

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
 SEP 15 2014
 Bayfield Co. Zoning Dept.

PERMIT # 14-03824
 Date: 9-24-14
 Amount Paid: \$175 9-16-14
 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.

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

Owner's Name: Stellar West Holdings Mailing Address: 227 W. Monroe St. Chicago, IL 60606 Telephone: 313 606-2661
J. Jeffrey Lewis L.P. City/State/zip: State 4730 Cell Phone:

Address of Property: 48775 South Lake Owen Drive City, WI 54821
 Contractor: Hilliker, Inc. Contractor Phone: 952-476-2422 Plumber: N.A. Plumber Phone: N.A.
 Authorized Agent: (Person Signing Application on behalf of Owner(s)) Bill MacLachlan Agent Phone: N.A. Agent Mailing Address (include City/State/Zip): N.A. Written Authorization Attached Yes No

PROJECT LOCATION: 1/4, 1/4 Gov't Lot 9 Lot(s) 1 CSM 17-47 Vol & Page 10 P. 198 Lot(s) No. Block(s) No. Subdivision: Recorded Document: (i.e. Property Ownership) Volume 10/1061 Page(s) 198/9

Section S23, Township T44N, N. Range R07, W Town of: (Town of Drummond) Lot Size 83.490 Acres Acreage 83.490 Acres

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: 20 feet
 Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue → Distance Structure is from Shoreline: 20 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
\$55,000	<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 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 type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Conu</u> <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> 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	<input type="checkbox"/> Principal Structure (first structure on property) <input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) <input type="checkbox"/> with Loft <input type="checkbox"/> with a Porch <input type="checkbox"/> with (2 nd) Deck <input type="checkbox"/> with Attached Garage	() () () () () () ()	() () () () () () ()
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities) <input type="checkbox"/> Mobile Home (manufactured date) _____ <input type="checkbox"/> Addition/Alteration (specify) _____ <input type="checkbox"/> Accessory Building (specify) _____ <input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	() () () () ()	() () () () ()
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Special Use: (explain) _____ <input type="checkbox"/> Conditional Use: (explain) _____	() ()	() ()
	<input checked="" type="checkbox"/> Other: (explain) <u>18' Trackwidth 35' wide track 52" wide</u>	(14 X 150)	600 NA

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): _____ Date _____
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: Bill MacLachlan Date 9/11/14
 (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
 Address to send permit 3505 City Rd e, Orono, MN 55356 Attach
 If you recently purchased the property send your Recorded Deed

the box 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%

See Attachment

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	17.00 ± Feet	Setback from the Lake (ordinary high-water mark)	20 Feet
Setback from the Established Right-of-Way	1.700 ± Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	NA Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	NA Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	1.500 ± Feet	20% Slope Area on property	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Setback from the East Lot Line	50 ± Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	NA Feet	Setback to Well	NA Feet
Setback to Drain Field	NA Feet		
Setback to Privy (Portable, Composting)	NA 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.

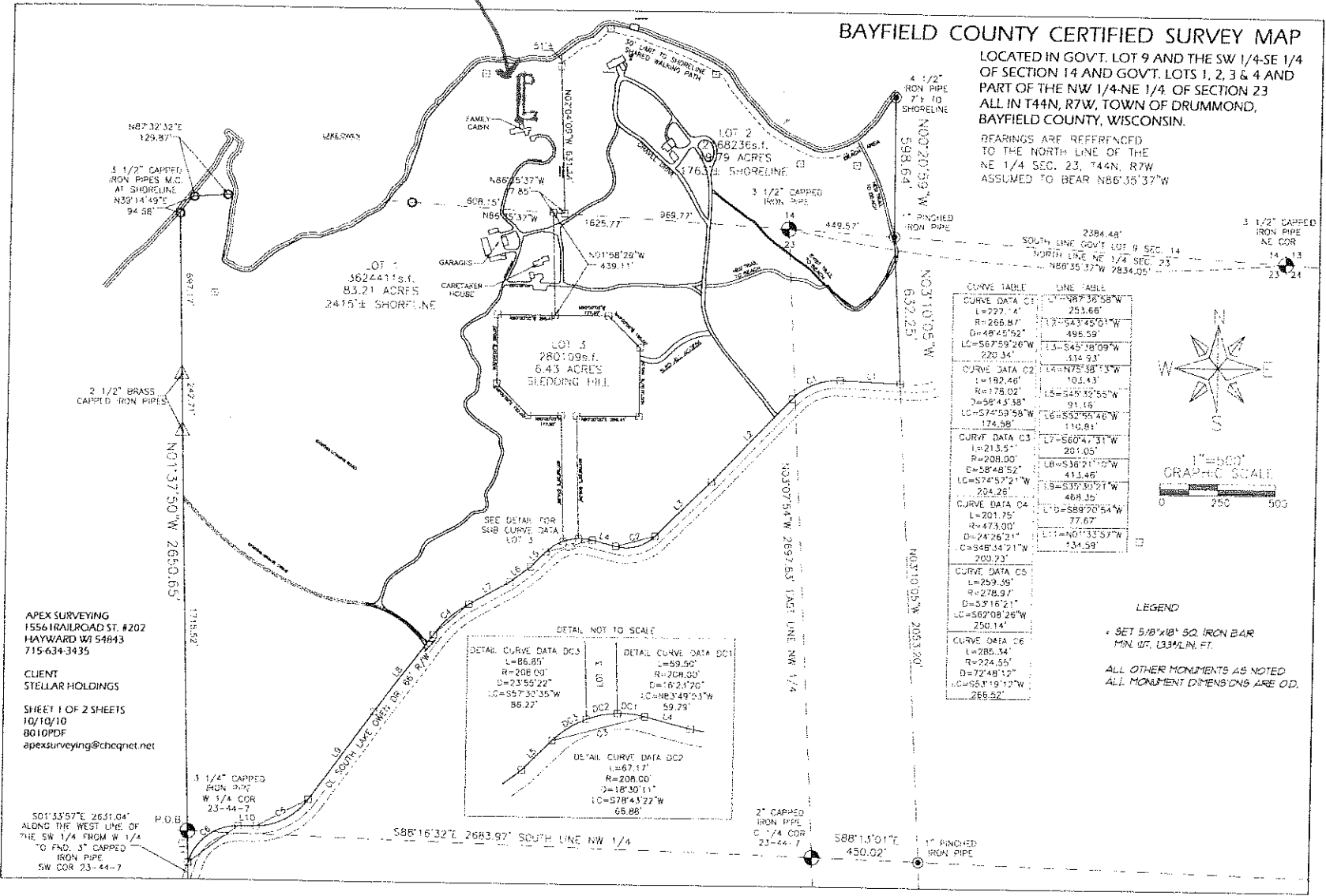
For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

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

Issuance Information (County Use Only)		Sanitary Number:	# of Bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: <u>14-0354</u>	Permit Date: <u>9-24-14</u>			
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lots)	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	Case #:		Case #:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:	Zoning District (R-1)			
Date of Inspection: <u>9-19-14</u>		Inspected by: <u>M. Funtak</u>	Lakes Classification ()	Date of Re-Inspection:
Conditions: Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)				
<i>Must use best management practices to prevent erosion and siltation of the lake</i>				
Signature of Inspector:	<u>Michael Funtak</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"/>	Date of Approval: <u>9-24-14</u>

(2)
(7)
the box on

HILL HIKER HILLSIDE L.A. APPROX. 150' LONG

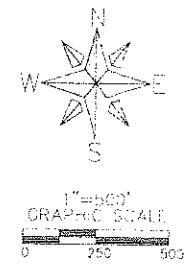


BAYFIELD COUNTY CERTIFIED SURVEY MAP

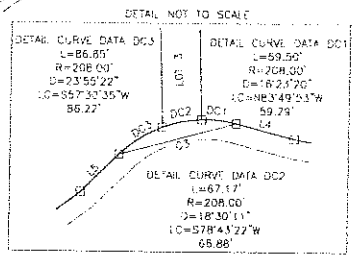
LOCATED IN GOVT. LOT 9 AND THE SW 1/4-SE 1/4 OF SECTION 14 AND GOVT. LOTS 1, 2, 3 & 4 AND PART OF THE NW 1/4-NE 1/4 OF SECTION 23 ALL IN T44N, R7W, TOWN OF DRUMMOND, BAYFIELD COUNTY, WISCONSIN.

BEARINGS ARE REFERENCED TO THE NORTH LINE OF THE NE 1/4 SEC. 23, T44N, R7W ASSUMED TO BEAR N86°35'37"W

CURVE TABLE	LINE TABLE
CURVE DATA C1 L=227.41 R=266.87 D=48°42'52" LC=56°59'26"W 220.34'	C1=287°36'58"W 253.66' 12=543°45'01"W 495.59' 13=545°18'09"W 314.83'
CURVE DATA C2 L=182.48' R=178.02' D=58°45'38" LC=57°09'58"W 174.58'	14=75°38'13"W 103.43' 15=54°12'55"W 91.16' 16=55°56'42"W 110.81'
CURVE DATA C3 L=213.05' R=208.00' D=58°44'59" LC=57°45'72"W 204.28'	17=560°47'31"W 201.05' 18=536°21'19"W 413.46' 19=539°30'11"W 468.35'
CURVE DATA C4 L=201.75' R=473.00' D=24°26'21" LC=348°34'21"W 203.23'	20=589°20'54"W 77.67' 21=40°17'37"W 134.59'
CURVE DATA C5 L=259.39' R=278.97' D=53°16'21" LC=56°08'26"W 250.14'	
CURVE DATA C6 L=285.34' R=324.55' D=72°48'12" LC=65°19'12"W 265.52'	



LEGEND
 * SET 5/8"x18" SQ. IRON BAR MIN. WT. 1.33#/IN. FT.
 ALL OTHER MONUMENTS AS NOTED
 ALL MONUMENT DIMENSIONS ARE O.D.



APEX SURVEYING
 1556 IRAILROAD ST. #202
 HAYWARD WI 54843
 715-634-3435
 CLIENT
 STELLAR HOLDINGS
 SHEET 1 OF 2 SHEETS
 10/10/10
 8010PDF
 apexsurveying@choqnet.net

501°53'57"E 2651.04'
 ALONG THE WEST LINE OF
 THE SW 1/4 FROM W 1/4
 "G FND. 3" CAPPED
 IRON PIPE
 SW COR 23-44-7

2" CAPPED
 IRON PIPE
 C. 1/4 COR
 23-44-7
 588°13'01"E
 450.02'
 1" FINCHED
 IRON PIPE