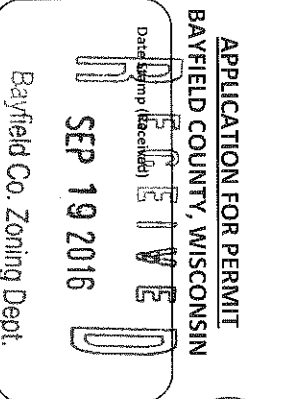


SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Dept.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138



Permit #:	16-0402
Date:	11-4-16
Amount Paid:	\$175
Refund:	11-4-16

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 → <input type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input checked="" type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER		
Owner's Name: Tracey L. Nelson / Linda S.	Mailing Address: 3941 Taylorville Rd # 3157-121 City/State/Zip:	Telephone: 612 845 4113
Address of Property: 90590 Bark Pt. Road	Contractor Phone: Hubster WI 54844	Cell Phone: 612 845 4113
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Randy M. Lund, PE	Agent Phone: 715 209 0369	Agent Mailing Address (include City/State/Zip): PO Box 243, Washburn WI 54891
PROJECT LOCATION: 1/4, 1/4	Legal Description: (Use Tax Statement) Gov't Lot 3, Lot(s) 1, CSM 749, Vol & Page V5/153	Recorded Document: (file: Property Ownership) PIN: (23 digits) 04-014-2-51-07-24-2 05-003-0000
Section 24, Township 51 N, Range 07 W	Town of: CROTON	Volume: 2.5 ac
Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? <input checked="" type="checkbox"/> Property/Land within 1000 feet of Lake, Pond or Flowage	Distance Structure Is from Shoreline: feet: 65 to 75
<input type="checkbox"/> Non-Shoreland	If Yes---continue → If Yes---continue →	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Value at Time of Completion * include donated time & material \$	Project	Use
<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 type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round
<input type="checkbox"/> Stake grading	<input type="checkbox"/> Foundation	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None
Existing Structure: (if permit being applied for is relevant to it) Proposed Construction: Drains / Slopes / etc	Length: Length: Width: Width:	What Type of Sewer/Sanitary System Is on the property? <input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <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
Recreational Use	Proposed Structure	Dimensions
<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 a (2 nd) Deck <input type="checkbox"/> with a Deck <input type="checkbox"/> with Attached Garage	<input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () 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) _____	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <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"/> Municipal Use	<input type="checkbox"/> Special Use: (explain) _____ <input type="checkbox"/> Conditional Use: (explain) _____ <input type="checkbox"/> Other: (explain) _____	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None

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.

Owner(s): _____ **Date:** 9/19/16
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: Randy M. Lund **Date:** 9/19/16
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
Address to send permit: PO Box 243 Washburn WI 54891
 (If you recently purchased the property send your Recorded Deed)

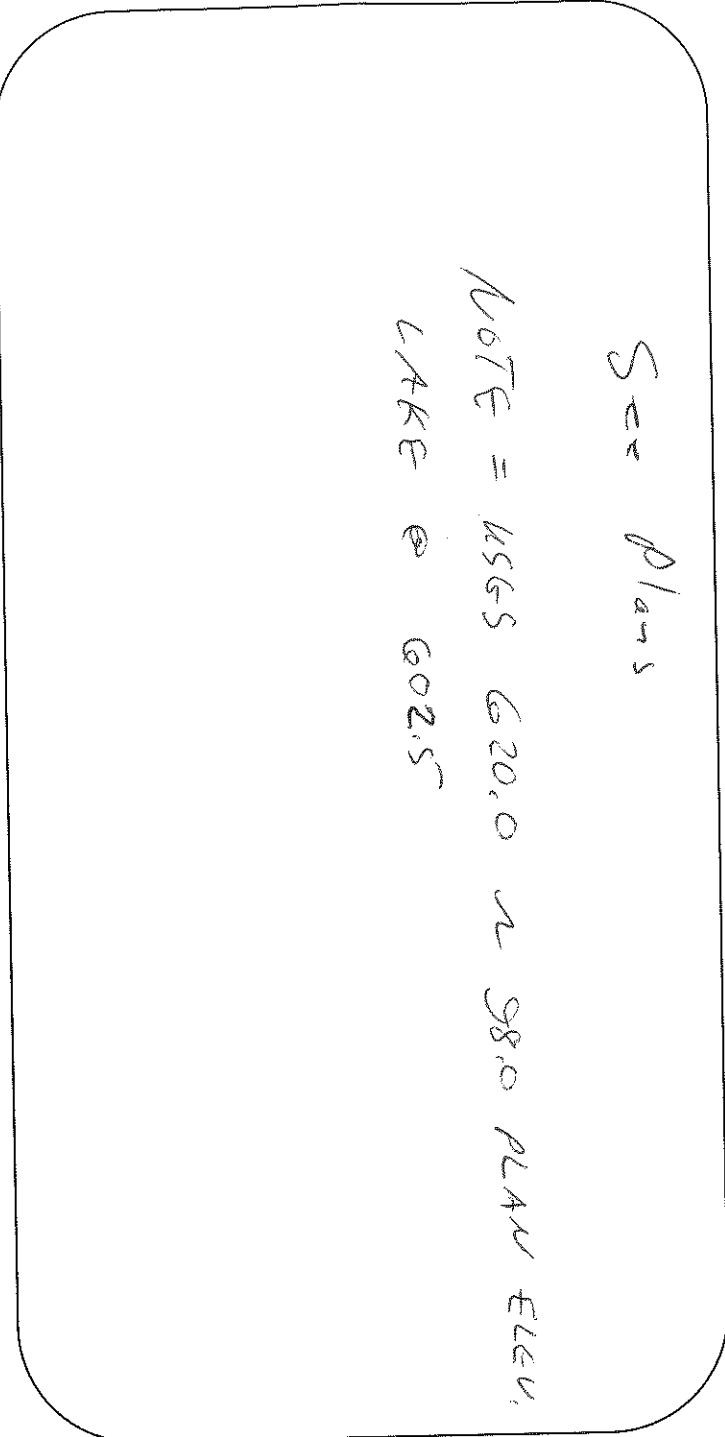
APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

The 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%

See Plans

NOTE = USGS 620.0 ~ 98.0 PLAW ELEV.
LAKE @ 602.5



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	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	<input type="checkbox"/> Yes <input type="checkbox"/> No
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 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 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 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: 367225 # of bedrooms: Sanitary Date: 5-31-00

Permit Denied (Date): Permit Date: 11-4-16

Permit #: 16-04402

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

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

Is Structure Non-Conforming Yes To Top of Bluff No

Granted by Variance (B.O.A.) Yes No Case #: 160134

Was Parcel Legally Created Yes No

Was Proposed Building Site Delineated Yes No

Inspection Record: Decision house is 4-46 FT from top of STANDABLE BLUFF.

Date of Inspection: Inspected by: [Signature]

Condition(s): Town, Committee or Board Conditions Attached? Yes No - (If No they need to be attached)

NO LAND DISTURBING ACTIVITY OR DISAPPEARANCE OF GROUNDWATER IS ALLOWED ON ADJACENT PARCELS. IT IS HIGHLY ADVISED THE OWNER STOP MOWING + REWEEDING LAWNWARD OF THE TOP OF THE BLUFF.

Signature of Inspector: [Signature]

Hold For Sanitary: Hold For TR: Hold For Affidavit: Hold For Fees: Date of Approval: 11-3-16

elson/Hall

Legend

Feature 1

Bark Point Rd

Google earth

© 2016 Google

200 ft

