

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  
 Stamp (Received)  
 MAY 13 2016  
 Bayfield Co. Zoning Dept.



|              |              |
|--------------|--------------|
| Permit #:    | 116-03206    |
| Date:        | 9-23-16      |
| Amount Paid: | \$1008-26-16 |
| 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 → <input checked="" type="checkbox"/> LAND USE |  | <input type="checkbox"/> SANITARY                           |  | <input type="checkbox"/> PRIVY                      |  | <input type="checkbox"/> CONDITIONAL USE        |  | <input type="checkbox"/> SPECIAL USE  |  | <input type="checkbox"/> B.O.A.  |  | <input type="checkbox"/> OTHER   |  |
| Owner's Name:<br>STEVE BIGGERS + ALAN BEAL                              |  | Mailing Address:<br>5470 Cathcart Dr<br>EVELLSTONE WI 53331 |  | City/State/Zip:<br>Iron River WI 54847              |  | Telephone:<br>952-474-5420                      |  | Cell Phone:   |  | Plumber Phone:   |  | Written Authorization Attached<br><input type="checkbox"/> Yes <input type="checkbox"/> No   |  |
| Address of Property:<br>9285 Willardwood Campground                     |  | Contractor Phone:   |  | Plumber:  |  | Agent Mailing Address (include City/State/Zip): |  | Recorded Document: (i.e. Property Ownership)<br>Volume 1149 Subdivision:<br>Page(s) 337 321A5 |  | Authorized Agent: (Person Signing Application on behalf of Owner(s))                                   |  | Agent Phone:   |  |
| PROJECT LOCATION<br>SE 1/4, NE 21/4                                     |  | Gov't lot   |  | Lot(s)  |  | ESM   |  | Vol & Page  |  | Lot(s) No.   |  | Block(s) No.   |  |
| Section 16, Township 47 N, Range 8 W                                    |  | Town of:<br>Iron River                                      |  | PIN: (23 digits)<br>04-024-2-47-05-16-2 04-000-0200 |  | Distance Structure is from Shoreline:<br>feet   |  | Distance Structure is from Shoreline:<br>feet   |  | Is Property in Floodplain Zone?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | Are Wetlands Present?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |

|  |   |  |  |                                       |  |  |  |                    |                        |                |
|--|---|--|--|---------------------------------------|--|--|--|--------------------|------------------------|----------------|
| Value at Time of Completion<br>* include donated time & material<br>\$ 134,600 | Project   | # of Stories and/or basement   | Use  | # of bedrooms                         | What Type of Sewer/Sanitary System Is on the property? | Water  | Existing Structure: (if permit being applied for, is relevant to it) |                    | Proposed Construction: |                |
|  |   |  |  |                                       |  |  | Length:  | Width:             | Length:                | Width:         |
| <input checked="" type="checkbox"/> Shoreland                                  | <input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?<br><input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage | <input 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"/> (New) Sanitary                              | Proposed Structure | Dimensions             | Square Footage |
| <input type="checkbox"/> Non-Shoreland   | <input type="checkbox"/> Addition/Alteration  | <input type="checkbox"/> 1-Story + Loft  | <input checked="" type="checkbox"/> Year Round | <input checked="" type="checkbox"/> 2 | <input type="checkbox"/> (New) Sanitary                | <input type="checkbox"/> Specify Type: _____ | <input type="checkbox"/> Sanitary (Exists)                           |                    |                        |                |
|  | <input type="checkbox"/> Conversion   | <input type="checkbox"/> 2-Story   | <input type="checkbox"/> _____                 | <input type="checkbox"/> 3            | <input type="checkbox"/> Sanitary (Exists)             | <input type="checkbox"/> Specify Type: _____ | <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)     |                    |                        |                |
|  | <input type="checkbox"/> Relocate (existing bldg)   | <input checked="" type="checkbox"/> Basement   | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> Portable (w/service contract) | <input type="checkbox"/> _____               | <input type="checkbox"/> Compost Toilet                              |                    |                        |                |
|  | <input type="checkbox"/> Run a Business on Property   | <input type="checkbox"/> Foundation  | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input checked="" type="checkbox"/> Residential Use   | <input checked="" type="checkbox"/> with a Porch   | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input checked="" type="checkbox"/> REC'D FOR ISSUANCE  | <input type="checkbox"/> with (2 <sup>nd</sup> ) Porch   | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Commercial Use   | <input type="checkbox"/> with a Deck   | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Commercial Use   | <input type="checkbox"/> with (2 <sup>nd</sup> ) Deck  | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Commercial Use   | <input type="checkbox"/> with Attached Garage  | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Municipal Use  | <input type="checkbox"/> Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities) | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Municipal Use  | <input type="checkbox"/> Mobile Home (manufactured date)   | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Municipal Use  | <input type="checkbox"/> Addition/Alteration (specify)   | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Municipal Use  | <input type="checkbox"/> Accessory Building (specify)  | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Municipal Use  | <input type="checkbox"/> Accessory Building Addition/Alteration (specify)  | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Municipal Use  | <input type="checkbox"/> Special Use: (explain)  | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input type="checkbox"/> Municipal Use  | <input type="checkbox"/> Conditional Use: (explain)  | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |
|  | <input checked="" type="checkbox"/> Other: (explain)  | <input checked="" type="checkbox"/> Path + stairs to LAKE  | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____        | <input type="checkbox"/> _____                         | <input type="checkbox"/> _____               | <input type="checkbox"/> _____                                       |                    |                        |                |

Proposed Use:  Residential Use

Proposed Structure:  Principal Structure (first structure on property)

Dimensions: ( ) X ( )

Square Footage: ( )

Other: (explain) Path + stairs to LAKE

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 (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): Steve Biggers + Alan Beal Date 5-11-16  
 (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: \_\_\_\_\_

Copy of Tax Statement Attached

APPLICANT: PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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) 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%

pls. see attached

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 | 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             | Feet        | Setback from the Bank or Bluff                   | Feet        |
| Setback from the South Lot line             | Feet        | Setback from Wetland                             | Feet        |
| Setback from the West Lot line              | Feet        | 20% Slope Area on property                       | Feet        |
| Setback from the East Lot line              | Feet        | Elevation of Floodplain                          | Feet        |
| Setback to Septic Tank or Holding Tank      | Feet        | Setback to Well                                  | 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.

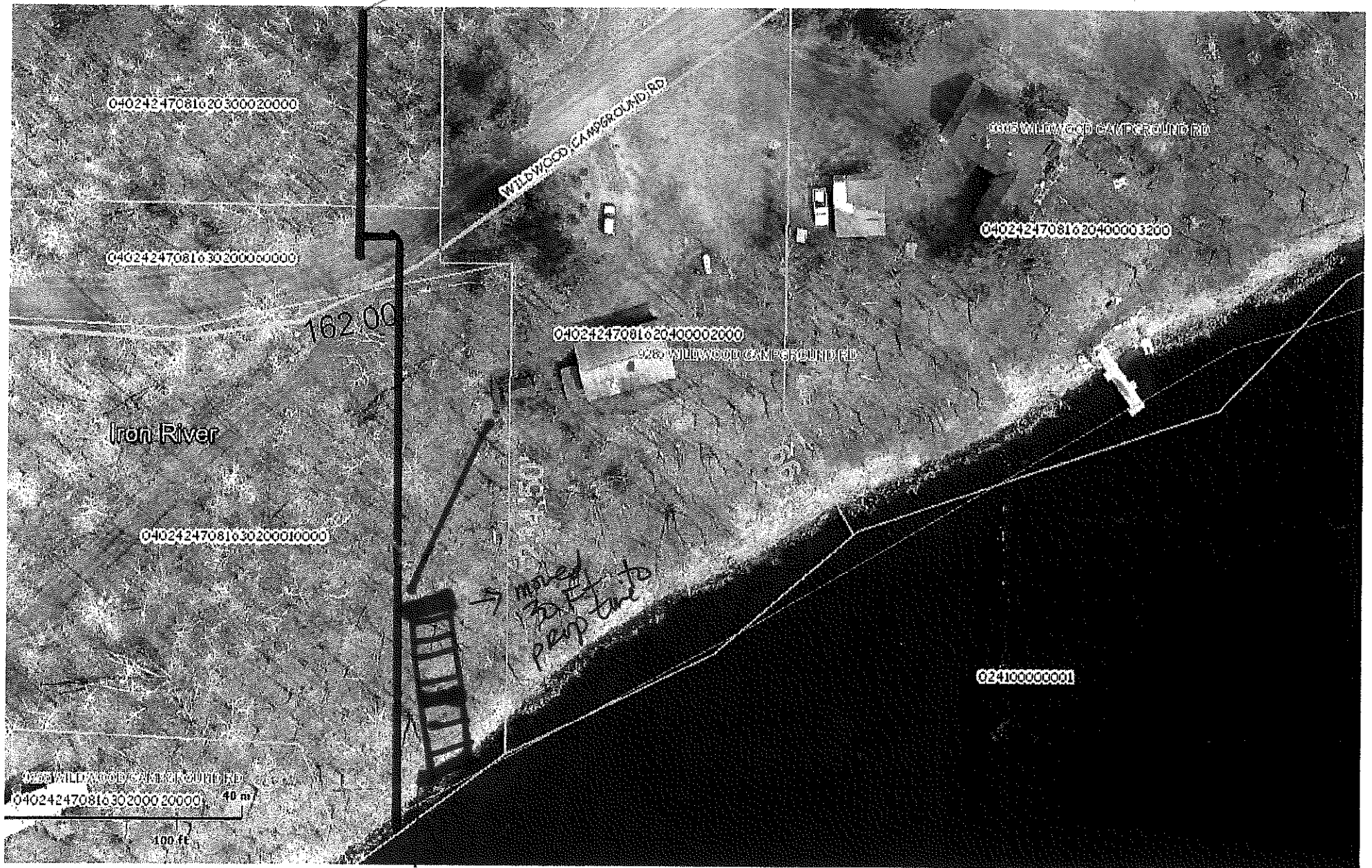
Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable 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:  | # of bedrooms:   | Sanitary Date:   |  |
| Permit Denied (Date):  |   | Reason for Denial:  |  |  |  |
| Permit #: <u>16-0386</u>   |   | Permit Date: <u>9-23-16</u>   |  |  |  |
| <input type="checkbox"/> Parcel a Sub-Standard Lot<br><input type="checkbox"/> Parcel In Common Ownership<br><input type="checkbox"/> Is Structure Non-Conforming  | <input type="checkbox"/> Yes (Deed of Record)<br><input type="checkbox"/> Yes (Fused/Contiguous Lot(s))<br><input type="checkbox"/> No<br><input type="checkbox"/> No<br><input checked="" type="checkbox"/> No | <input type="checkbox"/> Mitigation Required<br><input type="checkbox"/> Mitigation Attached  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <input type="checkbox"/> Affidavit Required<br><input type="checkbox"/> Affidavit Attached                                     | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |
| <input type="checkbox"/> Granted by Variance (B.O.A.)<br><input checked="" type="checkbox"/> Case #:   |   | <input type="checkbox"/> Previously Granted by Variance (B.O.A.)<br><input checked="" type="checkbox"/> Case #:   |  |  |  |
| <input checked="" type="checkbox"/> Was Parcel Legally Created<br><input type="checkbox"/> Was Proposed Building Site Delineated   |   | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> No<br><input type="checkbox"/> No                              |  | <input checked="" type="checkbox"/> Were Property Lines Represented by Owner<br><input type="checkbox"/> Was Property Surveyed | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No |
| Inspection Record: <u>original submitted did not meet side yard setback. allowed to go 50 ft from property line. Staining was also shortened.</u>  |   | Inspected by: <u>[Signature]</u>  |  | Zoning District (R-1)<br>Dikes Classification (3)  |  |
| Date of Inspection: <u>9-20-15</u>   |   | Inspected by: <u>[Signature]</u>  |  | Date of Re-Inspection:   |  |
| Condition(s) Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If NA they need to be attached)  |   |   |  |  |  |
| Best Management Practices shall be employed during construction. There shall be no disturbance activities, + vegetation removal shall be minimized. Staff may shut BE IN COMPLIANCE WITH CODED. HANDLES ARE ONLY ALLOWED WHERE |   |   |  |  |  |
| Signature of inspector:  |   | <input checked="" type="checkbox"/> Hold For Sanitary: <input type="checkbox"/> Hold For Affirm: <input type="checkbox"/> Hold For Fees: <input type="checkbox"/> |  | Date of Approval: <u>9-23-16</u>   |  |

THESE MAY BE A SAFETY CONCERN & SHALL BE LESS THAN 40 SG.



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It is our desire to make the smallest impact possible to acquire a safe approach to our lake front. We do not intend to clear a viewing area beyond any brush that may need to be cleared to create said lake access. Our plan precludes the need to remove any large trees or disturb the natural ravine for intended water flow.