

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  
**RECEIVED**  
 Date stamp (received)  
 MAY 15 2017  
 Bayfield Co. Zoning Dept

**ENTERED**  
 Permit #: 17-D148  
 Date: 5-17-17  
 Amount Paid: \$75 5-15-17  
 Returned:

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: Michael St Aubin Mailing Address: 802 E. Howard Appleton WI 54915 Telephone: \_\_\_\_\_  
 Address of Property: 74825 N. McLean RD City/State/Zip: \_\_\_\_\_  
 Contractor: Dave Majerus Contractor Phone: 715-774-3866 Plumber: \_\_\_\_\_ Cell Phone: 920-809-1127  
 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) 30141 Recorded Deed (i.e. # assigned by Registrar of Deeds) Document #: \_\_\_\_\_ R- \_\_\_\_\_  
 Gov't Lot \_\_\_\_\_ Lot(s) \_\_\_\_\_ CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section 11, Township 48 N, Range 08 W Town of: Tripp Lot Size \_\_\_\_\_ Acreage 60

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>17,259</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 checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement	<input checked="" type="checkbox"/> Seasonal <input 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 checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Septic</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 type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 32' Width: 28' Height: 15'  
 Proposed Construction: Length: 12' Width: 28' Height: 15'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( <u>15</u> x <u>28</u> )	
	Residence (i.e. cabin, hunting shack, etc.)	( <u>   </u> x <u>   </u> )	
	with Loft	( <u>   </u> x <u>   </u> )	
	with a Porch	( <u>   </u> x <u>   </u> )	
	with (2 <sup>nd</sup> ) Porch	( <u>   </u> x <u>   </u> )	
	with a Deck	( <u>   </u> x <u>   </u> )	
	with (2 <sup>nd</sup> ) Deck	( <u>   </u> x <u>   </u> )	
<input type="checkbox"/> Commercial Use	Bunkhouse w/ ( <input type="checkbox"/> sanitary, <input type="checkbox"/> sleeping quarters, <input type="checkbox"/> cooking & food prep facilities)	( <u>   </u> x <u>   </u> )	
	Mobile Home (manufactured date)	( <u>   </u> x <u>   </u> )	
<input checked="" type="checkbox"/> Municipal Use	Addition/Alteration (specify) <u>Screen Porch</u>	( <u>12</u> x <u>28</u> )	<u>336</u>
	Accessory Building (specify) _____	( <u>   </u> x <u>   </u> )	
	Accessory Building Addition/Alteration (specify) _____	( <u>   </u> x <u>   </u> )	
	Special Use: (explain) _____	( <u>   </u> x <u>   </u> )	
	Conditional Use: (explain) _____	( <u>   </u> x <u>   </u> )	
	Other: (explain) _____	( <u>   </u> x <u>   </u> )	

FAILURE TO OBTAIN A PERMIT OF 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.

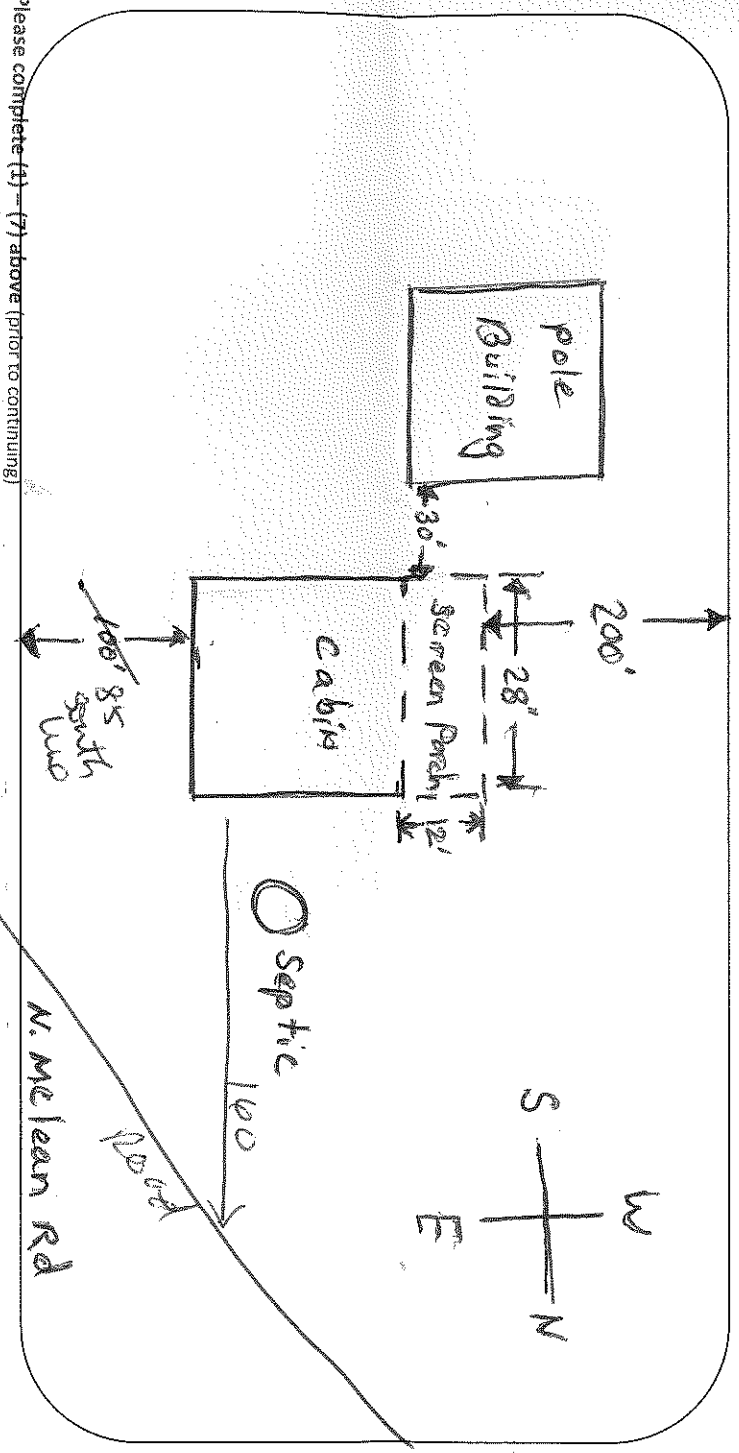
Owner(s): Michael St. Aubin  
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: \_\_\_\_\_ Date 5-15-17  
 (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

Draw or Sketch your Property (regardless of what you are applying for) box below:

- (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)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	100' 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	27' 85" Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	27' 85" Feet	Setback from Wetland	Feet
Setback from the West Lot Line	400' 260' Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	400' 160' 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/Septic Tank/Composting Toilet:** (1) part 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: 307545 # of bedrooms: 3 Sanitary Date: 5-29-2001

Permit Denied (Date): \_\_\_\_\_ Reason for Denial: No verification required

Permit #: 17-0148 Permit Date: 5-17-17

Is Parcel a Sub-Standard Lot  Yes  No (Best of Record) \_\_\_\_\_

Is Parcel in Common Ownership  Yes  No (Used/Contiguous Lots) \_\_\_\_\_

Is Structure Non-Conforming  Yes \_\_\_\_\_  No

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

Was Parcel Legally Created  Yes  No

Were Property Lines Represented by Owner  Yes  No

Was Proposed Building Site Delineated  Yes  No

Were Property Lines Represented by Owner  Yes  No

Inspection Record: OWNER PRESENT TO REPRESENT PROJECT. Zoning District: F-1

Date of Inspection: 5-16-17 Inspected by: TCM ucg/htg Lakes Classification: N/A

Condition(s): Town, Committee of Board Conditions Attached  Yes  No  No they need to be attached

Date of Re-Inspection: \_\_\_\_\_

Signature of Inspector: \_\_\_\_\_

Held For Sanitary:  Held For TBA:  Held For Affidavit:  Held For Fees:

Date of Approval: 5-16-17

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

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

LAND USE – X  
SANITARY – 367545  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

No. **17-0148** Issued To: **Michael St Aubin**

**N 990'** of  
Location: **NE** ¼ of - ¼ Section **11** Township **48** N. Range **8** W. Town of **Tripp**

Gov't Lot                      Lot                      Block                      Subdivision                      CSM#

For: **Residential Addition / Alteration: [ 1- Story; Screen Porch (12' x 28') = 336 sq. ft. ]**  
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s):

**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 17, 2017**

Date