

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

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
 RECEIVED
 MAR 15 2017
 Bayfield Co. Zoning Dept.

ENTERED
 Permit #: 17-0112
 Date: 5-8-17
 Amount Paid: \$1753.457
 Refund:

Blackberry

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: TAMAS K. & NANCY A. MIR Mailing Address: 811 ARLINGTON AV. W. SAINT PAUL/MN/55117 Telephone: 657-487-0257
 Address of Property: AROSTLE BAY ROAD City/State/Zip: BAYFIELD WI/54814 Call Phone: 612-801-1585
 Contractor: RANDY ECKERSON, CHAUN ROCKING Contractor Phone: 715-779-5088 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) 4287 Document #: 4 R 292
 _____ 1/4, _____ 1/4 Gov't Lot _____ Lot(s) 1 GSM 637 Vol & Page 44292 Lot(s) No. _____ Block(s) No. _____ Subdivision: _____
 Section 06, Township 50 N, Range 3 W TOWN of: Bayfield Lot Size 150' x 200' Acreage 0.870

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? Yes No Continue No Structure No
 Is Property/Land within 1000 feet of Lake, Pond or Flowage? Yes No Continue No
 Distance Structure is from Shoreline: _____ feet
 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
\$ _____	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____
	<input type="checkbox"/> SHORELAND	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> None	<input type="checkbox"/> N/A

Existing Structure: (if permit being applied for is relevant to it) Length: _____ Width: _____ Height: _____
 Proposed Construction: Length: _____ Width: _____ Height: _____

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	(X)	
	Residence (i.e. cabin, hunting shack, etc.)	(X)	
	with Loft	(X)	
	with a Porch	(X)	
	with (2 nd) Deck	(X)	
	with a Deck	(X)	
	with (2 nd) Deck	(X)	
	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)	
	Mobile Home (manufactured date)	(X)	
	Addition/Alteration (specify)	(X)	
	Accessory Building (specify)	(X)	
	Accessory Building Addition/Alteration (specify)	(X)	
<input type="checkbox"/> Municipal Use	Special Use: (explain) <u>BUILD DRIVEWAY SHORELAND</u>	(<u>300' x 15'</u>)	<u>4515</u>
	Conditional Use: (explain) <u>SHORELAND</u>	(X)	
	Other: (explain) <u>PER ORDINANCE</u>	(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 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): Tamas & Nancy Mir Date 3/10/2017
 (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 _____
 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%

See attached property exhibit.

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 <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		Feet
Setback to Privy (Portable, Composting)	Feet		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:	# of bedrooms:		Sanitary Date:
Permit Denied (Date):		Reason for Denial:			
Permit #: 17-0112		Permit Date: 5-8-17			
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Case #:		Case #:			
Was Parcel Legally Created	<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
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: STAKE BY SURVEYOR per planning & zoning			
Inspection Record:	PHOTOS ATTACHED				
Date of Inspection:	3-28-17	Inspected by:	CRENSHAW MURPHY		
Conditions (s):	Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - (if No they need to be attached.)				
<p>BEST MANAGEMENT PRACTICES SHALL BE EMPLOYED TO MINIMIZE BASIN & SEDIMENTATION. DRIVEWAYS SHALL BE LOCATED ENTIRELY WITHIN LEGAL BASEMENT BOUNDARIES. AND ANY ASSOCIATED EARTH DISTURBANCE SHALL BE RESTORED TO ORIGINAL CONDITION.</p>					
Signature of Inspector:	Date of Approval: 5-4-17				
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>		

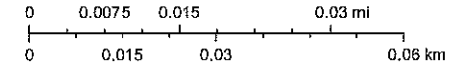
Mir



March 15, 2017

1:783

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



Bayfield County
Bayfield

City, Village, State or Federal
Permits May Also Be Required

LAND USE – X
SANITARY –
SIGN –
SPECIAL – Class A
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

**WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No. **17-0112** Issued To: **Tamas & Nancy Mir**

Location: - 1/4 of - 1/4 Section **6** Township **50** N. Range **3** W. Town of **Bayfield**

Gov't Lot	Lot	Block	Subdivision	CSM#

For: **Residential Other: [Shoreland Grading (301' x 15') = 4,515 sq. ft.]**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Best management practices shall be employed to minimize erosion and sedimentation. Driveway and any associated earth disturbing activities shall be located entirely within legal easement boundaries.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Jennifer Murphy

Authorized Issuing Official

May 8, 2017

Date