

SUBMIT A 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  
 RECEIVED  
 FEB 09 2015  
 Bayfield Co. Zoning Dept.

Permit #: 15-0916  
 Date: 6-19-15  
 Amount Paid: \$300  
 Refund: 6-19-15

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

Owner's Name: Jack Martinson  
 Address of Property: 6550 Bayfront Ashland WI 54806  
 City/State/Zip: Ashland WI 54806  
 Contractor: Self  
 Authorized Agent: (Person Signing Application on behalf of Owner(s))  
 Contractor Phone: Plumber: Blakeanna Plumbing  
 Agent Phone: 715 292-1641  
 Agent Mailing Address (Include City/State/Zip): 715 292-6056  
 Written Authorization Attached:  Yes  No

PROJECT LOCATION: Legal Description: (Use Tax Statement)  
 SE 1/4, SE 1/4 Gov't Lot Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision:  
 Section 24, Township 48 N, Range DL W Town of: Barkshole  
 PIN: (23 digits) 04-002 24806 244 040001000  
 Recorded Document: (i.e. Property Ownership) Volume 1124 Page(s) 592

Shoreland  Non-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
\$ 35,000	<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 checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: <u>Septic</u> <input type="checkbox"/> Privy (Pvt) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/ service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for, is relevant to it) Length: 40 Width: 28 Height: 16  
 Proposed Construction: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

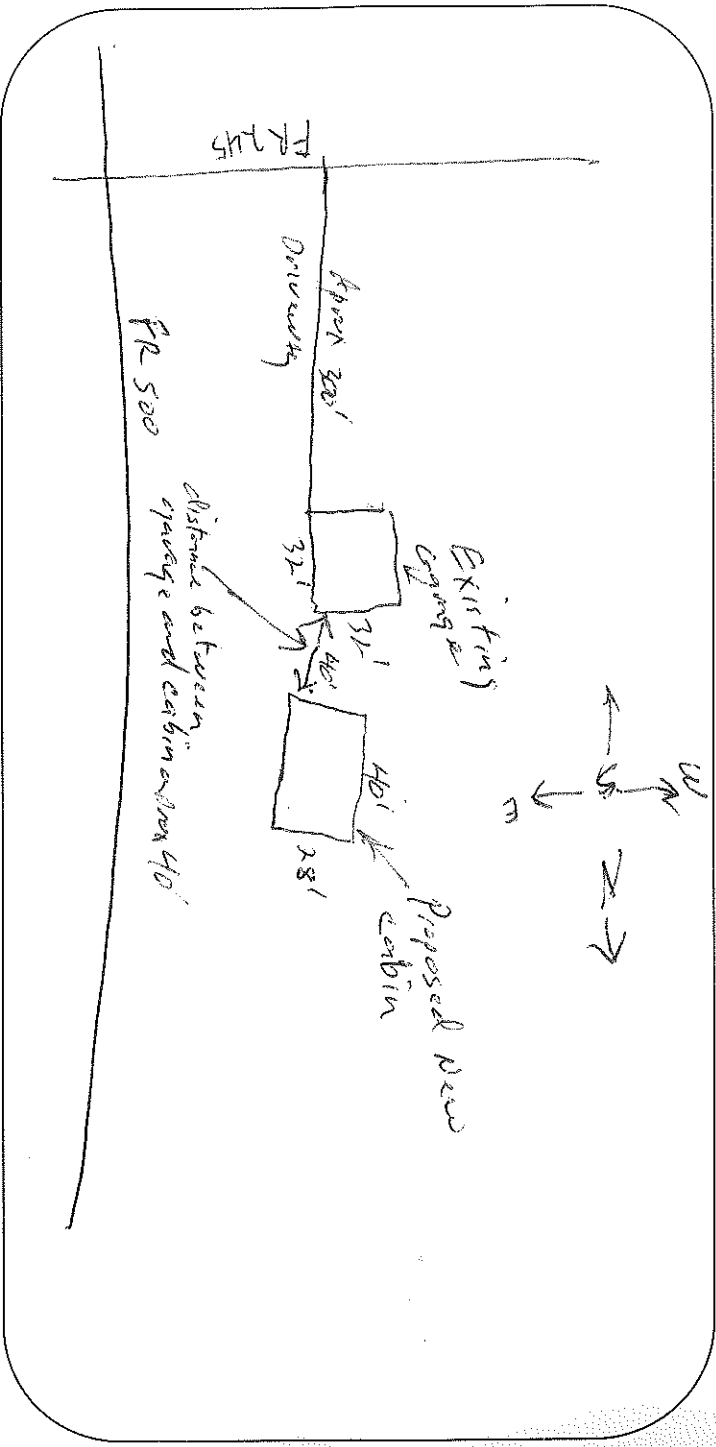
Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) <input type="checkbox"/> with Loft <input checked="" type="checkbox"/> with a Porch <input type="checkbox"/> with (2 <sup>nd</sup> ) Deck <input type="checkbox"/> with a Deck <input type="checkbox"/> with (2 <sup>nd</sup> ) Deck with Attached Garage	( 46 X 28 ) ( X ) ( X ) ( 20 X 4' ) ( X ) ( X ) ( X )	1120   80   
<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)	( X )	
<input type="checkbox"/> Mobile Home (manufactured date)		( X )	
<input type="checkbox"/> Addition/Alteration (specify)		( X )	
<input type="checkbox"/> Accessory Building (specify)		( X )	
<input type="checkbox"/> Accessory Building Addition/Alteration (specify)		( X )	
<input type="checkbox"/> Special Use: (explain)		( X )	
<input type="checkbox"/> Conditional Use: (explain)		( X )	
<input type="checkbox"/> Other: (explain)		( X )	

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): Jack Martinson  
 Date: 2-3-2015  
 Authorized Agent: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address to send permit: 66530 Bayfront Ashland WI 54806

- 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	300 Feet	Setback from the Lake (ordinary high-water mark)	N/A
Setback from the Established Right-of-Way	250 Feet	Setback from the River, Stream, Creek	N/A
Setback from the North Lot Line	1200 Feet	Setback from the Bank or Bluff	N/A
Setback from the South Lot Line	600 Feet	Setback from Wetland	500 Feet
Setback from the West Lot Line	150 Feet	Setback from 20% Slope Area	600 Feet
Setback from the East Lot Line	1150 Feet	Elevation of Floodplain	N/A
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	25 Feet
Setback to Drain Field	Feet		
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.

(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.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: 15-718	# of bedrooms: 3	Sanitary Date: 6-18-15	
Permit Denied (Date):	Reason for Denial:	Permit Date: 6-19-15			
Permit #: 15-0196					
<input type="checkbox"/> Is Parcel a Sub-Standard Lot <input type="checkbox"/> Is Parcel in Common Ownership <input checked="" type="checkbox"/> Is Structure Non-Conforming	<input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	<input type="checkbox"/> Mitigation Required <input type="checkbox"/> Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Affidavit Required <input type="checkbox"/> Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	Case #:	Previously Granted by Variance (B.O.A.)	Case #:		
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
Was Parcel Legally Created	Yes <input type="checkbox"/> No <input type="checkbox"/>	Were Property Lines Represented by Owner	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Was Proposed Building Site Delineated	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Was Property Surveyed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Inspection Record:					
Date of Inspection: 6-9-15 (+ previous)	Inspected by: Leonard B. Bore-Murphy	Zoning District: (F-1)			
Condition(s) Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (if No they need to be attached)		Lakes Classification: N/A			
UNIFORM DWELLING CODE PERMIT + INSPECTIONS REQUIRED.					
Signature of Inspector:		Date of Approval: 6-18-15			
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>		