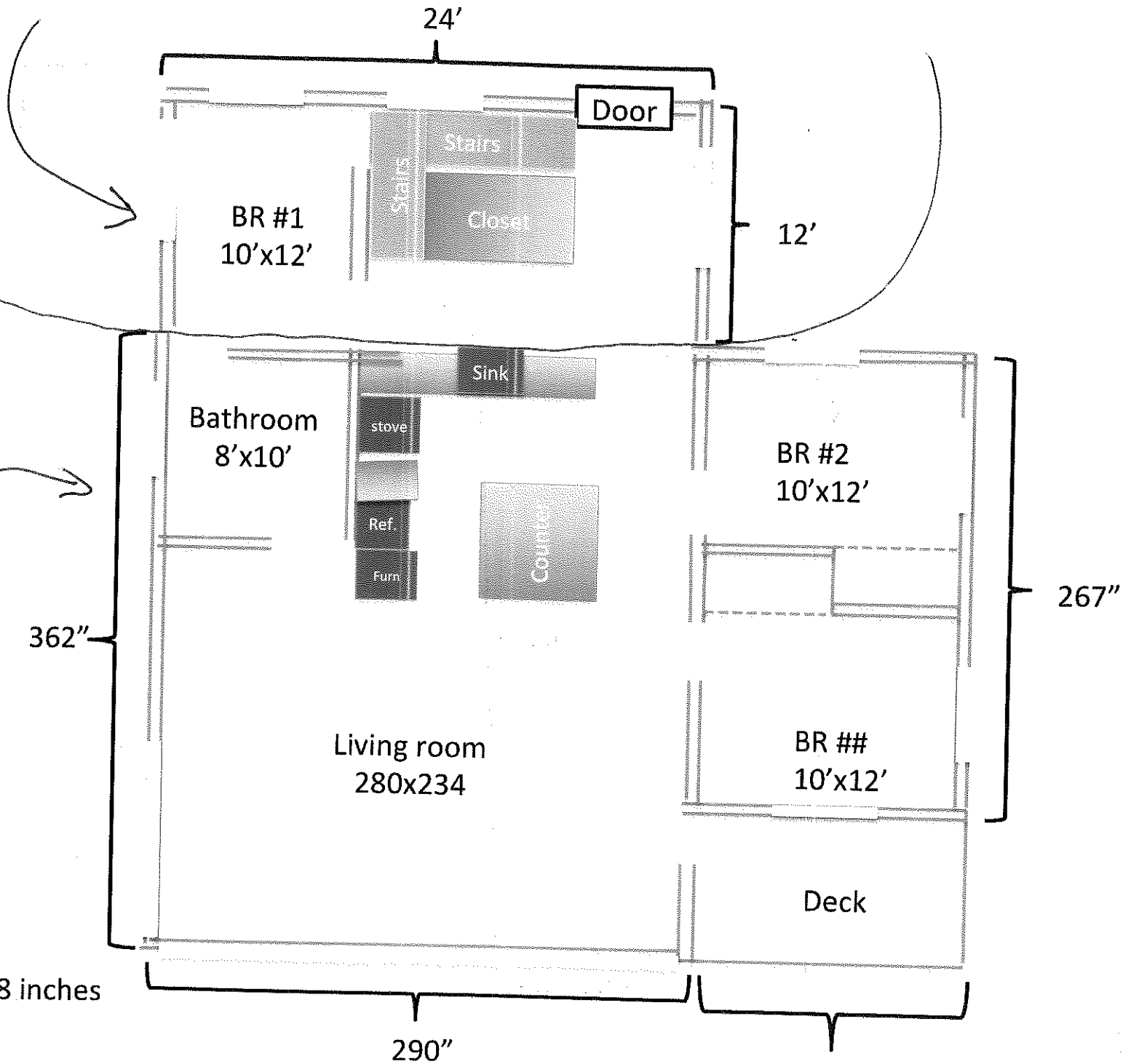
Date of Approval: 7-28-14

Zoning District: RRB

Lakes Classification: 2

Date of Re-Inspection: _____

Proposed construction



1 inch = 68 inches

290"