

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

Short fees - Imp

APPLICATION FOR PERMIT  
 BAYFIELD COUNTY, WISCONSIN

Date stamp: AUG 22 2016

Bayfield Co. Zoning Dept.



Permit #:	116-0318
Date:	9-20-16
Amount Paid:	\$178
Refund:	

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: WILLIAM J HORWITZER SR Mailing Address: 40 BOB 62 City/State/Zip: DRUMMOND WIS 53832 Telephone: 715 73356023

Address of Property: 10700 COUNTY HWY N City/State/Zip: DRUMMOND WI 53832 Contractor Phone: 715 2742358 Plumber: 816 SH 5704

Contractor: NEW LAM BUILDING FAC Agent Phone: 715 2742358 Agent Mailing Address (include City/State/Zip): DRUMMOND Written Authorization Attached:  Yes  No

Authorized Agent: (person Signing Application on behalf of Owner(s))

PROJECT LOCATION: Legal Description: (Use Tax Statement) 1/4, 1/4 Gov't Lot 2 Lot(s) 2 CSM 909 Vol & Page 6/100 Lot(s) No.  Block(s) No.  Subdivision:  Recorded Document: (i.e. Property Ownership) 04-015-2-45-02-34-1050060300 Volume 1150 Page(s) 2502

Section 34, Township YS N. Range 8 W Town of: DRUMMOND Lot Size  Acreage .917

8/6 931-0823

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

Non-Shoreland  Is Property/Land within 1000 feet of Lake, Pond or Flowage  If Yes---continue  If Yes---continue

Distance Structure  Is from Shoreline: 100+ feet  Distance Structure  Is from Shoreline: 100+ 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
\$ <u>21,500</u>	<input 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 type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: <u></u> <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input checked="" type="checkbox"/> Compost Toilet	<input type="checkbox"/> City <input type="checkbox"/> Well <input checked="" type="checkbox"/> WELLS
	<input checked="" type="checkbox"/> GARAGE	<input checked="" type="checkbox"/> 2-1/2				

Existing Structure: (if permit being applied for is relevant to it) Length: 40' Width: 30' Height: 12'

Proposed Construction: Length:  Width:  Height:

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

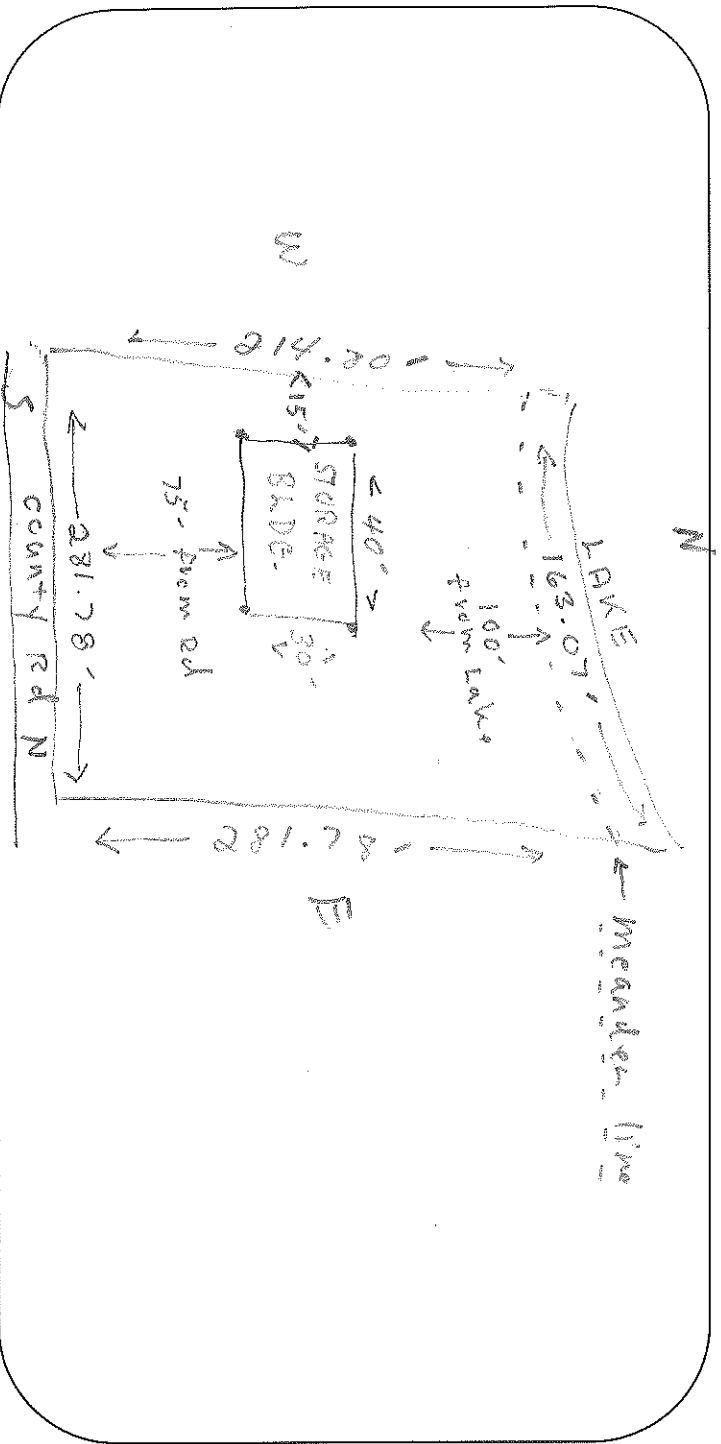
Owner(s): William J Horwitzer Sr Date 16 Aug 16  
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: William J Horwitzer Sr Date   
 (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: 480 W 49th Wisconsin Ave Tomahawk WI 54112 Attach Copy of Tax Statement  
 if you recently purchased the property send your Recorded Deed

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

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) or 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	75 Feet	Setback from the Lake (Ordinary high-water mark)	100 Feet
Setback from the Established Right-of-Way		Setback from the River Stream Creek	
Setback from the North Lot Line	160.1 Feet	Setback from the Bank or Bluff	
Setback from the South Lot Line	75 Feet	Setback from Wetland	
Setback from the West Lot Line	15 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	95.0 Feet	Elevation of Floodplain	
Setback to Septic Tank or Holding Tank		Setback to Well	
Setback to Drain Field			
Setback to Privy (Portable, Composting)			

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:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: <b>16-0818</b>		Permit Date: <b>9-20-16</b>		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/contiguous lots)	<input type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Case #:	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Parcel Legally Created		<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: <b>Staked + mowed area</b>		Inspected by: <b>RL</b>	Zoning District	( <b>21</b> )
Date of Inspection: <b>8-23-16</b>			Lakes Classification	( <b>3</b> )
Conditions (Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - If No they need to be attached.)			Date of Re-Inspection:	
<b>NOT for human habitation</b>				
<b>NO water under pressure</b>				
Signature of Inspector: <b>Josh Gault</b>	Holder for TBA: <input type="checkbox"/>	Holder for Affidavit: <input type="checkbox"/>	Holder for Fees: <input type="checkbox"/>	Date of Approval: <b>8/31/16</b>
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Holder for Fees: <input type="checkbox"/>	<input type="checkbox"/>