

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
 OCT 24 2014
 Bayfield Co. Zoning Dept.

ENTERED #: 15-0003
Date: 1-8-15
Amount Paid: \$180 10-21-14
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: Dan & Colleen Pozak
Address of Property: 23830 Switlow Rd, Shorewood, MN
 110 Co. Hwy N
 Barnes, WI 54873
City/State/Zip: 55331
Telephone: 612
 366-1739
Cell Phone:

Contractor: Seremy Hill Const. 715 558-3964
Contractor Phone: 558-3964
Plumber:
Plumber Phone:

Authorized Agent: (Person Signing Application on behalf of Owner(s))
 Seremy Hill
Agent Phone: 558-3964
Agent Mailing Address (include City/State/Zip): 16371 W Miller Rd, Hayward, WI
Agent Mailing Address: 16371 W Miller Rd, Hayward, WI
Agent Phone: 558-3964
Agent Mailing Address (include City/State/Zip): 16371 W Miller Rd, Hayward, WI
Agent Phone: 558-3964
Agent Mailing Address (include City/State/Zip): 16371 W Miller Rd, Hayward, WI
Agent Phone: 558-3964

PROJECT LOCATION: Legal Description: (Use Tax Statement)
 SW 1/4 SW 1/4 Gov't Lot Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision:
 Section 30, Township 45 N, Range 9 W Town of Barnes
 Lot Size: 1.86
 Acreage: 1.86

Distance Structure is from Shoreline: _____ feet
Distance Structure is from Shoreline: _____ feet
Distance Structure is from Shoreline: _____ feet
Distance Structure is from Shoreline: _____ feet

Is Property in Floodplain Zone? Yes No
Are Wetlands Present? Yes No

Recorded Document: (i.e. Property Ownership) Volume 1004 Page(s) 139
 PIN: (23 digit) 04-0043-45-09-30-303-000-18200

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
\$60,000	<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 checked="" type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<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"/> None	<input type="checkbox"/> Municipal/City <input 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 checked="" type="checkbox"/> Compost Toilet <input checked="" type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 30' Width: 40' Height: 22'
Proposed Construction: Length: _____ Width: _____ Height: _____

Proposed Use	Proposed Structure	Dimensions		Square Footage
		Length	Width	
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	40	30	3,300
<input type="checkbox"/> Commercial Use	Residence (i.e. cabin, hunting shack, etc.)			
<input type="checkbox"/> Municipal Use	with Loft			
	with a Porch			
	with (2 nd) Porch			
	with a Deck			
	with (2 nd) Deck			
	with Attached Garage			
	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)			
	Special Use: (explain)			
	Conditional Use: (explain)			
	Other: (explain)			

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: 10-23-14
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: _____ Date: 10-23-14
 (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
Address to send permit: 16371 W Miller Rd, Hayward, WI 54873
 (if you recently purchased the property send your Recorded Deed)

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE



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	90 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	55 Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	110+ Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	N/A Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	59 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	38 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	N/A Feet	Setback to Well	N/A Feet
Setback to Drain Field	N/A 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.

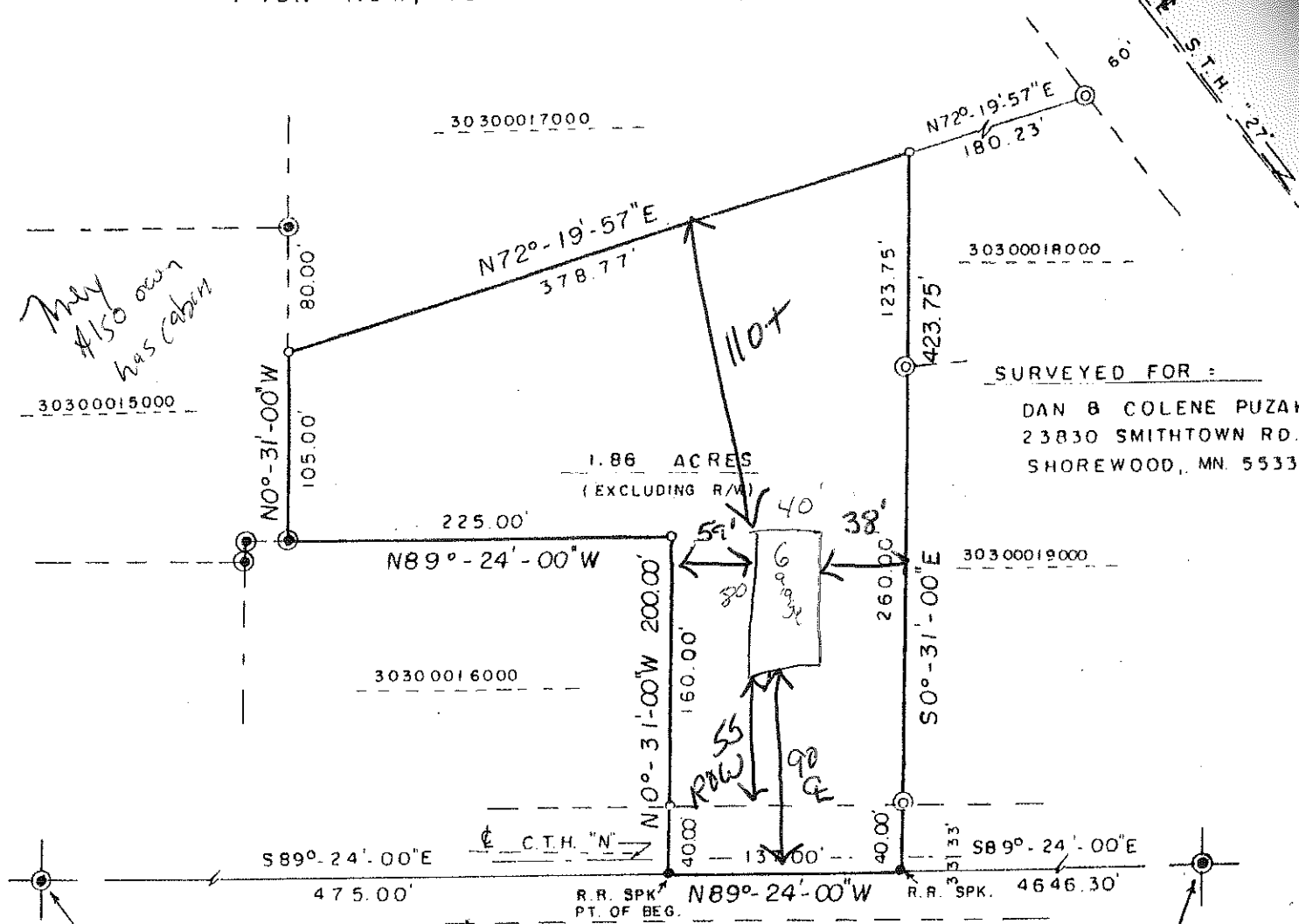
For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

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

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 15-0003	Permit Date: 1-8-15			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(Deed of Record) (Fused/Contiguous Lot(s))	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.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	
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: <i>Met all setbacks.</i>				
Date of Inspection: 11-4-14	Inspected by: M. Fuchs	Zoning District Lakes Classification (NA)	Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If they need to be attached)				
<i>May not be used for human habitation. No water under pressure in structure. No plumbing fixtures in structure. see 20 meeting minutes.</i>				
Signature of Inspector: Michael Stetel	Date of Approval: 11-19-14			
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

PLAT OF SURVEY

OF LANDS LOCATED IN FRAC. SW1/4 - SW1/4, SEC. 30 - T45N - R9W, TOWN OF BARNES, BAYFIELD COUNTY, WI.



May #150 own has cabin

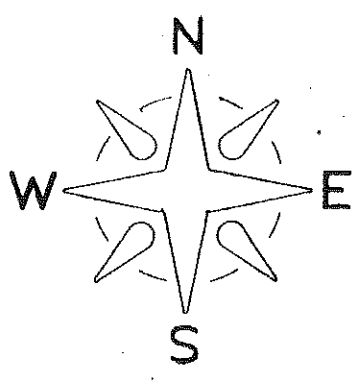
SURVEYED FOR:
 DAN & COLENE PUZAR
 23830 SMITHTOWN RD.
 SHOREWOOD, MN. 5533

1.86 ACRES
 (EXCLUDING R/W)

*Co. Hwy N
 Exist. Driveway
 Fire # 1110 City Rd P
 Barnes Sq. Lot*

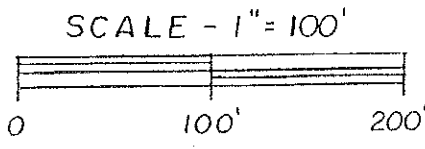
SW CORNER
 SEC. 30-T45N-R9W
 EX. H. MON.

SE CORNER
 SEC. 30-T45N-R9W
 EX. 3/4" PIPE



BEARINGS ARE REFERENCED TO THE SOUTH LINE OF SEC. 30 - ASSUMED TO BEAR S89°-24'-00"E.

- ⊙ = EX. 1" IRON PIPE
- ⊙ = EX. 1/2" RE - BAR
- = SET 1" X 18" IRON PIPE, MIN. WT. 1.13 LBS./LIN. FT.



NOTE = THIS PARCEL DOES NOT CONSTITUTE A "LOT" AS PER SUBDIVISION ORDINANCE,

