

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

Class A
APPLICATION FOR SIGN
BAYFIELD COUNTY, WISCONSIN
RECEIVED
NOV 06 2014
Bayfield Co. Zoning Dept.

ENTERED

Permit #:	15-0008
Date:	1-12-15
Amount Paid:	\$200 11-6-14
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.

Property Owner(s) Name: <u>Iron River Rustic Roost LLC</u>	Mailing Address: <u>P.O. Box 826</u>	City/State/Zip: <u>Iron River, WI 54847</u>	Phone: <u>715-372-4426</u>
Sign Owner(s) Name: <u>Iron River Rustic Roost LLC</u>	Mailing Address: <u>P.O. Box 826</u>	City/State/Zip: <u>Iron River, WI 54847</u>	Phone: <u>715-372-4426</u>
Address of Property: <u>8355 U.S Hwy 2</u>	City/State/Zip: <u>Iron River, WI 54847</u>		
Contractor: <u>self</u>	Contractor Phone: _____	Address: _____	
Authorized Agent: (Person signing Application on behalf of Owner(s)) <u>Ris Hood</u>	Agent Phone: _____	Agent Mailing Address (include City/State/Zip): _____	Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Fused to 50000

PROJECT LOCATION <u>NE 1/4, SW 1/4</u>	Legal Description: (Use Tax Statement)	PIN: (23 digits) <u>04-0242-47-08-08-3 01-000-30000</u>	Recorded Document: (i.e. Property Ownership) Volume <u>812</u> Page(s) <u>899</u>
Section <u>8</u> , Township <u>47</u> N, Range <u>8</u> W	Gov't Lot	Lot(s)	CSM
	Vol & Page <u>1212</u>	Lot(s) No.	Block(s) No.
	Town of: <u>Iron River</u>	Lot Size <u>32399.3106'</u>	Acres <u>1.74 AC</u>

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> 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 in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline: _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project (What are you applying for)	Type	Length	Width	Height	Located in Town of Bayfield
\$ <u>300.00</u>	<input checked="" type="checkbox"/> On-Premise	<input checked="" type="checkbox"/> New	<u>6'</u>	<u>2'</u>	<u>8</u>	<input type="checkbox"/> Yes TBA is required
	<input type="checkbox"/> Off-Premise	<input type="checkbox"/> Replacement	<u>3'</u>	<u>3.5'</u>		<input checked="" type="checkbox"/> No
	<input type="checkbox"/>	<input checked="" type="checkbox"/> EXISTING	<u>1'</u>	<u>4'</u>		
	<input type="checkbox"/>					

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): Iron River Rustic Roost LLC
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Applicant(s): Ris Hood
(If you are applying for an Off-premise sign; the property owners must also sign this form)

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

Address to send permit: 8355 U.S Hwy 2 P.O. Box 826

Date 11-4-14

Date 11-4-14

Date _____

Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

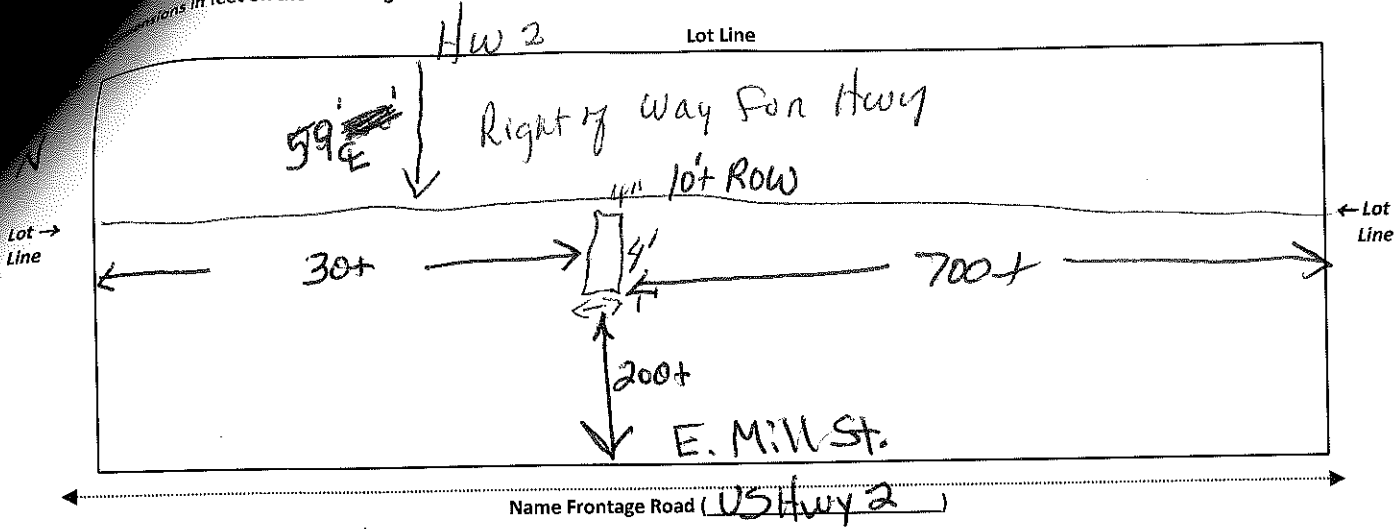
PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
The local Town, Village, City, State or Federal agencies may also require permits.

Rec'd for Issuance
JAN 12 2015
Secretarial Staff

Use road as a guideline, and indicate North (N) on plot plan
 Dimensions in feet on the following:

IMPORTANT
 Detailed Plot Plan is Necessary



Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	59 Feet	Setback from the North Lot Line US Hwy 2	NA Feet
Setback from the Established Right-of-Way	10± Feet	Setback from the South Lot Line	200± Feet
Setback from Lake, River, Stream or Pond	NA Feet	Setback from the West Lot Line	30± Feet
Setback from Other Sign(s)	NA Feet	Setback from the East Lot Line	700± Feet

Sign Plan
 (Fill in Information Desired on Sign)

See attached
 Daily Specials
 & time & Date

Issuance Information (County Use Only)	Permit Number: 15-0008	Permit Date: 1-12-15
Permit Denied (Date):	Reason for Denial:	
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: <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 Property Surveyed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Zoning District (C)	
Inspection Record: Meets all requirements.	Lakes Classification (NA)	
Date of Inspection: 11-12-14	Inspected by: M. Furtak	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)		
Signature of Inspector: Michael Furtak	Date of Approval: 11-12-14	