

SUBMITTER: 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
 SEP 19 2016

| | |
|--------------|----------|
| Permit #: | 16-03288 |
| Date: | 9-26-16 |
| Amount Paid: | 75.00 |
| Refund: | 75.00 |

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 BY BAYFIELD CO. Zoning Dept.

BAYFIELD CO. Zoning Dept.

TYPE OF PERMIT REQUESTED: LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: Charles A. Porter Mailing Address: 26865 State Hwy 118 Ashland, WI, 54806 Telephone: 715-746-2700

Address of Property: 26865 State Hwy 118 City/State/Zip: 11 11 11 Cell Phone: 715-492-2270

Contractor: Copper Creek Contractor Phone: 715-413-1014 Plumber: 715-492-2270

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: 715-413-1014 Agent Mailing Address (include City/State/Zip): 715-492-2270 Written Authorization Attached Yes No

PROJECT LOCATION: NE 1/4, NE 1/4 Gov't Lot: 1 Lot(s): 1 CSM: 1 Vol & Page: 1 Lot(s) No.: 1 Block(s) No.: 1 Subdivision: 1 Recorded Document: (i.e. Property Ownership) Volume: 1164 Page(s): 686

Section: 5, Township: 46 N, Range: 5 W Town of: Kelliy Lot Size: 2.68 Acreage: 2.68

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? → 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

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>55,000</u> | <input checked="" type="checkbox"/> New Construction | <input checked="" type="checkbox"/> 1-Story | <input type="checkbox"/> Seasonal <input 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 checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Drainfield/Well</u> | <input type="checkbox"/> City <input checked="" type="checkbox"/> Well |
| | <input type="checkbox"/> Addition/Alteration | <input type="checkbox"/> 1-Story + Loft | | | | |
| | <input type="checkbox"/> Conversion | <input type="checkbox"/> 2-Story | | | | |
| | <input type="checkbox"/> Relocate (existing bldg) | <input type="checkbox"/> Basement | | | <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) | |
| | <input type="checkbox"/> Run a Business on Property | <input type="checkbox"/> No Basement | | | <input type="checkbox"/> Portable (w/service contract) | |
| | <input checked="" type="checkbox"/> <u>Rebuild Barn</u> | <input type="checkbox"/> Foundation | | | <input type="checkbox"/> Compost Toilet | |
| | <input checked="" type="checkbox"/> <u>Rebuild Barn</u> | <input checked="" type="checkbox"/> <u>Slab on Gravel</u> | | | <input type="checkbox"/> None | |

Existing Structure: (if permit being applied for is relevant to it) Length: 50' Width: 36' Height: 16'

Proposed Construction: Length: 50' Width: 36' Height: 16'

| Proposed Use | Proposed Structure | Dimensions | Square Footage |
|-------------------------------------|--|---------------------------|----------------|
| <input 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 nd) Porch | () () | () |
| <input type="checkbox"/> | with a Deck | () () | () |
| <input type="checkbox"/> | with (2 nd) Deck | () () | () |
| <input type="checkbox"/> | with Attached Garage | () () | () |
| <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 checked="" type="checkbox"/> | Accessory Building Addition/Alteration (specify) <u>Horse Barn</u> | (<u>36</u> X <u>50</u>) | <u>1,800</u> |
| <input type="checkbox"/> | Special Use: (explain) | () () | () |
| <input type="checkbox"/> | Conditional Use: (explain) | () () | () |
| <input type="checkbox"/> | Other: (explain) | () () | () |

Residential Issuance
 SEP 26 2016
 Commercial Use
 Municipal Use

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.

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

Owner(s): Charles A. Porter Date: 9-19-2016

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Charles A. Porter Date: 9-19-2016

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

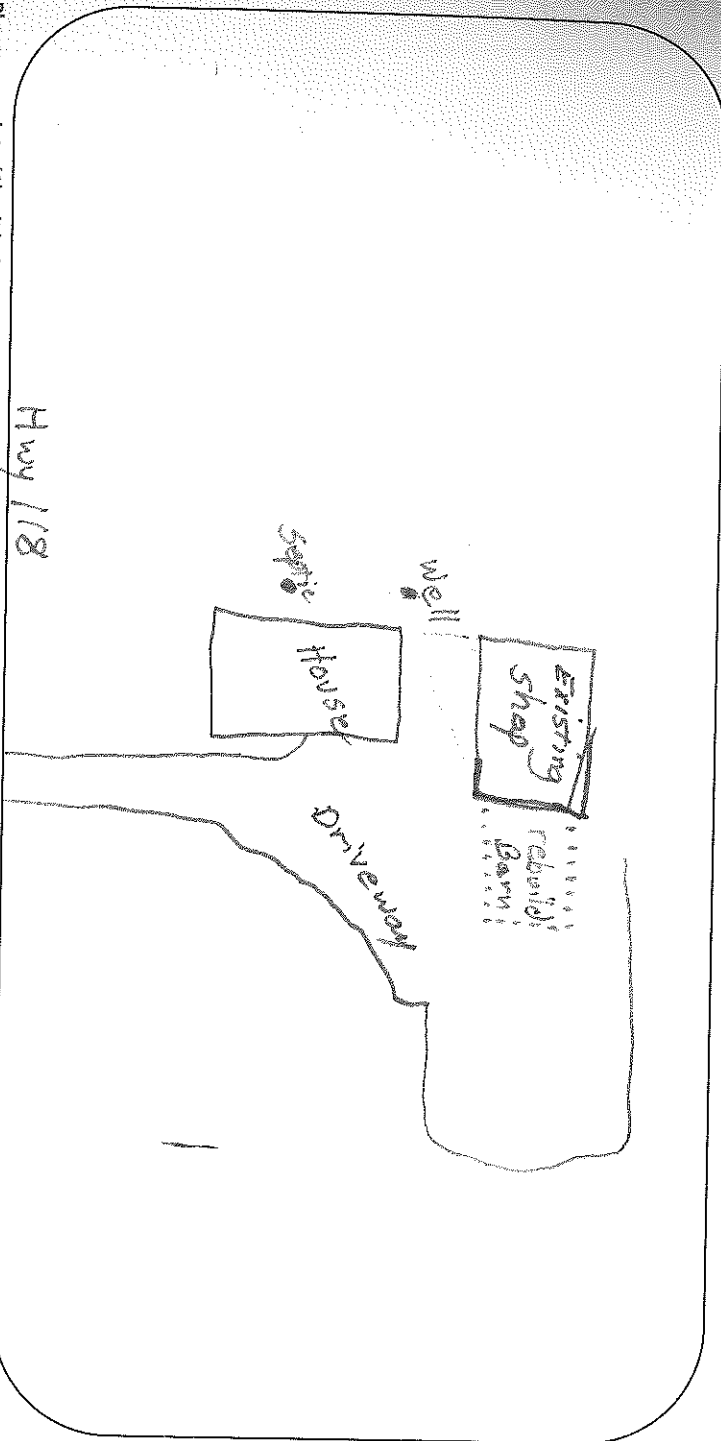
Address to send permit: Attach

Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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)

(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 | 300 Feet | Setback from the Lake (ordinary high-water mark) | Feet |
| Setback from the Established Right-of-Way | 250 Feet | Setback from the River, Stream, Creek | Feet |
| Setback from the North Lot Line | 300 Feet | Setback from the Bank or Bluff | Feet |
| Setback from the South Lot Line | 300 Feet | Setback from Wetland | Feet |
| Setback from the West Lot Line | 150 Feet | 20% Slope Area on property | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Setback from the East Lot Line | 400 Feet | Elevation of Floodplain | Feet |
| Setback to Septic Tank or Holding Tank | | Setback to Well | 75 Feet |
| Setback to Drain Field | 250 Feet | | |
| Setback to Privy (Portable, Composting) | 300 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 Dwelling: 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)

Permit Denied (Date): _____ Sanitary Number: _____ # of bedrooms: _____ Sanitary Date: _____

Permit # 16-5388 Permit Date: 9-26-16

Is Parcel a Sub-Standard Lot Yes (Deed of Record) No

Is Parcel in Common Ownership Yes (Fused/Contiguous Lot(s)) No

Is Structure Non-Conforming Yes No

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

Was Parcel Legally Created Yes No

Was Proposed Building Site Delineated Yes No

Inspection Record: SR

Date of Inspection: 9-26-16 Inspected by: gr

Conditions: Not for human habitation

Signature of Inspector: [Signature] Date of Approval: 9-26-16

Hold For Sanitary: _____ Hold For TBA: _____

Hold For Affidavit: _____ Hold For Fees: _____