

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)
 FEB 09 2015
 Bayfield Co. Zoning Dept.

Permit #:	150083
Date:	3-2-15
Amount Paid:	90.00
Refund:	29.15

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 PRIVATE CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: Ronald Swanson Mailing Address: 74285 Hwy 13 City/State/Zip: Washburn WI 54891 Telephone: 715-393-2002

Address of Property: Same as mailing address City/State/Zip: Washburn WI 54891 Call Phone: 715-209-0854

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: 1/4, 1/4 Gov't Lot: 3 Lot(s): _____ CSM: 002 24804 07305 003 6000 Vol & Page: _____ Lot(s) No.: _____ Block(s) No.: _____ Subdivision: _____ Recorded Document (i.e. Property Ownership) Volume: 10157132 Page(s): 3884

Section: S01, Township T48N, Range R01W Township: Barkside Lot Size: _____ Acreage: 2.270

Non-Shoreland

Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If Yes---continue

Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue

Distance Structure is from Shoreline: _____ feet

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
\$ 30,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<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>Flow by Tanks</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 checked="" type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft				
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story				
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement				
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement				
		<input checked="" type="checkbox"/> Foundation				

Existing Structure: (if permit being applied for is relevant to it) Length: 48' Width: 38' Height: 22'

Proposed Construction: _____

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	() ()	()
	Residence (i.e. cabin, hunting shack, etc.)	() ()	()
	with Loft	() ()	()
	with a Porch	() ()	()
	with (2 nd) Deck	() ()	()
	with Attached Garage	() ()	()
<input type="checkbox"/> Commercial Use	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)	(<u>38</u> x <u>48</u>)	(<u>1824</u>)
<input checked="" type="checkbox"/> Municipal Use	Accessory Building (specify) <u>Access 40x50</u>	() ()	()
	Accessory Building Addition/Alteration (specify)	() ()	()
	Special Use: (explain)	() ()	()
	Conditional Use: (explain)	() ()	()
	Other: (explain)	() ()	()

Secretary Staff: _____

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

I hereby declare that the 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 above described property and any reasonable type for the purpose of inspection.

Owner(s): Ronald Swanson Date: 2/27/15

(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)

Attach _____

Address to send permit _____

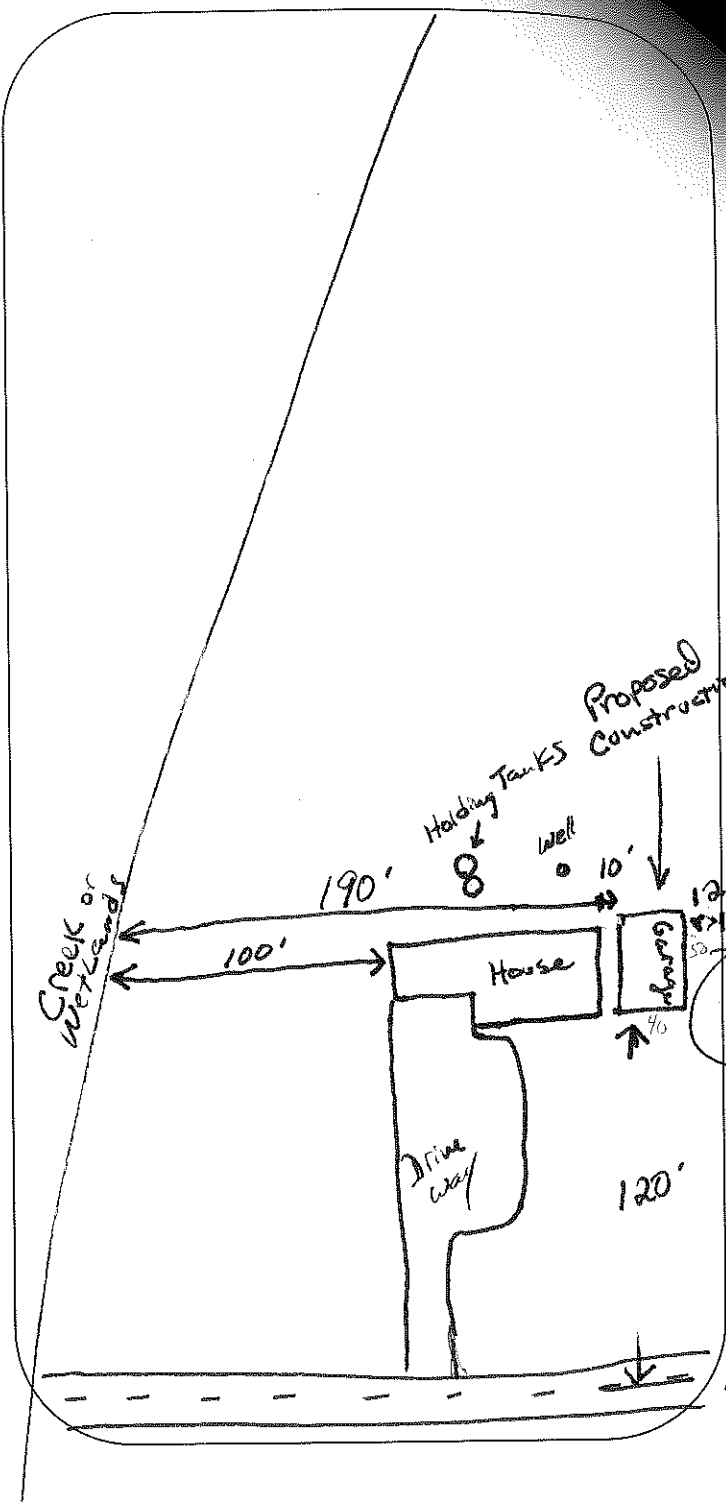
Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

If you recently purchased the property send your Recorded Deed _____

your Property (regardless of what you are applying for)

- Proposed Construction
- (*) North (N) on Plot Plan
 - (*) Driveway and (*) Frontage Road (Name Frontage Road)
 - All Existing Structures on your Property
 - (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
 - (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 - (*) 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	120 Feet	Setback from the Lake (ordinary high-water mark)	
Setback from the Established Right-of-Way		Setback from the River, Stream, Creek	190 Feet
Setback from the North Lot Line	120 Feet	Setback from the Bank or Bluff	
Setback from the South Lot Line	250 Feet	Setback from Wetland	
Setback from the West Lot Line	325 Feet	Setback from 20% Slope Area	
Setback from the East Lot Line	50 Feet	Elevation of Floodplain	
Setback to Septic Tank or Holding Tank	50 Feet	Setback to Well	30 Feet
Setback to Drain Field			
Setback to Privy (Portable, Composting)			

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)

Permit Denied (Date): _____ Sanitary Number: 13569 Reason for Denial: *12,000 sq prefer concrete tanks*

Permit #: 15-0033 Permit Date: 3-2-15

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

Is Parcel in Common Ownership Yes (Fused/contiguous Lots) No

Is Structure Non-Conforming Yes No

Granted by Variance (B.O.A.) Yes No Case #: *N/A* Previously Granted by Variance (B.O.A.) Yes No Case #: *N/A*

Was Parcel Legally Created Yes No

Was Proposed Building Site Delineated Yes No *clearly*

Were Property Lines Represented by Owner Was Property Surveyed Yes No

Were Property Lines Represented by Owner Was Property Surveyed Yes No

Mitigation Required Yes No

Mitigation Attached Yes No

Affidavit Required Yes No

Affidavit Attached Yes No

Sanitary Date: *1-27-15*

Inspection Record: *STAKED SITE INCLUDED 1 FT EYE MEASURE 10' 2 1/2" FROM NEAREST STAKE TO SURVEYED FENCE LINE. 10' 7" FROM NEAREST INSPECTION STAKE TO SURVEYED FENCE LINE. PICS ATTACHED.*

Date of Inspection: *2-25-15* Inspected by: *V. PONDORBE-MURPHY* Date of Re-Inspection: _____

Conditions/Town, Committee or Board Conditions Attached? Yes No (if No they need to be attached)

Builder approved for residential use only. Commercial use of building only allowed with additional permits. Not approved for human habitation.

Signature of Inspector: _____ Date of Approval: *2-27-15*

Hold For Sanitary: _____ Hold For TBA: _____ Hold For Affidavit: _____ Hold For Fees: _____