

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County Planning and Zoning Dept.
 PO Box 58 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

RECEIVED
 JUN 23 2016

Bayfield Co. Zoning Dept.

Permit #:	16-0182
Date:	16-20-16
Amount Paid:	\$175
Refund:	16-20-16

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: Scott et al Mailing Address: Same City/State/Zip: Drummond, WI 54832 Telephone: 303 885 0960

Address of Property: 46035 Kritis Point City/State/Zip: Drummond, WI 54832 Cell Phone: 303 885 0960

Contractor: Drummond, WI Contractor Phone: Plumber: Plumber Phone: Plumber:

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 Legal Description: (Use Tax Statement) 04-018-2-44-07-33-3 00-179-2000 Volume 1125 Page(s) 466 PIN: (23 digits) 018-2-44-07-33-3 Recorded Document: (i.e. Property Ownership) 1125 466

Gov't Lot 10 Lot(s) 18 CSM _____ Vol & Page _____ Lot(s) No. _____ Block(s) No. _____ Subdivision: Galle's good lot 18

Section 33, Township 44 N, Range 2 W Town of: Drummond Lot Size _____ Acreage .316

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or landward side of Floodplain? _____ feet Distance Structure is from Shoreline: _____ feet

Is Property/Land within 1000 feet of Lake, Pond or Flowage _____ feet Distance Structure is from Shoreline: _____ feet

If yes---continue If yes---continue

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
\$ <u>1500</u>	<input checked="" type="checkbox"/> New Construction <input checked="" type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> 1-Story <input checked="" type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-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 Specify Type: <u>_____</u> <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>SEW</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 type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 35 Width: 10 Height: 4'

Proposed Construction: Length: _____ Width: _____ Height: _____

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) Porch with a Deck with (2 nd) Deck with Attached Garage	(<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>)	(<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>) (<u> </u>)
<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) <u>_____</u> Addition/Alteration (specify) <u>Boysie patio w/Deck</u> Accessory Building (specify) <u>_____</u>	(<u> </u>) (<u> </u>) (<u>10 X 23</u>) (<u> </u>)	(<u> </u>) (<u> </u>) (<u>230</u>) (<u> </u>)
<input type="checkbox"/> Municipal Use	Accessory Building Addition/Alteration (specify) <u>_____</u>	(<u> </u>) (<u> </u>)	(<u> </u>) (<u> </u>)
Rec'd for Issuance	Special Use: (explain) <u>_____</u> Conditional Use: (explain) <u>_____</u> Other: (explain) <u>_____</u>	(<u> </u>) (<u> </u>) (<u> </u>)	(<u> </u>) (<u> </u>) (<u> </u>)
JUN 30 2016	Secretarial Staff	(<u> </u>) (<u> </u>)	(<u> </u>) (<u> </u>)

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.

Owners: John Hebert Date 6/23/16
 (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 _____
 If you recently purchased the property send your Recorded Deed _____
 Copy of Tax Statement

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 (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
- (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**



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	230 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	58 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	25 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	52 Feet	20% Slope Area on Property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	230 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	107 Feet	Setback to Well	Feet
Setback to Drain Field	157 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.

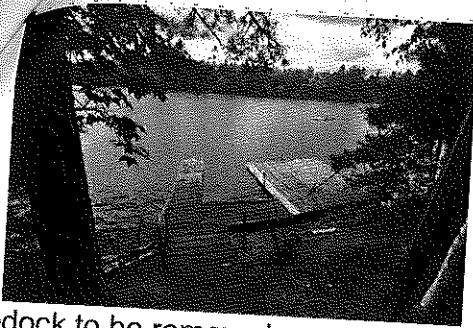
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).

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 #: 16-0188	Permit Date: 10-30-16			
Is Parcel a Sub-Standard Lot Is Parcel In Common Ownership	<input checked="" type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/contiguous lots)	<input type="checkbox"/> No <input checked="" type="checkbox"/> No	Mitigation Required Mitigation Attached:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Granted by Variance (B.O.A.)	Case #:	Previously Granted by Variance (B.O.A.)	Case #:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Inspection Record:	Replacing Peho w/ deck over it.			
Date of Inspection:	6/23/16	Inspected by:	[Signature]	
Condition(s): Town, Committee or Board Conditions Attached?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(If No they need to be attached.)		
Must get WDC IP needed				
Signature of Inspector:	[Signature]			Date of Approval: 6/29/16
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>



exist. 224 sq. ft. pier to be removed

dock to be removed

existing impervious surfaces

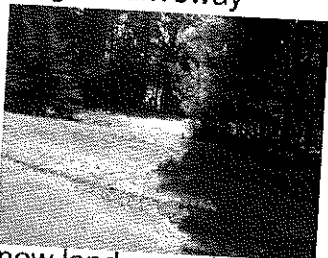
existing house: 1250 sq. ft.
 existing garage: 850 sq. ft.
 existing driveway: 2812 sq. ft.
 total impervious: 4912 sq. ft.

proposed impervious surfaces

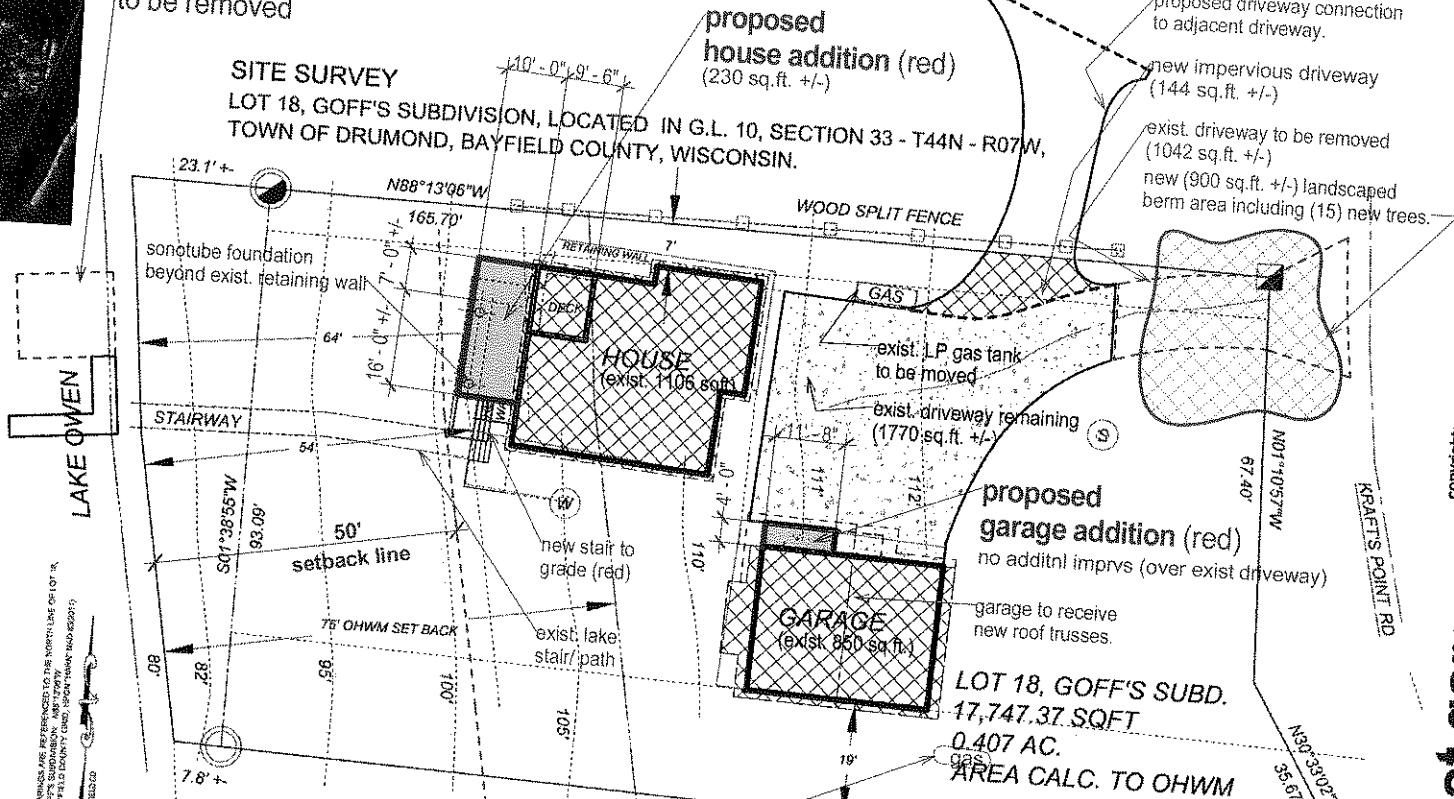
proposed house: 1480 sq. ft.
 proposed garage: 886 sq. ft.
 proposed driveway: 1914 sq. ft.
 total impervious: 4280 sq. ft.
 (632 sq. ft. reduction of impervious)



original driveway



new landscape berm



CLIENT: KIM SCOTT
 SCALE: 1" = 20'
 DATE: 12/2/2014
 FILE: 334107.dwg

North
 DESIGN AND SURVEYING
 11549 81st
 WISCONSIN

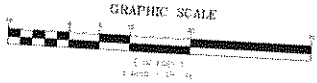
- LEGEND**
- FOUND RAILROAD SPIKE
 - FOUND 3/4" O.D. IP
 - FOUND 1" O.D. IP
 - FOUND 2" PINCHED IP

proposed relocation of L.P. gas tank (verify local setbacks to property lines & bldgs)

SURVEYOR'S CERTIFICATE
 I, TODD C. GOOD, A REGISTERED LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFY THAT THIS MAP IS A CORRECT REPRESENTATION OF THE LAND SURVEYED, AND THE DIVISION THEREUP, UNDER THE DIRECTION OF KIM SCOTT.

TODD C. GOOD
 TODD C. GOOD
 REGISTERED LAND SURVEYOR
 WISCONSIN REG. # 9189
 APRIL 1974, D154

SHEET 1 OF 1



site plan

1" = 20'-0"



building permit set

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guest garage

G1402 2015.02.10
Scott Cabin
 46045 Krafts Point Road
 Cable, Wisconsin 54821

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