

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

Date Stamp (Received)
JUL 13 2015

Bayfield Co. Zoning Dept.



Permit #:	15-0820
Date:	7-21-15
Amount Paid:	\$975
Refund:	2-21-15

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: EMERY, KAREN GRUDE LASH Mailing Address: 15085 CEC CAMP RD MASON, WI 54880 Telephone: 715-372-8277

Address of Property: 15085 CEC CAMP RD City/State/Zip: MASON, WI 54880 Cell Phone: 612-991-9011

Contractor: DAVE MINTAN Contractor Phone: N/A Plumber: N/A Plumber Phone:

Authorized Agent: (Person Signing Application on behalf of Owner(s))
N/A Agent Phone: Agent Mailing Address (include City/State/Zip): Written Authorization Attached Yes No

PROJECT LOCATION Legal Description: (Use Tax Statement) WEST 3/4' NW 1/4 Gov't Lot Lot(s) CSM 016-2-96-07-28-2-000-2000 Lot(s) No. Block(s) No. Subdivision: Recorded Document: (i.e. Property Ownership) Volume 584 Page(s) 207

Section 28, Township 4C N. Range 7 W Town of: DETRA Lot Size Acres 9.4

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: 367 feet

Distance Structure is from Shoreline: 367 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
\$20,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input 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 type="checkbox"/> (New) Sanitary Specify Type: <u></u>
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>SEPTIC</u>	<input type="checkbox"/> Well
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
	<input type="checkbox"/> _____	<input type="checkbox"/> Foundation	<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: 40 Width: 30 Height: 18

Proposed Construction: Length: 40 Width: 30 Height: 18

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)		(X)	
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)		(X)	
<input type="checkbox"/> with Loft		(X)	
<input checked="" type="checkbox"/> Residential Use	with a Porch	(X)	
	with (2 nd) Deck	(X)	
	with (2 nd) Deck	(X)	
<input type="checkbox"/> Commercial Use	with Attached Garage	(X)	
	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	Mobile Home (manufactured date) _____	(X)	
<input type="checkbox"/> Addition/Alteration (specify) _____		(X)	
<input checked="" type="checkbox"/> Municipal Use	Accessory Building (specify) <u>SMRAGS</u>	(30 X 40)	1200
<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)	

Secretarial Staff

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

I, the undersigned, hereby acknowledge that I (we) acknowledge that I (we) am (are) responsible for the design 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) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purposes specified.

Owner(s): [Signature] Date 7-13-2015

(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 _____

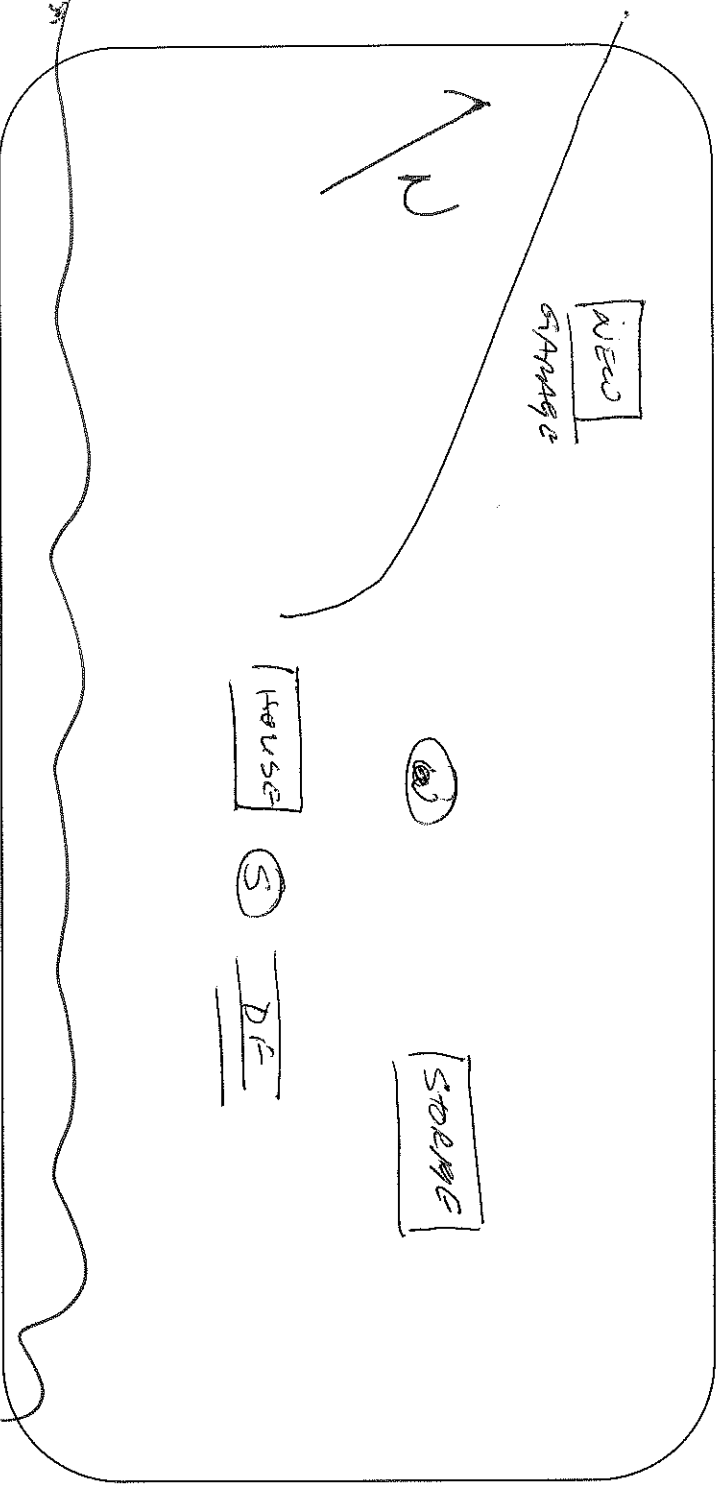
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit _____ Attach Copy of Tax Statement

Copy of Tax Statement

DOE 7/10/15 Fee Service... Please Issue. APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE. ISSUES? or HOLD FOR SERVICE? If you recently purchased the property send your Recorded Deed

- Proposed Construction**
- (1) Show Location of: North (N) on Plot Plan
 - (2) Show / Indicate: (*) Driveway and (*) Frontage Road (Name Frontage Road)
 - (3) Show Location of (*): All Existing Structures on your Property
 - (4) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
 - (5) Show: (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 - (6) Show any (*): (*) Wetlands; or (*) Slopes over 20%
 - (7) Show any (*):



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	143 Feet	Setback from the Lake (ordinary high-water mark)	376 Feet
Setback from the Established Right-of-Way	N/A Feet	Setback from the River Stream, Creek	Feet
Setback from the North Lot Line	63 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	129 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	162 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	268 Feet	Setback to Well	210 Feet
Setback to Drain Field	268 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.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:	
Permit Denied (Date):		Reason for Denial:			
Permit #: 15-0260	Permit Date: 7-21-15				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming 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 Inspection Record:	<input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No Mitigation Required Mitigation Attached Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #: Were Property Lines Represented by Owner Was Property Surveyed Zoning District Lakes Classification (R1) (2)	<input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No
Date of Inspection: 7/17		Inspected by: Markley			
Condition(s) Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be:					
May not be used for human habitation. No water under pressure in structure.					
Signature of Inspector: John Markley		Date of Approval: 7/15			
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>	
Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>	