

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

**HTF**

\$75 + \$75 STATE

**APPLICATION FOR PERMIT**  
 BAYFIELD COUNTY, WISCONSIN

Date Stamp (Required)  
**JAN 11 2017**  
 Bayfield Co. Zoning Dept.



Permit #:	17-0008
Date:	1-19-17
Amount Paid:	\$150 1-11-17
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  PRIVATE  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER

Owner's Name: Deb and David Gutsch Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address of Property: 25830 Hwy 178 City/State/Zip: Ashland WI 54806 Cell Phone: \_\_\_\_\_  
 Contractor: \_\_\_\_\_ Contractor Phone: \_\_\_\_\_ Plumber: \_\_\_\_\_ Plumber Phone: \_\_\_\_\_  
 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** Legal Description: (Use Tax Statement) Tax ID# (4-5 digits) 16038 Recorded Deed (i.e. # assigned by Register of Deeds) Document #: \_\_\_\_\_ R: \_\_\_\_\_  
SE 1/4, SE 1/4 Gov't Lot \_\_\_\_\_ Lot(s) \_\_\_\_\_ CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section 31, Township 47 N, Range 5 W Town of: Ellena Lot Size \_\_\_\_\_ Acreage 4/0

Shoreland →  Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If Yes---continue →  
 Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue → Distance Structure Is from Shoreline: \_\_\_\_\_ feet  
 Non-Shoreland

Distance Structure Is from Shoreline: \_\_\_\_\_ feet  
 Distance Structure Is from Shoreline: \_\_\_\_\_ feet  
 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
\$25,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> Municipal/City <input type="checkbox"/> New Sanitary <input checked="" type="checkbox"/> Sanitary/Exists Specify Type: <u>47</u>	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft		<input type="checkbox"/> 3	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story		<input type="checkbox"/> 3	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement		<input checked="" type="checkbox"/> None	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> Foundation		<input type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant to it) Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_  
 Proposed Construction: Length: 50 Width: 40 Height: 12

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use REC'D FOR ISSUANCE <u>JAN 19 2017</u>	<input type="checkbox"/> Principal Structure (first structure on property)	( ) X ( )	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	( ) X ( )	
	<input type="checkbox"/> with Loft	( ) X ( )	
	<input type="checkbox"/> with a Porch	( ) X ( )	
	<input type="checkbox"/> with (2 <sup>nd</sup> ) Porch	( ) X ( )	
	<input type="checkbox"/> with a Deck	( ) X ( )	
	<input type="checkbox"/> with (2 <sup>nd</sup> ) Deck	( ) X ( )	
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( ) X ( )	
	<input type="checkbox"/> Mobile Home (manufactured date)	( ) X ( )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify)	( ) X ( )	
	<input checked="" type="checkbox"/> Accessory Building (specify) <u>Pole Barn</u>	( ) X ( )	<u>2000</u>
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	( ) X ( )	
	<input type="checkbox"/> Special User: (explain)	( ) X ( )	
	<input type="checkbox"/> Conditional Use: (explain)	( ) X ( )	
	<input type="checkbox"/> Other: (explain)	( ) X ( )	

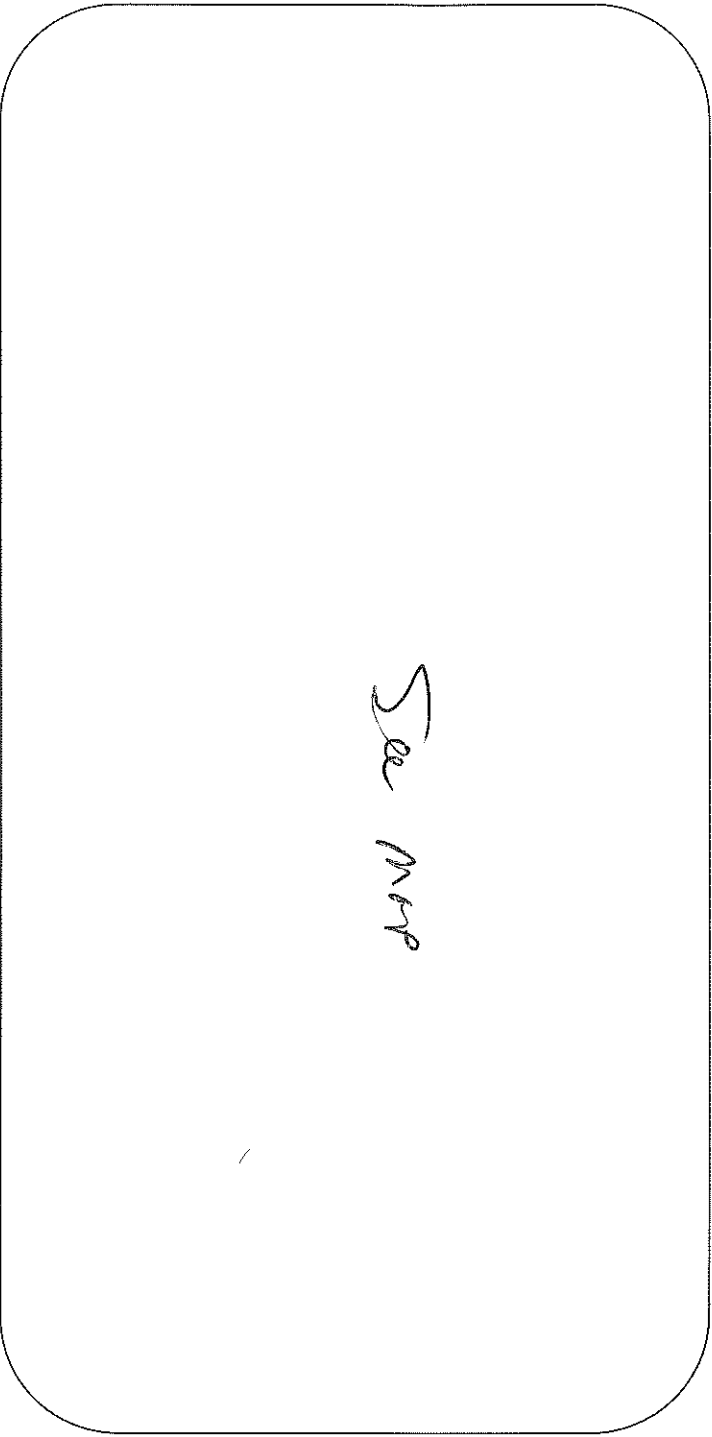
**FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES**  
 I/we declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I/we acknowledge 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 \_\_\_\_\_  
 (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 1-11-17  
 (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

boxed 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 MRP



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	195 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	1146 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	195 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	1681 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	212.9 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>17-0008</u>	Permit Date: <u>11-9-17</u>				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input type="checkbox"/> No (Deed of Record)	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit 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	Affidavit 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 type="checkbox"/> No		
Granted by Variance (B.O.A.)	Case #:	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input 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:	<u>Building up w/o permit</u>				
Date of Inspection:	<u>1-12-18</u>	Inspected by:	<u>DR</u>		
Condition(s): Town, Committee or Board Conditions Attached?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - (If No they need to be attached.)				
<u>Not for human habitation</u>					
<u>No water under pressure</u>					
Signature of Inspector:	<u>Proby</u>				Date of Approval: <u>1-19-17</u>
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>		

(1)  
(2)  
(3)  
(4)

Box data

# Bayfield County Web AppBuilder



December 27, 2016

- |  |                  |                             |                    |
|--|------------------|-----------------------------|--------------------|
| Building                                     | Recorded Map     | State                       | Tie Line           |
| <b>Corner Tie Sheets</b>                     | <b>Road Type</b> | Town                        | Rivers             |
| Section Corner Monument on File              | CFR              | Municipal Boundary          | Douglas Co Parcels |
| Section Corner Monument Referenced on Survey | County           | Section Lines               | Ashland Co Parcel  |
| <b>Survey Maps</b>                           | Federal          | Approximate Parcel Boundary |                    |
| UnRecorded Map                               | Private          | Meander Line                |                    |

