

SUBMIT - COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
 Bayfield County  
 Planning and Zoning Depart.  
 PO Box 58  
 Washburn, WI 54991  
 (715) 373-6138

APPLICATION FOR PERMIT  
**BAYFIELD COUNTY, WISCONSIN**  
 (Open Stamp Received)  
 MAR 12 2015  
 Bayfield Co. Zoning Dept.

**ENTERED**

Permit #:	15-0048
Date:	3-23-15
Amount Paid:	\$280
Refund:	303/15

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.

TYPE OF PERMIT REQUESTED:  LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER

Owner's Name: **JEFFREY M AND SANDRA G EGGERS** Mailing Address: **N700S 537M STREET** City/State/Zip: **MEMONONIE WI 54751** Telephone: **715-235-2039**

Address of Property: **4617D W THYMORAN LAKE ROAD** City/State/Zip: **CABLE WI 54821** Cell Phone: **715 3086207**

Contractor: **MIKE POEWITZ** Contractor Phone: **715 7983937** Plumber: **RASMUSSEN AND SONS** Plumber Phone: **715-798-3355**

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: Legal Description: (Use Tax Statement) **1/4, 1/4 Gov't Lot 5 Lot(s) CSM Vol & Page 7+8 Lot(s) No. Block(s) No.** Recorded Document: (i.e. Property Ownership) **830** Page(s) **1030**

Section **34**, Township **44** N, Range **7** W Town of: **DRUMMOND** Subdivision: **EAST LAKE SUBDIVISION** Lot Size **200x300** Acreage \_\_\_\_\_

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: **77** feet

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
\$60,000	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" 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: <b>CONV</b>	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Privy (Prt) or Vaulted (frin 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> Foundation	<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"/>

Existing Structure: (if permit being applied for is relevant to it) Length: **32** Width: **26** Height: **18**

Proposed Construction: Length: **15** Width: **14** Height: **18**

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( <b>32</b> x <b>26</b> )	<b>832</b>
	Residence (i.e. cabin, hunting shack, etc.)	( <b>32</b> x <b>26</b> )	<b>832</b>
	with Loft	( <b>7</b> x <b>18</b> )	<b>126</b>
	with a Porch	( <b>7</b> x <b>24</b> )	<b>168</b>
	with (2 <sup>nd</sup> ) Deck	( <b>7</b> x <b>24</b> )	<b>168</b>
	with (2 <sup>nd</sup> ) Deck with Attached Garage	( <b>7</b> x <b>24</b> )	<b>168</b>
<input type="checkbox"/> Commercial Use	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooling & food prep facilities)	( <b>7</b> x <b>18</b> )	<b>126</b>
<input type="checkbox"/> Secretarial Staff	Mobile Home (manufactured date)	( <b>7</b> x <b>18</b> )	<b>126</b>
<input checked="" type="checkbox"/> Municipal Use	Addition/Alteration (specify) <b>replace cabin</b>	( <b>14</b> x <b>15</b> )	<b>210</b>
	Accessory Building (specify) <b>wh basement, decks</b>	( <b>7</b> x <b>24</b> )	<b>168</b>
	Accessory Building (specify) <b>stair well add</b>	( <b>7</b> x <b>24</b> )	<b>168</b>
	Accessory Building Addition/Alteration (specify) _____	( <b>7</b> x <b>24</b> )	<b>168</b>
Rec'd for Issuance	Special Use: (explain) _____	( <b>7</b> x <b>24</b> )	<b>168</b>
	Conditional Use: (explain) _____	( <b>7</b> x <b>24</b> )	<b>168</b>
	Other: (explain) _____	( <b>7</b> x <b>24</b> )	<b>168</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 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 and any reasonable time to apply the purpose of inspection.

Owner(s): **Jeffrey M. Eggert** **Sandra G. Eggert** Date **3/12/15**

Authorized Agent: \_\_\_\_\_ Date \_\_\_\_\_

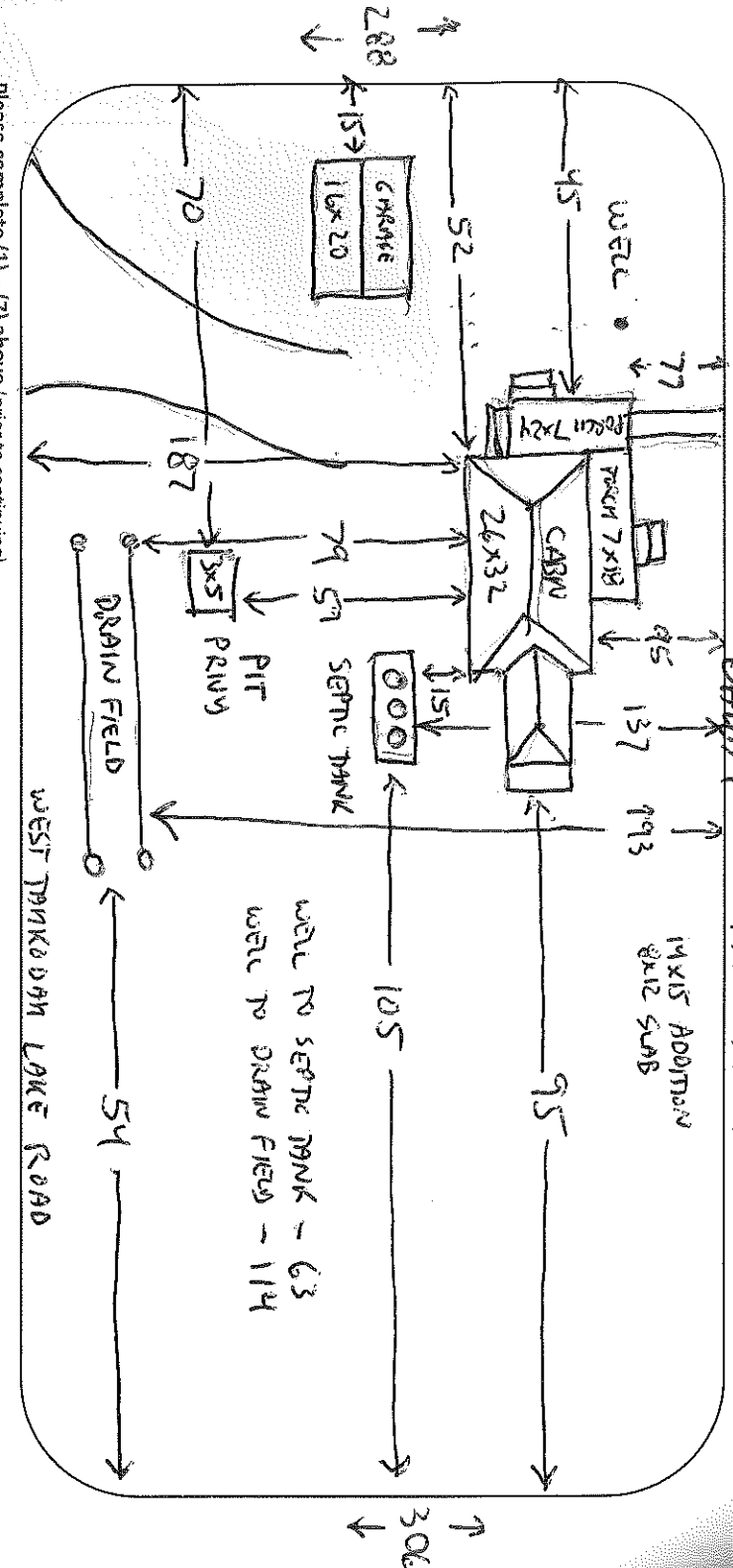
Address to send permit **N700S 537M STREET** Attach  Copy of Tax Statement

**MEMONONIE, WI 54751** If you recently purchased the property send your Recorded Deed

ONE PERMIT FEES. (SEE APPENDIX ATTACHED ON PAGES FOR ADDITIONS) SUBMITTED AFTER ISSUANCE

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 (\*): Offroad
- (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	187 Feet	Setback from the Lake (Ordinary high-water mark)	77 Feet
Setback from the Established Right-of-Way	170± Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	45 Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	95 Feet	Setback from Wetland	220± Feet
Setback from the West Lot Line	187 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	77 Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	15 Feet	Setback to Well	13 Feet
Setback to Drain Field	77 Feet		
Setback to Privy (Portable, Composting)	NA 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: **08-055** # of bedrooms: **3** Sanitary Date: **2-14-08**

Permit Denied (Date): Reason for Denial:

Permit #: **15-0048** Permit Date: **3-23-15**

Is Parcel a Sub-Standard Lot  Yes  No

Is Parcel in Common Ownership  Yes (Deed of Record)  No

Is Structure Non-Conforming  Yes (Used/contiguous Lot(s))  No

Granted by Variance (B.O.A.)  Yes  No Case #: **08-055** Previously Granted by Variance (B.O.A.)  Yes  No Case #:

Was Parcel Legally Created  Yes  No

Was Proposed Building Site Delineated  Yes  No

Were Property Lines Represented by Owner Was Property Surveyed  Yes  No

Affidavit Required  Yes  No

Affidavit Attached  Yes  No

Inspection Record: **Metcalf setbacks.**

Date of Inspection: **3-20-15** Inspected by: **MM Frucht**

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

Signature of Inspector: **Michael Frucht** Date of Approval: **3-23-15**

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