

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**

ENTERED
 Date: MAR 03 2017
 Amount Paid: \$1280 3-3-17

Bayfield Co. Zoning Dept.

Permit #: 17-0041
 Date: 3-9-17
 Amount Paid: \$1280 3-3-17
 Return:

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: Town of Iron River (EGRM Library) Mailing Address: P.O. Box 485 City/State/Zip: Iron River, WI 54847 Telephone: 715 372-6428

Address of Property: 68335 S. Main St City/State/Zip: Iron River, WI 54847 Cell Phone: 715 813-9099

Contractor: TRON RIVER, WI 54847 Plumber: Plumber: Written Authorization Attached Yes No

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Dick Russell Agent Phone: 715 372-6428 Agent Mailing Address (include City/State/Zip): 5600 US HWY 2, Iron River, WI 54847

PROJECT LOCATION Legal Description: (Use Tax Statement) 20426 Tax ID# (4-5 digits) 20426 Recorded Deed (i.e. # assigned by Register of Deeds) R-

Section 7, Township 47 N, Range 8 W Town of: Iron River Subdivision: Original Plat of Iron River Acreage 248

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>248,000</u>	<input type="checkbox"/> New Construction <input checked="" 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 checked="" type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input checked="" 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 type="checkbox"/> Compost Toilet	<input checked="" type="checkbox"/> City <input type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 68 FT Width: 30 FT Height: 18 FT

Proposed Construction: Length: 72 FT Width: 30 FT Height: 27 FT

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	(X)	
<input type="checkbox"/> Residential Use	Residence (i.e. cabin, hunting shack, etc.)	(X)	
<input type="checkbox"/> Residential Use	with Loft	(X)	
<input type="checkbox"/> Residential Use	with a Porch	(X)	
<input type="checkbox"/> Residential Use	with (2 nd) Porch	(X)	
<input type="checkbox"/> Residential Use	with a Deck	(X)	
<input type="checkbox"/> Residential Use	with (2 nd) Deck	(X)	
<input type="checkbox"/> Commercial Use	with Attached Garage	(X)	
<input type="checkbox"/> Commercial Use	Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
<input type="checkbox"/> Commercial Use	Mobile Home (manufactured date)	(X)	
<input checked="" type="checkbox"/> Municipal Use	Addition/Alteration (specify) <u>ADDITION WITH ENTRY VESTIBULE</u>	(20' X 30')	
<input type="checkbox"/> Municipal Use	Accessory Building (specify) <u> </u>	(X)	
<input type="checkbox"/> Municipal Use	Accessory Building Addition/Alteration (specify) <u> </u>	(X)	
<input type="checkbox"/> Municipal Use	Special Use: (explain) <u> </u>	(X)	
<input type="checkbox"/> Municipal Use	Conditional Use: (explain) <u> </u>	(X)	
<input type="checkbox"/> Municipal Use	Other: (explain) <u> </u>	(X)	

REC'D for ISSUANCE MAR 09 2017
 Secretarial Staff

FAILURE TO OBTAIN A PERMIT AT 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): Richard Russell (if there are Multiple Owners listed on the permit All Owners must sign or (pete(s) of authorization must accompany this application)

Authorized Agent: Richard Russell (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date: 3 Mar 2017

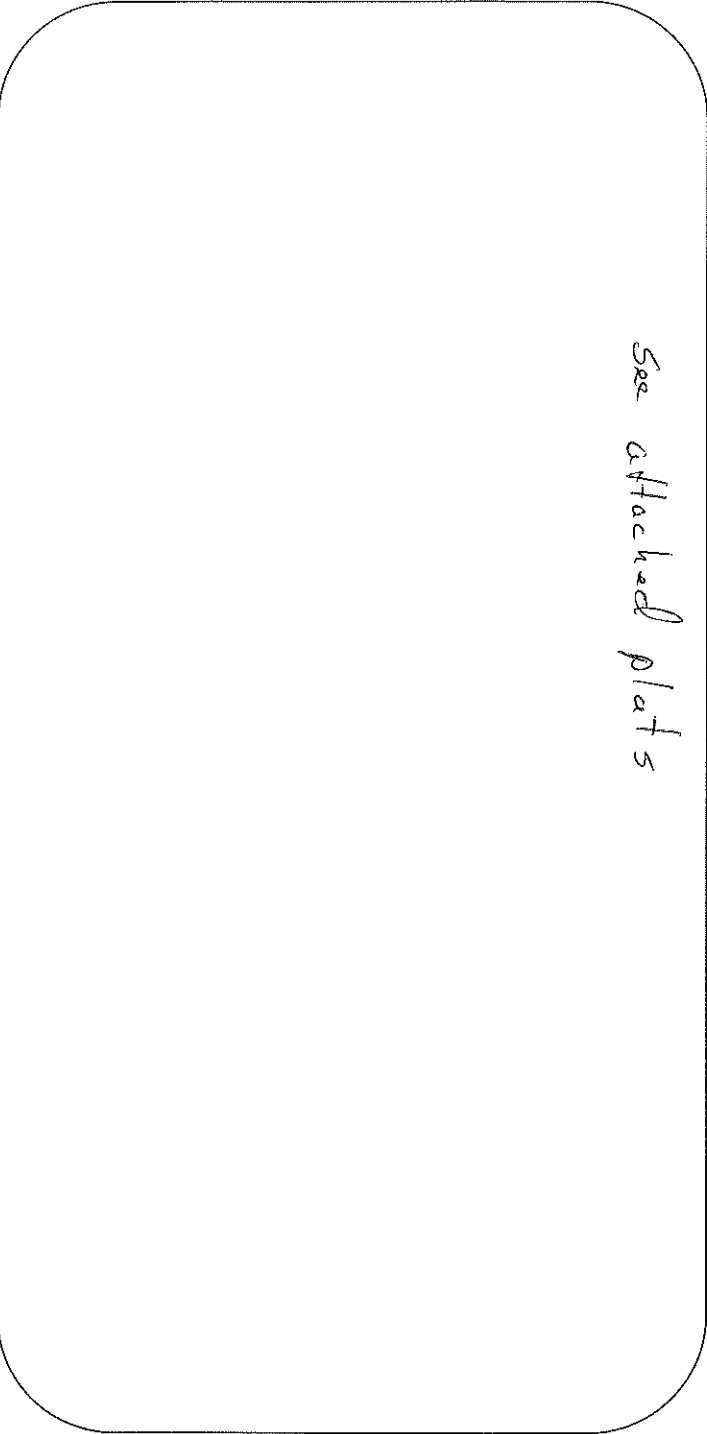
Address to send permit:

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

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 attached plats



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 Sewer easement of Main St	59.3 Feet		
Setback from the Centerline of Platted Road (M.19)	27.4 Feet	Setback from the Lake (ordinary high-water mark)	— Feet
Setback from the Established Right-of-Way (M.19)	26.3 Feet	Setback from the River, Stream, Creek	— Feet
Setback from the East West Right of Way M.19	11.9 Feet	Setback from the Bank or Bluff	— Feet
Setback from the North Lot Line	48.6 Feet		
Setback from the South Lot Line	11.9 Feet	Setback from Wetland	— Feet
Setback from the West Lot Line	11.9 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	13.5 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.

Issuance Information (County Use Only)		Sanitary Number: <u>Municipal</u>	# of bedrooms: _____	Sanitary Date: _____
Permit Denied (Date): _____	Reason for Denial: _____	Permit Date: <u>3-9-17</u>	Inspected by: <u>J. CONROY MURPHY</u>	Date of Re-inspection: _____
Permit #: <u>17-0041</u>	Is Parcel a Sub-Standard Lot: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is Parcel in Common Ownership: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is Structure Non-Conforming: <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is Structure Non-Conforming: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required: <input type="checkbox"/> Yes <input checked="" 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
Granted by Variance (B.O.A.): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Case #: _____	Previously Granted by Variance (B.O.A.): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #: _____	
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	Were Property Lines Represented by Owner: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: <u>1/2 placed/organized pure street beams to this property - covered/covered by stake beam for addition</u>		Zoning District: <u>(C-1)</u>		
Date of Inspection: <u>3-8-17</u>		Lakes Classification: <u>(N/A)</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.)				
Signature of Inspector: <u>[Signature]</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"/> _____				
Date of Approval: <u>3-9-17</u>				

Bayfield County Land Records and GIS (BETA)

Show search results for 77065



0 30 60ft
 683,380.002 449,059.807 Feet