

**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)  
 JUN 23 10 53 AM '14  
 Bayfield Co. Zoning Dept.

Permit #: 14-03603  
 Date: 9-26-14  
 Amount Paid: 627.00  
 Refund: 9-16-14

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.

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

Owner's Name: ROBERT BELTONEN Mailing Address: 33580 WHITING RD BAYFIELD, WI 54894 Telephone: 715 779 9670

Address of Property: 20445 SOUTHERLAND RD City/State/Zip: WISCONSIN W1 Contractor Phone: 715 682 9128 Plumber: BLAKEMONT PLUMBING Plumber Phone: 715 682 6050

Contractor: ARNE MACKAY CONST. INC Agent Phone: 715 682 9128 Agent Mailing Address (include City/State/Zip): ASHLAND, WI 54806 Written Authorization Attached  Yes  No

Authorized Agent: (person Signing Application on behalf of Owner(s)) MIKE DAHL - APMC INC 407 LAKE SHORE DR E W1 54806 Recorded Document: (i.e. Property Ownership) Volume 1055 Page(s) 835

PROJECT LOCATION: NE 1/4, SW 1/4 Gov't Lot: \_\_\_\_\_ Lot(s) \_\_\_\_\_ CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_

Section 29, Township 46 N, Range 06 W Town of: WISCONSIN Lot Size \_\_\_\_\_ Acreage 20

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

Non-Shoreland

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
\$ <u>209000</u>	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input checked="" 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 checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>ROUND</u>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant to it) Length: 90 Width: 30 Height: 22'

Proposed Construction: \_\_\_\_\_

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/>	Principal Structure (first structure on property)	( <u>48</u> x <u>30</u> )	<u>2040</u>
<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( <u>  </u> x <u>  </u> )	<u>  </u>
	with Loft	( <u>  </u> x <u>  </u> )	<u>  </u>
	with a Porch	( <u>  </u> x <u>  </u> )	<u>  </u>
	with (2 <sup>nd</sup> ) Porch	( <u>32</u> x <u>12</u> )	<u>384</u>
	with a Deck	( <u>32</u> x <u>8</u> )	<u>256</u>
	with (2 <sup>nd</sup> ) Deck	( <u>22</u> x <u>30</u> )	<u>660</u>
<input type="checkbox"/> Commercial Use	with Attached Garage	( <u>  </u> x <u>  </u> )	<u>  </u>
	Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( <u>  </u> x <u>  </u> )	<u>  </u>
	Mobile Home (manufactured date) _____	( <u>  </u> x <u>  </u> )	<u>  </u>
	Addition/Alteration (specify) _____	( <u>  </u> x <u>  </u> )	<u>  </u>
	Accessory Building (specify) _____	( <u>  </u> x <u>  </u> )	<u>  </u>
	Accessory Building Addition/Alteration (specify) _____	( <u>  </u> x <u>  </u> )	<u>  </u>
	Special Use: (explain) _____	( <u>  </u> x <u>  </u> )	<u>  </u>
	Conditional Use: (explain) _____	( <u>  </u> x <u>  </u> )	<u>  </u>
	Other: (explain) _____	( <u>  </u> x <u>  </u> )	<u>  </u>

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: 9-15-14

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

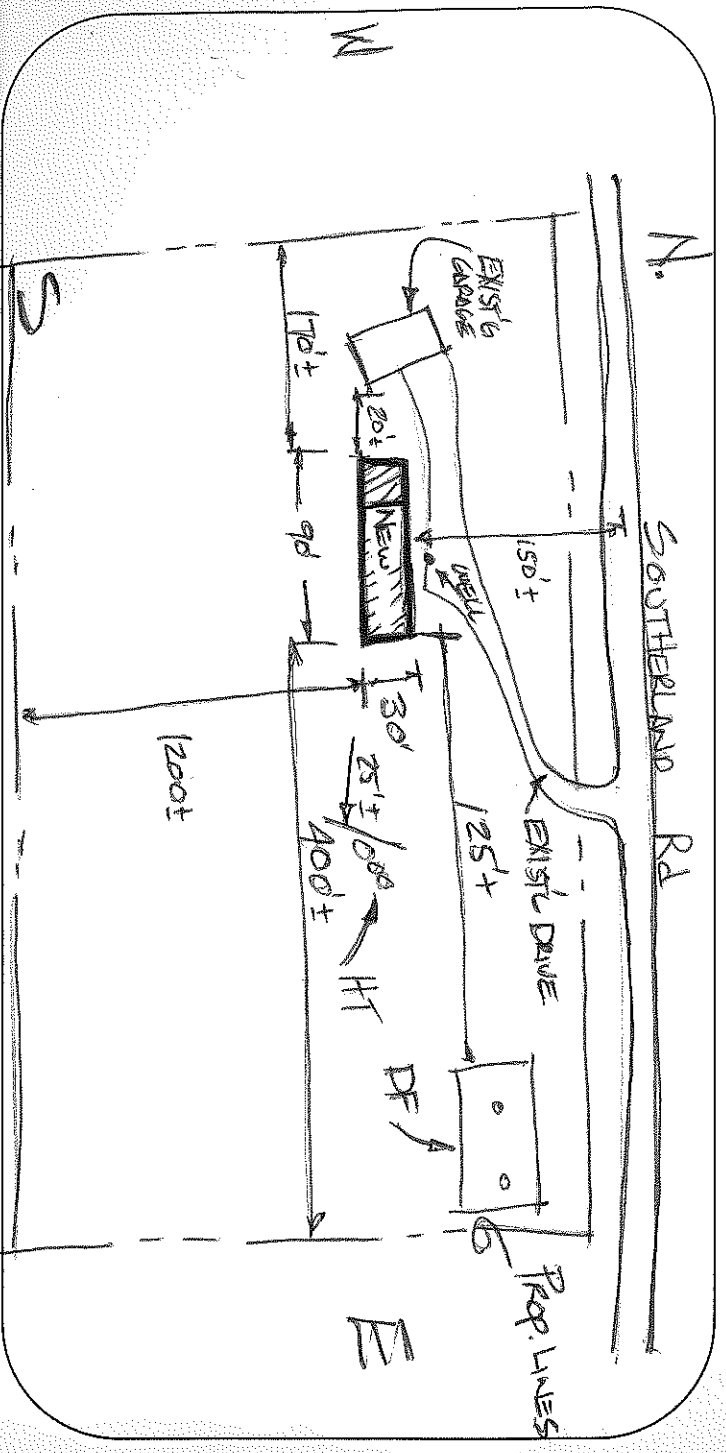
Authorized Agent: MR DAHL Date: 9-15-14

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 407 LAKE SHORE DR. E. ASHLAND WI 54806 Attach Copy of Tax Statement

**ENTER**  
 Enter 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%



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	150'±	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	90'±	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	1200'±	Setback from Wetland	Feet
Setback from the West Lot Line	170'±	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	400'±	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	75'±	Setback to Well	3 Feet
Setback to Drain Field	125'±		
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.

NUT 88-828 (P) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).  
 RLS ALL For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.  
 48732 The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only) Sanitary Number: 425373 # of bedrooms: 3 Sanitary Date: 9/30/04  
 Permit Denied (Date): Reason for Denial:  
 Permit #: 14-08103 Permit Date: 9-26-14

Is Parcel a Sub-Standard Lot  Yes  No (Deed of Record)  Yes  No  
 Is Parcel in Common Ownership  Yes (Used/Contiguous Lots)  No  No  
 Is Structure Non-Conforming  Yes  No  
 Granted by Variance (B.O.A.) Case #:  Yes  No  
 Previously Granted by Variance (B.O.A.) Case #:  Yes  No

Was Parcel Legally Created  Yes  No  
 Was Proposed Building Site Delineated  Yes  No

Inspected by: J O'NEVILLER, MURPHY  
 Date of Inspection: 9-19-14  
 Condition(s) Town, Committee or Board Conditions Attached?  Yes  No (If No they need to be attached.)

NECESSARY UNIFORM DWELLING CODE PERMIT SHALL BE OBTAINED.  
 NO OTHER DWELLING(S) OR INCLUSIVE MOBILE HOME, ALLOWED ON PROPERTY.  
 W/O ADDITIONAL PERMITS(S). HOUSE + DECK SHALL BE AT LEAST 63'  
 Signature of Inspector: [Signature] Date of Approval: 9-22-14

Hold For Sanitary:  RECORDED Hold For TBA:  Hold For Affidavit:  Hold For Fees: