

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

ENTERED

Date Stamp (Received)  
 JUN 05 2014  
 Bayfield Co. Zoning Dept.

Permit #:	14-0352
Date:	9-24-14
Amount Paid:	2500 Special B
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: **Scott Johnson** Mailing Address: **29935 Hagstrom Rd. Ashland, WI 54806** Telephone: **715-682-2458**

Address of Property: **62415 Highland Rd.** City/State/Zip: **Ashland WI 54806** Cell Phone: **715-293-2458**

Contractor: \_\_\_\_\_ Contractor Phone: \_\_\_\_\_ Plumber: \_\_\_\_\_ Plumber Phone: \_\_\_\_\_

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: \_\_\_\_\_ Agent Mailing Address (include City/State/Zip): \_\_\_\_\_ Written Authorization Attached  Yes  No

PROJECT LOCATION: **PL SE 1/4, SE 1/4** Legal Description: (Use Tax Statement) **04-02024705 354040000000** PIN: (23 digits) **04-02024705** Volume **881** Page(s) **857**

Gov't Lot \_\_\_\_\_ Lot(s) CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_

Section **35**, Township **47** N, Range **05** W Town of: **EUREN** Lot Size \_\_\_\_\_ Acreage **20**

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: \_\_\_\_\_ feet

Is Property/Land within 1000 feet of Lake, Pond or Flowage  If Yes---continue → Distance Structure is from Shoreline: \_\_\_\_\_ 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
\$ _____	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<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 bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
	<input type="checkbox"/> _____	<input type="checkbox"/> Foundation	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____
	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> _____

Existing Structure: (if permit being applied for is relevant to it) Length: **270** Width: **32** Height: **12'**

Proposed Construction: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" 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 <sup>nd</sup> ) Deck	( _____ )	( _____ )
<input type="checkbox"/>	with a Deck	( _____ )	( _____ )
<input type="checkbox"/>	with (2 <sup>nd</sup> ) Deck	( _____ )	( _____ )
<input type="checkbox"/>	with Attached Garage	( _____ )	( _____ )
<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, <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"/>	Other: (explain) _____	( _____ )	( _____ )
<input checked="" type="checkbox"/>	Special Use: (explain) <b>OUTDOOR SALES/REPAIRS</b>	( <b>32 x 70</b> )	( <b>2240</b> )
<input type="checkbox"/>	Conditional Use: (explain) _____	( _____ )	( _____ )
<input type="checkbox"/>	Other: (explain) _____	( _____ )	( <b>EXISTING BUILDING</b> )

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

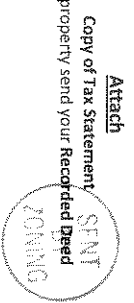
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) 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 acting 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 any reasonable time for the purpose of inspection.

Owner(s): Scott Johnson Date 6-5-2014  
 (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 \_\_\_\_\_  
 (If you recently purchased the property send your Recorded Deed)

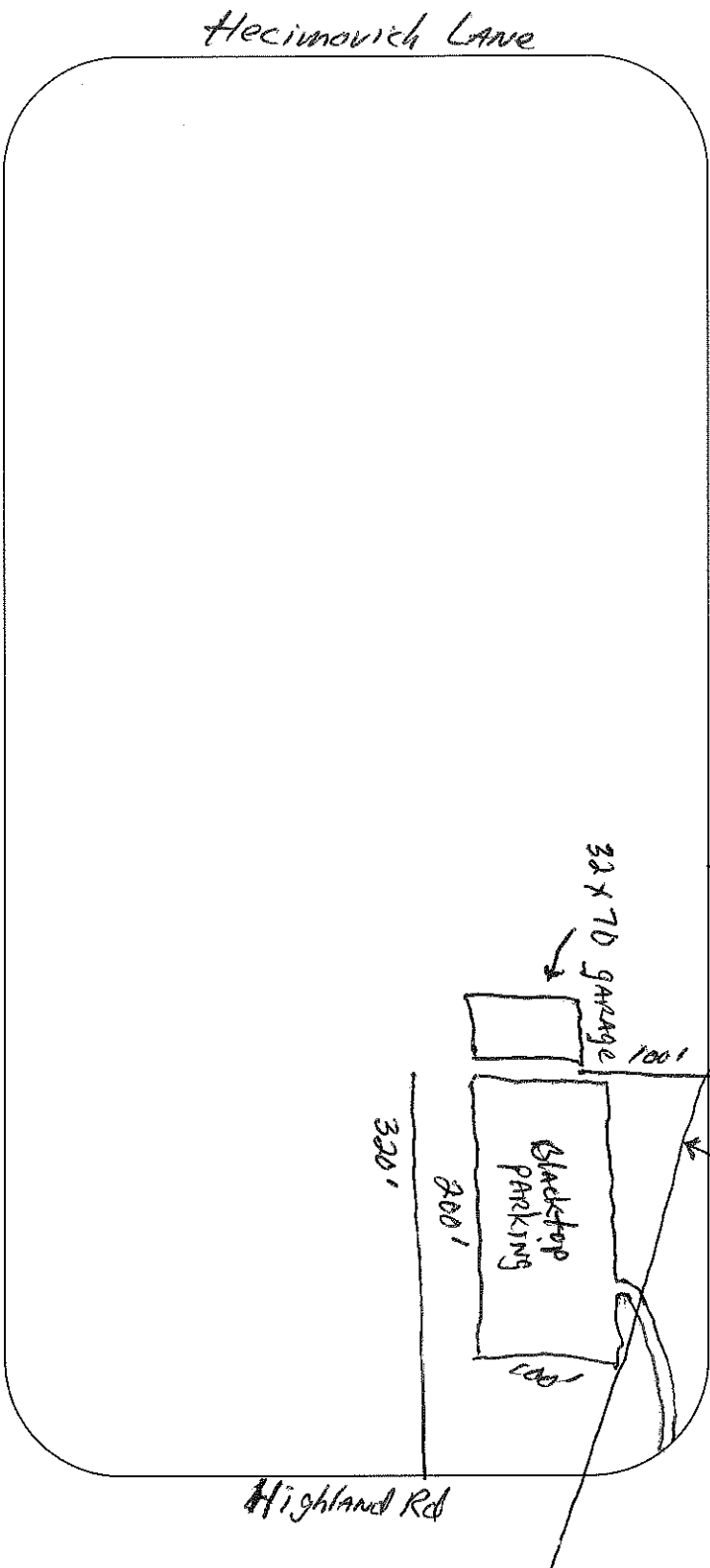
APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE



3000 Rod Fee PD

Look 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 (\*): (\*\*) 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	330 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	100 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	700 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	1330 Feet	Setback from 20% Slope Area	Feet
Setback from the East Lot Line	320 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	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 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: NO SANITARY COMMENTS Sanitary Date: \_\_\_\_\_

Permit Denied (Date): \_\_\_\_\_ Reason for Denial: \_\_\_\_\_

Permit #: 14-0352A Permit Date: 9-24-14

Is Parcel a Sub-Standard Lot  Yes  No (Deed of Record)  Yes  No

Is Parcel In Common Ownership  Yes  No (Fused/Contiguous Lot(s))  Yes  No

Is Structure Non-Conforming  Yes  No

Granted by Variance (B.O.A.) Case #: \_\_\_\_\_ Previously Granted by Variance (B.O.A.) 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: July 17 2014 Inspected by: S. CARVER - MURPETS

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

CONDITIONS AS NOTED IN TB APPROVAL + @ CP12 INTERVIEW:  
 1. ACCESS ROAD ASSIGNMENT  
 2. BUILDING TO MEET COMMERCIAL CODE  
 3. 1/8 FT CURB @ ACCESS TO TOWN ROAD

Signature of Inspector: \_\_\_\_\_ Date of Re-Inspection: \_\_\_\_\_

Hold For Sanitary:  \_\_\_\_\_ Hold For TBA:  \_\_\_\_\_ Hold For Affidavit:  \_\_\_\_\_ Hold For Fees:  \_\_\_\_\_

Date of Approval: 8-27-14

SENIOR ZONING