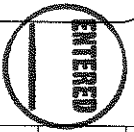


**SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:**  
 Bayfield County  
 Planning and Zoning Depart.  
 PO Box 58  
 Washburn, WI 54891  
 (715) 373-6138

**APPLICATION FOR PERMIT  
 BAYFIELD COUNTY, WISCONSIN**

Permit Received  
 JUN 21 2017



Permit #:	17-0099A
Date:	7-16-17
Amount Paid:	530 6-23-17
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 BY Co. Zoning Dept.

**TYPE OF PERMIT REQUESTED:**  LAND USE  SANITARY  PRIVY  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER

**Owner's Name:** Josie Rawson + Stephen Melving  
**Mailing Address:** 119 Winona St. Northfield MN 55057  
**City/State/Zip:** Northfield MN 55057  
**Telephone:** 5076492070  
**Cell Phone:** 5076492071

**Address of Property:** 87785 Bark Point Road.  
**Contractor:** Jason Guderian/Triple E  
**Contractor Phone:** 7152095476  
**Contractor Zip:** 54844  
**Contractor License #:** 100V Brown  
**Plumber Phone:** 7156820444  
**Written Authorization Attached:**  Yes  No

**Authorized Agent:** (Person Signing Application on behalf of Owner(s))  
**Agent Name:** Tony Brown  
**Agent Phone:** \_\_\_\_\_  
**Agent Mailing Address (include City/State/Zip):** \_\_\_\_\_

**PROJECT LOCATION:** Legal Description: (Use Tax Statement) Tax ID# (4-5 digits) 11359  
 Recorded Deed (ie. # assigned by Register of Deeds) Document #: 2017 R. 567438

**PROJECT LOCATION:** Section 4, Township 50 N, Range 7 W  
 Town of: Clover  
 Lot Size: \_\_\_\_\_  
 Acreage: 7.5

**Distance Structure is from Shoreline:** \_\_\_\_\_ feet  
**Distance Structure is from Floodplain:** \_\_\_\_\_ feet  
**Distance Structure is from Shoreline:** 160 FT W  
**Distance Structure is from Floodplain:** 120 Edge of Bluff

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	Is Property in Floodplain Zone?		Are Wetlands Present?
							Yes	No	
\$150,000	<input checked="" 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 checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input checked="" type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> No Basement <input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) <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"/> City <input checked="" type="checkbox"/> Well		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Existing Structure:** (if permit being applied for is relevant to it) Length: 42 Width: 26 Height: 32  
**Proposed Construction:** Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_  
 (inc. screen porch)

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property) <input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2 <sup>nd</sup> ) Deck with a Deck with Attached Garage 3rd deck	(26 x 26) (14 x 16) (5 x 5) (10 x 6) (10 x 6) (10 x 4)	676/1352 224 25 60 192 72
<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) <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 Use	<input type="checkbox"/> Special Use: (explain) _____ <input type="checkbox"/> Conditional Use: (explain) _____ <input type="checkbox"/> Other: (explain) _____	( )	( )

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):** Josie Rawson + Stephen Melving  
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

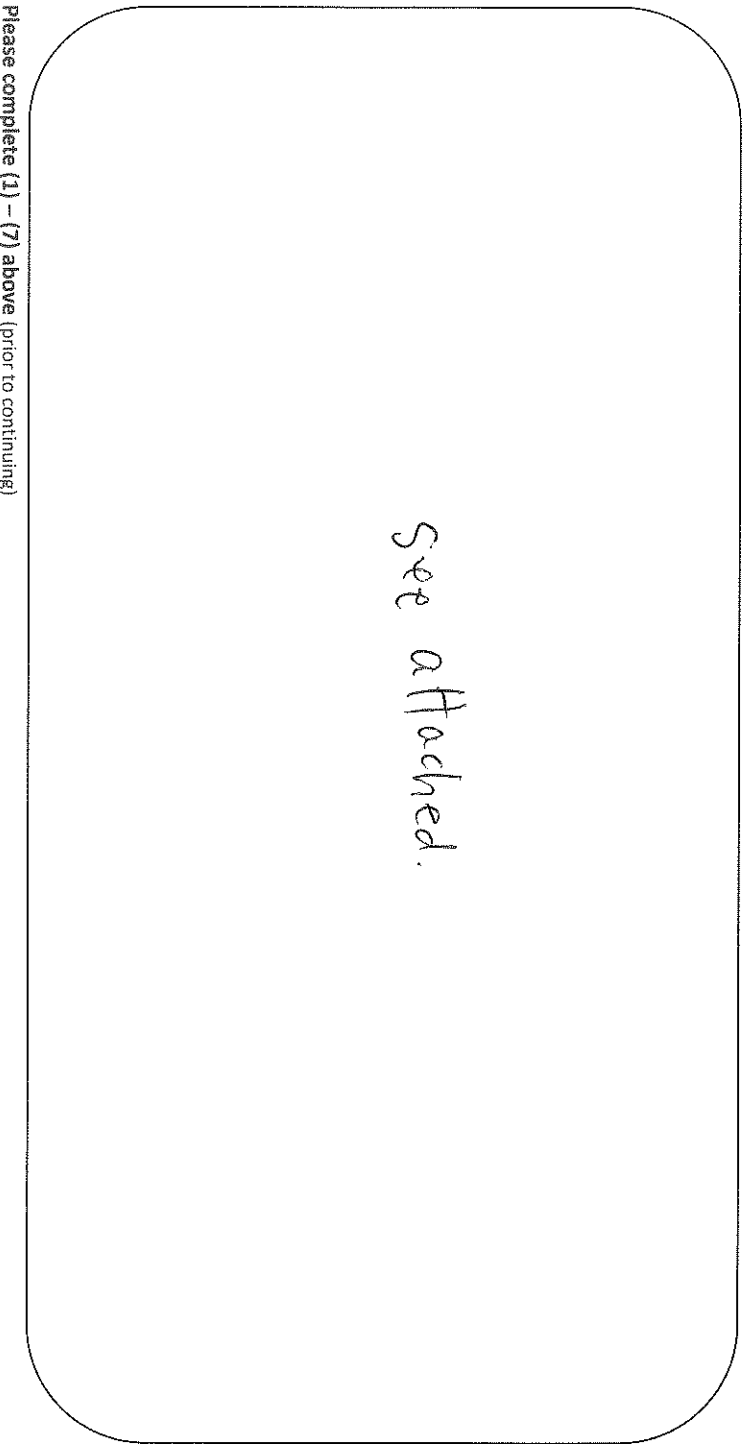
**Authorized Agent:** \_\_\_\_\_  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)  
**Date:** 21 June 2017

**Address to send permit:** (See above)  
**Copy of Tax Statement**  
 APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE  
 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.



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	200 Feet	Setback from the Lake (Ordinary high-water mark)	160 (0 HWM) Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	125 Feet
Setback from the North Lot Line	84 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	74 Feet	Setback from Wetland	308 Feet
Setback from the West Lot Line (to bluff)	125 Feet	20% Slope Area on property	Yes No
Setback from the East Lot Line	100 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank?	30 Feet	Setback to Well	102 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.

Prior to 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: 17-555 # of bedrooms: 2 Sanitary Date: 7-6-17

Permit Denied (Date): \_\_\_\_\_ Reason for Denial: \_\_\_\_\_

Permit #: 17-085A Permit Date: 7-6-17 see QATS cases

Is Parcel a Sub-Standard Lot  Yes  No

Is Parcel In Common Ownership  Yes (Deed of Record)  No

Is Structure Non-Conforming  Yes (Fused/contiguous Lot(s))  No

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

Was Parcel Legally Created  Yes  No

Was Proposed Building Site Delineated  Yes  No

Were Property Lines Represented by Owner  Yes  No

Was Property Surveyed  Yes  No

Inspection Record: existing cabin to be razed. New cabin built in about 1000 sq ft on the same location. Inspected by: JCM/REPTA

Date of Inspection: 6-15-17 Inspected by: JCM/REPTA

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

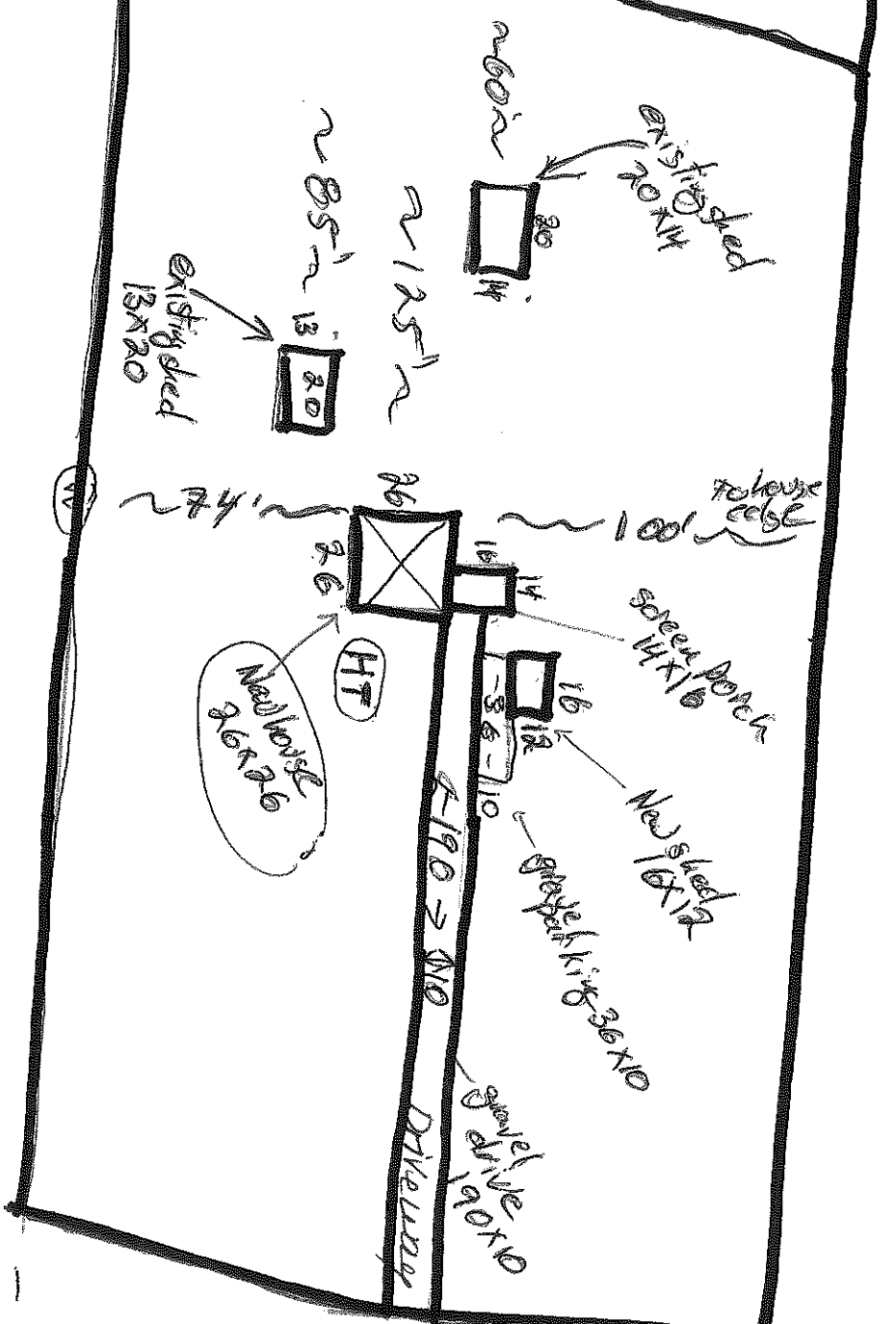
UDC permit + inspections required! Stormwater runoff from impervious surfaces shall be directed ~~to~~ away from the bluff to the greatest degree possible to prevent

Signature of Inspector: \_\_\_\_\_ Date of Approval: \_\_\_\_\_

Hold For Sanitary:  \_\_\_\_\_ Hold For TBA:  \_\_\_\_\_ Hold For Affidavit:  \_\_\_\_\_ Hold For Fees:  \_\_\_\_\_

bluff failure from top-over runoff

lake  
shore line  
Bluffs



~ 200' ~ BARK POINT RD

5.5 Acres

19 Rm

in De  
5'-6"

City, State or Federal  
Also Be Required

USE - X  
SANITARY - 17-55S  
SIGN -  
SPECIAL -  
CONDITIONAL -  
BOA -

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **17-0252** Issued To: **Joanna Rawson & Stephen Mohring**

Location: - 1/4 of - 1/4 Section **4** Township **50** N. Range **7** W. Town of **Clover**

Par in  
Gov't Lot **1** Lot Block Subdivision CSM#

For: **Residential Use: [ 2- Story; Residence (26' x 26') = 676 sq. ft.; Porch (14' x 16') = 224 sq. ft.;  
Covered Entry (5' x 5') = 10 sq. ft.; Deck #1 (10' x 6') = 60 sq. ft.;  
Deck #2 (32' x 6') = 192 sq. ft.; Deck #3 (18' x 4') = 72 sq. ft. ] Total Overall = 1,234 sq. ft.**  
**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s):** UDC permit and inspections required. Stormwater runoff from impervious surface shall be diverted away from the bluff to the greatest degree possible to prevent bluff failure from top-over runoff.

**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

**July 6, 2017**

Date

Accessory Building Addition/Alteration (Specify)