

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
 JUN 05 2017
 Bayfield Co. Zoning Dept.

Permit #: 17-0095
 Date: 7-31-17
 Amount Paid: 75 6-5-17
 Refund: 75 7-31-17

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: Richard Avo1 Mailing Address: 2 E Bayfield St Washburn WI 54891 Telephone: 715 373 3887

Address of Property: 29635 City Hwy C City/State/Zip: Washburn WI 54891 Call Phone: _____

Contractor: Russ Klinger Contractor Phone: 715 746 5385 Plumber: _____

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: _____ Agent Mailing Address (include City/State/Zip): _____

PROJECT LOCATION: Legal Description: (Use Tax Statement) Tax ID# (4-5 digits) _____

Section 35, Township 49 N, Range 5 W, Town of: Washburn

Gov't Lot: 1/4 Lot(s): 1 CSM: 164 Vol & Page: 1025 Lot(s) No.: 72 Block(s) No.: _____

Distance Structure is from Shoreline: _____ feet

Distance Structure is from Floodplain Zone? Yes No

Are Wetlands Present? Yes No

Non-Shoreland

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 →

Value at Time of Completion * include donated time & material: \$ 1500

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 checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Septic</u>	<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 <input type="checkbox"/> 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"/> _____	<input type="checkbox"/> Foundation	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> _____

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)	<u>25 x 40</u>	<u>1000</u>
	Residence (i.e. cabin, hunting shack, etc.)	()	()
	with Loft	()	()
	with a Porch	()	()
	with (2 nd) Porch	()	()
	with a Deck	()	()
	with (2 nd) Deck	()	()
<input type="checkbox"/> Commercial Use	Bunkhouse w/ (<input type="checkbox"/> sanitary, <input type="checkbox"/> sleeping quarters, <input type="checkbox"/> cooking & food prep facilities)	()	()
	Mobile Home (manufactured date)	()	()
<input checked="" type="checkbox"/> Municipal Use	Addition/Alteration (specify) <u>Washburn camp</u>	(<u>4</u> x <u>16</u>)	<u>4062</u>
	Accessory Building (specify) _____	()	()
	Accessory Building Addition/Alteration (specify) _____	()	()
	Special User: (explain) _____	()	()
	Conditional Use: (explain) _____	()	()
	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): Richard Avo1 Date: 6/5/17

(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: _____

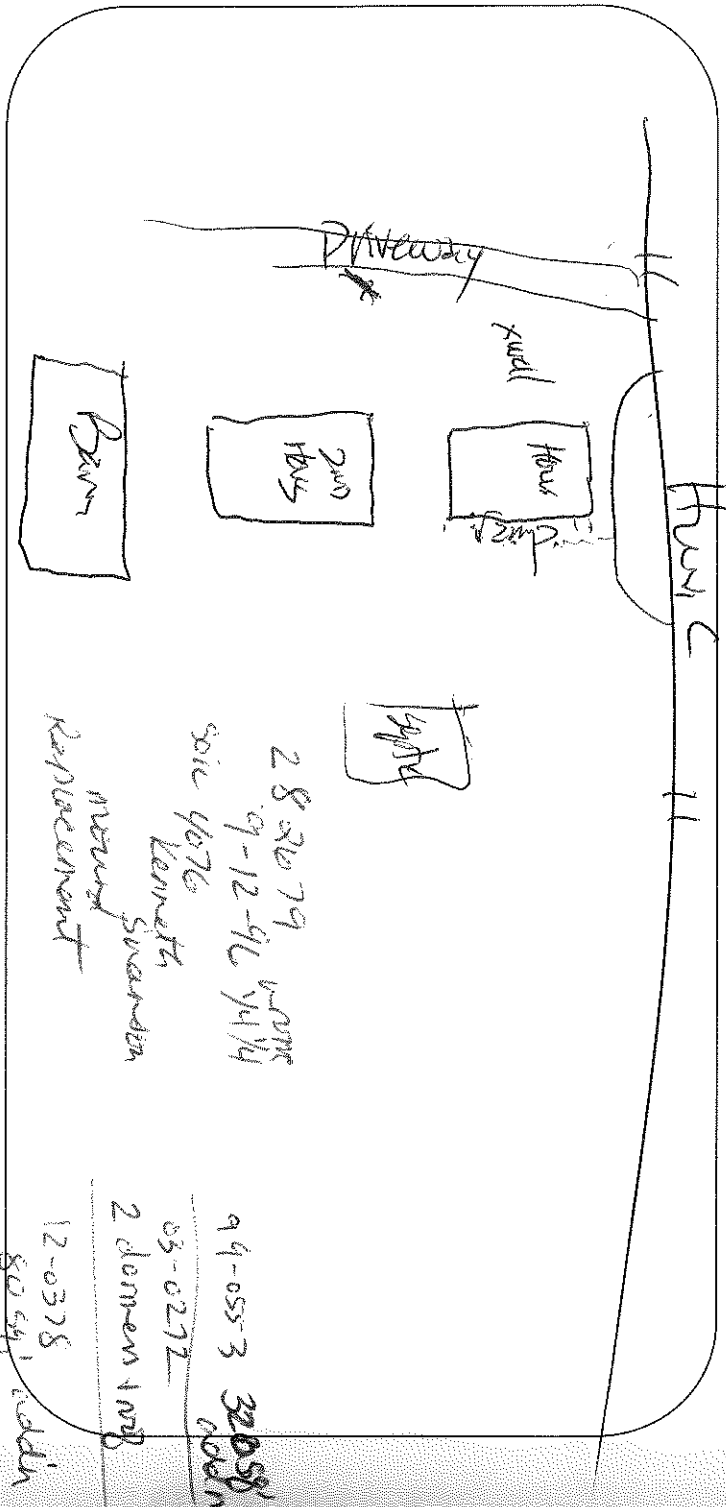
Attach _____

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Show: 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%**



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Must be approved by the Planning & Zoning Dept.

Description	Measurement	Measurement
Setback from the Centerline of Platted Road	120	Feet
Setback from the Established Right-of-Way	85	Feet
Setback from the North Lot Line	85	Feet
Setback from the South Lot Line	610	Feet
Setback from the West Lot Line	130	Feet
Setback from the East Lot Line	520	Feet
Setback to Septic Tank or Holding Tank	75	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.

05-00 86 (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).
 (convert acre - private) **12-0378 80 sq'**
 For The Construction of One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code.
 The local, town, village, city, state or federal agencies may also require permits. **Shed 100'**

Issuance Information (County Use Only) Sanitary Number: 110996 # of bedrooms: 4 Sanitary Date: 10-3-88

Permit Denied (Date): Reason for Denial: Permit Date: 7-31-17

Permit #: 17-0895

Is Parcel a Sub-Standard Lot Yes No (Deed of Record) Yes No

Is Parcel in Common Ownership Yes (Fused/contiguous lots) No

Is Structure Non-Conforming Yes No

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

Was Parcel Legally Created Yes No

Was Proposed Building Site Delineated Yes No

Were Property Lines Represented by Owner Was Property Surveyed Yes No

Inspected by: J. Smith Date of Re-Inspection:

Inspected by: J. Smith Date of Re-Inspection:

Inspected by: J. Smith Date of Re-Inspection:

Signature of Inspector: _____ Date of Approval: 7-31-17

Hold For Sanitary: _____ Hold For TBA: _____ Hold For Affidavit: _____ Hold For Fees: _____

City, Village, State or Federal
Permits May Also Be Required
After-the-Fact

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

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0295** Issued To: **Richard & Carol Avol**

Location: - ¼ of - ¼ Section **35** Township **49** N. Range **5** W. Town of **Washburn**

Gov't Lot Lot **1** Block Subdivision CSM# **1671**

For: **Residential Addition / Alteration: [Handicap Ramp (4' x 16') = 64 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

July 31, 2017

Date