

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
 RECEIVED
 Date Stamp (Received)
 JUN 17 2016
 BAYFIELD Co. Zoning Dept.

ENTERED
 Permit #: 16-0161
 Date: 6-21-16
 Amount Paid: \$339
 Refund: \$175
 6-21-16

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

Owner's Name: ERLAND LINDELOF
Mailing Address: W7450 COUNTY ROAD P, LAPSWILL WI 54848
City/State/Zip: LAPSWILL WI 54848
Telephone: 715 533-5359
Cell Phone: 715 364 2435

Address of Property: 70715 BULL ROCK ROAD
Contractor: VERDERMAN CONSTRUCTION
Contractor Phone: 715 563 2511
Plumber: ORV BOTTE N
Plumber Phone: 715 364 2435
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) PIN: (23 digits) 04-038 2 48 09 31 1 20 00 00
 SE 1/4, NE 1/4 Gov't Lot _____ Lot(s) _____ Vol & Page _____ Lot(s) No. _____ Block(s) No. _____
 Section 31 Township 48 N, Range 09 W Town of: BULL Lot Size 200 x 100 Acreage 2

Shoreland Is Property/Land within 300 Feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue 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: _____ feet
 Non-Shoreland

Recorded Document: (i.e. Property Ownership) Volume 174 Page(s) 635
 Subdivision: _____

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
\$13,500	<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 type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: SEPTIC <input type="checkbox"/> Privy (Pit) 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: 42 Width: 40 Height: 16'
Proposed Construction: Length: _____ Width: _____ Height: _____

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property) <input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2 nd) Porch with a Deck with (2 nd) Deck with Attached Garage	(38 x 42) (8 x 28) (12 x 14) (X X) (X X) (X X) (X X)	1176 224 168))))
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities) <input type="checkbox"/> Mobile Home (manufactured date) _____ <input type="checkbox"/> Addition/Alteration (specify) _____ <input type="checkbox"/> Accessory Building (specify) _____ <input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	(X X) (X X) (X X) (X X) (X X))))))
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Special Use: (explain) _____ <input type="checkbox"/> Conditional Use: (explain) _____ <input type="checkbox"/> Other: (explain) _____	(X X) (X X) (X X))))

Secretarial Staff
 FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES. I/we hereby acknowledge that I/we 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 acknowledge that I/we 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.

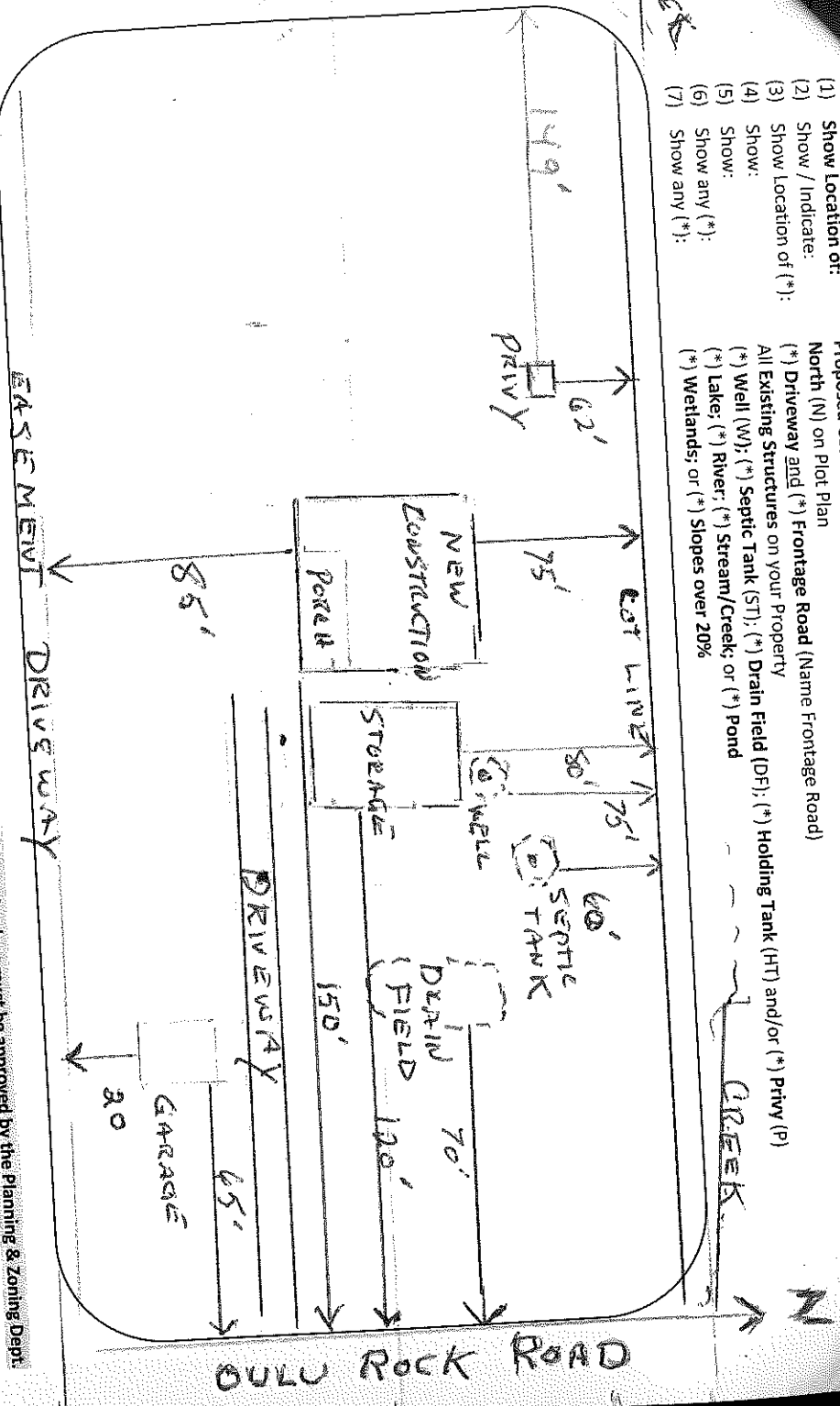
Owner(s): Erland S. LindeloF
 (if there are Multiple Owners listed on the Deed All Owners must sign or legals) of authorization must accompany this application)
 Authorized Agent: _____ Date: April 14, 2016

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
 Address to send permit: W7450 County Road P Lapswill WI 54848
 Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Below: Draw or Sketch your Property (regardless of what you are applying for)

- 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 (*):



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

Please complete (1) - (7) above (prior to continuing)
 (8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	150' Feet	Setback from the Lake (ordinary high-water mark)	160' Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	75' Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	85' Feet	Setback from Wetland	20% Slope Area on property
Setback from the West Lot Line	150' Feet	Elevation of Floodplain	Feet
Setback from the East Lot Line	60' Feet	Setback to Well	75' Feet
Setback to Septic Tank or Holding Tank	70' Feet		
Setback to Drain Field	60' Feet		
Setback to Privy (Portable, Composting)	62' 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 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: 3107201 # of bedrooms: 2 Sanitary Date: APPROVAL 5.25.16

Permit Denied (Date): _____ Reason for Denial: _____

Permit #: 16-0161 Permit Date: 6-21-16

Is Parcel a Sub-Standard lot Yes No one illegal lot to south required to join to this lot to abate

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

Is Structure Non-Conforming Yes No NO

Granted by Variance (B.O.A.) Case #: _____ Previously Granted by Variance (B.O.A.) Yes No

Was Parcel Legally Created Yes No 330 feet Were Property Lines Represented by Owner Yes No

Was Proposed Building Site Delineated Yes No 330 feet Was Property Surveyed Yes No

Inspected by: Jason Beck, MURPHY

Inspected by: Yes No (If No they need to be attached)

Conditions: Town, Committee or Board Conditions Attached? Yes No

Date of Inspection: 5.25.16

Zoning District: (As.1)

Lakes Classification (by AD): _____

Date of Re-Inspection: _____

Signature of Inspector: _____
 Date of Approval: 6.5.25.16

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

be located minimum of 75 ft from north property line.