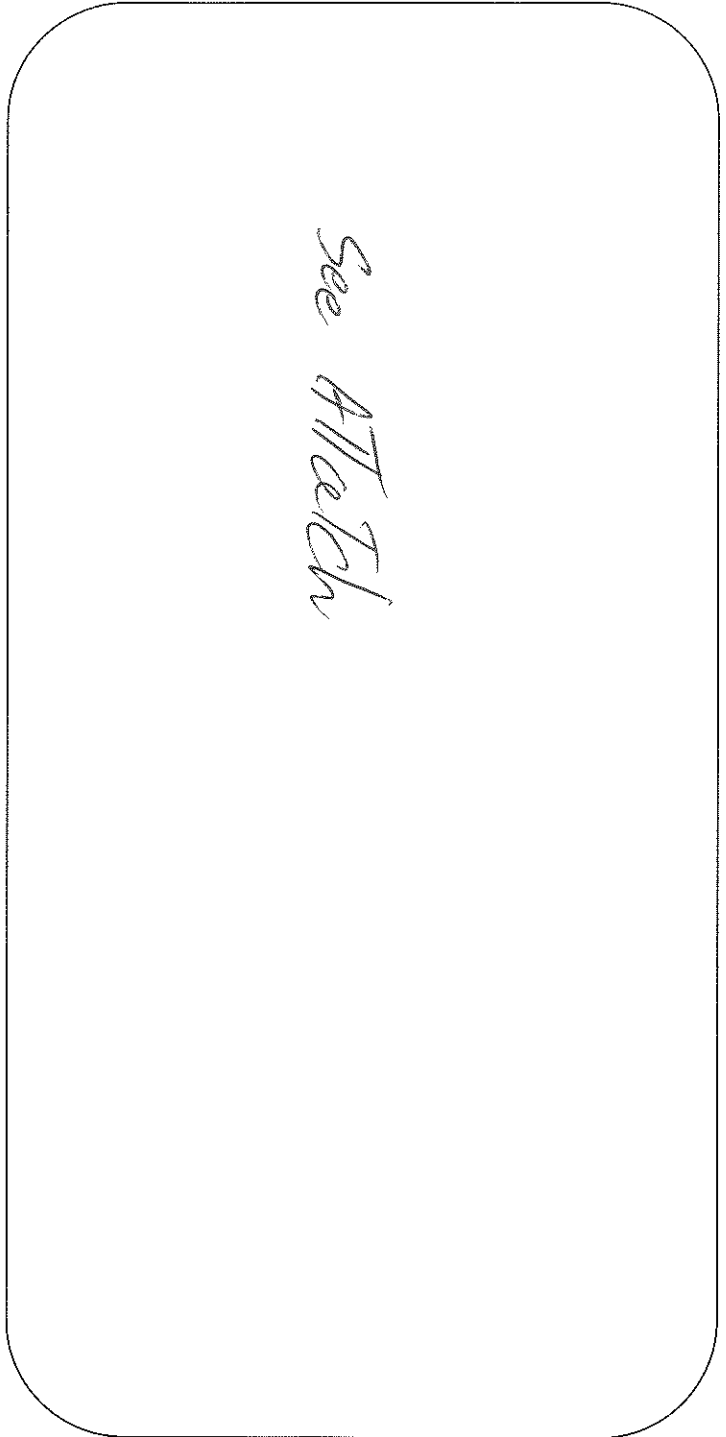


Review Draw or Sketch your Property (regardless of what you are applying for)

- (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)

(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)	275 Feet
Setback from the Established Right-of-Way	51 Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	1100 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	51 Feet	Setback from Wetland	60 Feet
Setback from the West Lot Line	1000 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	170 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	500 Feet	Setback to Well	200 Feet
Setback to Drain Field	500 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 Dwelling: 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 #: 17-0803 Permit Date: 8-2-12

Is Parcel a Sub-Standard Lot Yes (Deed of Record) No
 Is Parcel in Common Ownership Yes (Fused/Contiguous Lot(s)) No
 Is Structure Non-Conforming Yes No

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

Was Parcel Legally Created Yes No
 Was Proposed Building Site Delineated Yes No

Inspection Record: Were Property Lines Represented by Owner Yes No
 Was Property Surveyed Yes No

Date of Inspection: 7/27/12 Inspected by: [Signature] Zoning District (ARB)
 Lakes Classification ()

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

Signature of Inspector: [Signature] Condition: No accessory building shall be used for human habitation / sleeping purposes without necessary county and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

Hold For Sanitary: Hold For TBA: Hold For Affidavit: Hold For Fees: Date of Approval: 8/1/12

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

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

BAYFIELD COUNTY

PERMIT

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

No. **17-0303** Issued To: **Allie Raven / James Ashley, Agent**

Location: **SE** ¼ of **NW** ¼ Section **12** Township **46** N. Range **8** W. Town of **Delta**

Gov't Lot	Lot	Block	Subdivision	CSM#

For: **Residential Accessory Structure Addition: [1- Story; Workshop (20' x 20') = 400 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No accessory building shall be used for human habitation / sleeping purposes without necessary county and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

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.

Tracy Pooler

Authorized Issuing Official

August 2, 2017

Date

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

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 Bayfield Co. Zoning Dept.

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

Date Stamp (received)
RECEIVED
 JUL 21 2017
 Bayfield Co. Zoning Dept.

Permit #:	17-0306
Date:	8-8-17
Amount Paid:	90726-17
Refund:	

ENTERED

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

Owner's Name: Janet Bailey David Saette Mailing Address: 60995 Pike River Road City/State/Zip: Dehra-Mason, WI 54856 Telephone: 715-746-4000
 715-209-1706

Address of Property: 60995 Pike River Road City/State/Zip: Dehra-Mason, WI 54856

Contractor: Steffenson Carpentry Contractor Phone: 715-209-1852 Plumber: 32460 Star Road Bayfield, WI 54814

Authorized Agent: (person signing Application on behalf of Owner(s)) Jim Steffenson Agent Phone: Same Agent Mailing Address (include City/State/Zip): 32460 Star Road Bayfield, WI 54814 Written Authorization Attached Yes No

PROJECT LOCATION: Legal Description: (Use Tax Statement) NE 1/4, NE 1/4 Gov't Lot Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision: Document #: R- _____

Section 21, Township 46 N, Range 7 W Town of: Dehra

Shoreland Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? Yes continue No
 Distance Structure is from Shoreline: 136 feet
 Distance Structure is from Shoreline: _____ feet
 Is Property in Floodplain Zone? Yes No
 Are Wetlands Present? Yes No

Non-Shoreland

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
\$30,000	<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"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> Foundation	<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"/> None	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary Specify Type: _____ <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Septic Tank</u> <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 <u>ARTISAN</u>

Existing Structure: (if permit being applied for is relevant to it) Length: 38 Width: 42 Height: 50'4"
 Proposed Construction: Length: 14 Width: 16 Height: 15'0"

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)	Residence (i.e. cabin, hunting shack, etc.)	(38 x 42)	1596
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) with Loft	with a Porch	() x ()	()
<input checked="" type="checkbox"/> Residential Use	with (2 nd) Porch	() x ()	()
<input type="checkbox"/> Rec'd for Issuance	with (2 nd) Deck	() x ()	()
<input checked="" type="checkbox"/> Commercial Use	with Attached Garage	() x ()	()
<input type="checkbox"/> Secretarial Staff	Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	() x ()	()
<input type="checkbox"/> Municipal Use	Mobile Home (manufactured date)	() x ()	()
<input checked="" type="checkbox"/>	Addition/Alteration (specify) <u>18'x16' front entry with screen</u>	() x ()	()
<input type="checkbox"/>	Accessory Building (specify) <u>Porch</u>	(8 x 14)	112
<input type="checkbox"/>	Accessory Building Addition/Alteration (specify)	() x ()	()
<input type="checkbox"/>	Special Use: (explain)	() x ()	()
<input type="checkbox"/>	Conditional Use: (explain)	() x ()	()
<input type="checkbox"/>	Other: (explain)	() 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 this 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 any reasonable time for the purposes of inspection.

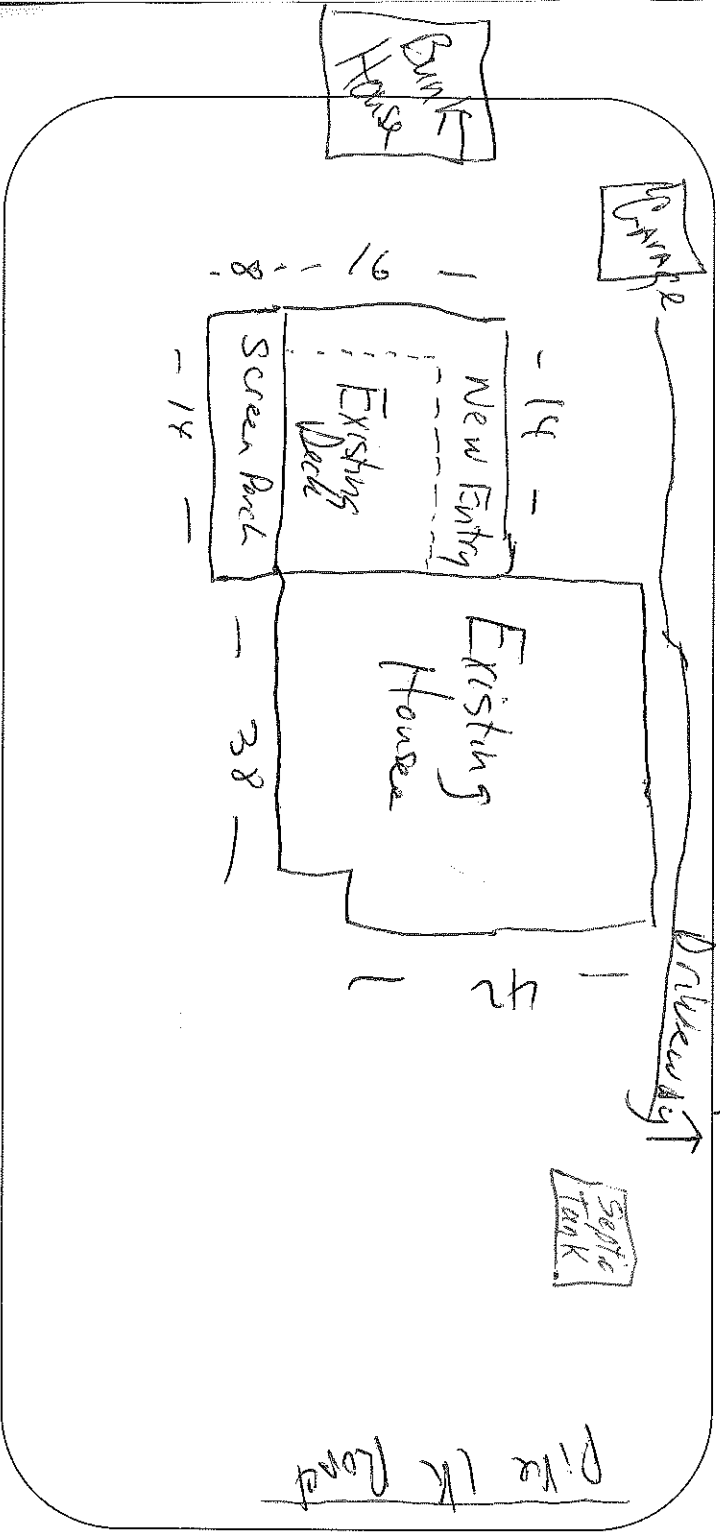
Owner(s): Janet Bailey David Saette Date: 7/16/17
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Date: 7/16/17

Address to send permit: 60995 Pike River Road Copy of Tax Statement Attach
 If you recently purchased the property send your Recorded Deed

Draw or Sketch Your Property (regardless of what you are applying for)

- Proposed Construction**
- (1) Show Location of: North (N) on Plot Plan
 - (2) Show / Indicate: (*) Driveway and (*) Frontage Road (Name Frontage Road)
 - (3) Show Location of (*): All Existing Structures on your Property
 - (4) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
 - (5) Show: (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 - (6) Show any (*): (*) Wetlands; or (*) Slopes over 20%
 - (7) Show any (*):



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	853 Feet	Setback from the Lake (Ordinary high-water mark)	
Setback from the Established Right-of-Way	800 Feet	Setback from the River, Stream, Creek	70 100 Feet
Setback from the North Lot Line	110 Feet	Setback from the Bank or Bluff	
Setback from the South Lot Line	120 Feet	Setback from Wetland	
Setback from the West Lot Line	400 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	800 Feet	Elevation of Floodplain	
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	
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: 13550 # of bedrooms: 4 Sanitary Date: 7/22/81
 Permit Denied (Date): Reason for Denial:
 Permit #: 4893 17-0306 Permit Date: 8-2-17

Is Parcel a Sub-Standard lot Yes (Need of Record) No
 Is Parcel in Common Ownership Yes (Used/Contiguous Lots) No
 Is Structure Non-Conforming Yes No

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

Was Parcel Legally Created Yes No
 Were Property Lines Represented by Owner Was Property Surveyed Yes No

Was Proposed Building Site Delineated Yes No

Inspection Record:
 Date of Inspection: 7/27/17 Inspected by: AMK
 Condition(s): Town, Committee or Board Conditions Attached? Yes No - (if No they need to be attached.)

Signature of Inspector: AMK
 Condition: A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Must meet and maintain setbacks.

Hold For Sanitary: Hold For TBA: Hold For Affidavit: Hold For Fees: Date of Approval: 8/2/17

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 - 13550 (7/22/1981)
SIGN -
SPECIAL -
CONDITIONAL -
BOA -

No. **17-0306** Issued To: **Janet Bewley & David Saetre**

Location: **NE 1/4 of NE 1/4 Section 21 Township 46 N. Range 7 W. Town of Delta**
LESS THAT PART LYING SOUTH OF WHITE RIVER & LESS PAR DESC IN V.221 P.303 TOG WITH S 50' SE SE SEC 16

Gov't Lot	Lot	Block	Subdivision	CSM#

For: **Residential Addition / Alteration: [1- Story; Entry (14' x 16') = 224 sq. ft.; Screen Porch (8' x 14') = 112 sq. ft.]**
Total Overall = 336 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): **UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Must meet and maintain setbacks.**

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.

Tracy Pooler

Authorized Issuing Official

August 2, 2017

Date