

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)
 SEP 07 2017
 Bayfield Co. Zoning Dept.

ENTERED

Permit #:	17-03889
Date:	9-26-17
Amount Paid:	880 9-7-17
Refund:	175 9-7-17

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: Greg & Dana Brown **Mailing Address:** 1102 5th Ave. E **City/State/Zip:** Ashland, WI, 54806 **Telephone:** 715-209-0161

Address of Property: 13660 Curt Hwy H **City/State/Zip:** Iron River, WI, 54947 **Cell Phone:** 715-209-0161

Contractor: Ham Gusk's Const. **Contractor Phone:** 715-209-1094 **Plumber:** Greg Brown **Plumber Phone:** 715-209-0161

Authorized Agent: (Person Signing Application on behalf of Owner(s)) **Agent Phone:** 715-209-1094 **Agent Mailing Address (Include City/State/Zip):** 1102 5th Ave. E, Ashland, WI, 54806 **Written Authorization Attached:** Yes No

PROJECT LOCATION: Legal Description: (Use Tax Statement) **Tax ID# (4-5 digits):** 12523 **Recorded Deed (i.e. # assigned by Register of Deeds):** Document #: _____ R: _____

PROJECT LOCATION: NE 1/4, NE 1/4 **Gov't Lot:** **Lot(s):** **CSM:** **Vol & Page:** **Lot(s) No.:** **Block(s) No.:** **Subdivision:** **Lot Size:** 80 **Acres:** 30

Section: 01, **Township:** 46 N, **Range:** 07 W **Town of:** De Haer

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 in Floodplain Zone? Yes No **Are Wetlands Present?** Yes No

Non-Shoreland → Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue → **Distance Structure is from Shoreline:** 130 feet

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
\$80,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input checked="" 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 type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: <u>Cousett</u>	<input checked="" 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 <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"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> _____

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

Proposed Construction: **Length:** 40' **Width:** 28' **Height:** 14'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	(_____)	(_____)
<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(40 X 28)	1120
<input type="checkbox"/>	with Loft	(_____)	(_____)
<input checked="" type="checkbox"/>	Residential Use	(6 X 40)	240
<input type="checkbox"/>	with a Porch	(_____)	(_____)
<input type="checkbox"/>	with (2 nd) Deck	(_____)	(_____)
<input type="checkbox"/>	with a Deck	(_____)	(_____)
<input type="checkbox"/>	with (2 nd) Deck	(_____)	(_____)
<input type="checkbox"/>	with Attached Garage	(_____)	(_____)
<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"/>	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): Greg & Dana Brown **Date:** 9/5/17

(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:** _____

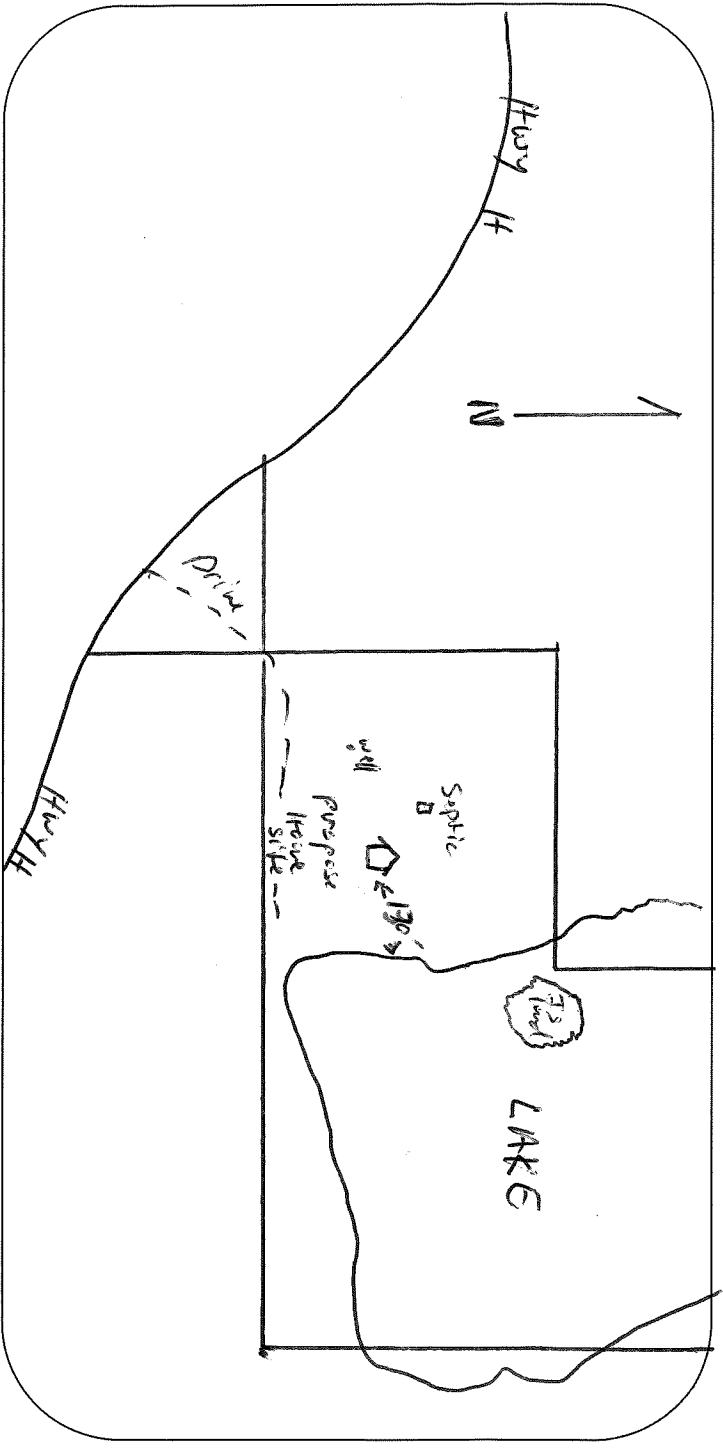
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: 1102 5th Ave. E. Ashland, WI. 54806 **Attach** **Copy of Tax Statement**

(Stamp Here)

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)

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	850 Feet	Setback from the Lake (Ordinary high-water mark)	130 Feet
Setback from the Established Right-of-Way	775 Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	500 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	60 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	600 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	650 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	30 Feet	Setback to Well	N/A Feet
Setback to Drain Field	70 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: 17-965	# of bedrooms: 2	Sanitary Date: 8/29/17	
Permit Denied (Date):	Reason for Denial:				
Permit #: 17-0389	Permit Date: 9-26-17				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<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 #:	
Granted by Variance (B.O.A.)	Case #:	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Inspection Record: site staked & prep'd		Zoning District (F-1)		Lakes Classification (3)	
Date of inspection: 9/11/17	Inspected by: A. Habel	Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)					
Signature of Inspector: A. Habel					
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	Date of Approval: 9/22/17	

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.

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

LAND USE – X
SANITARY – 17-96S
SIGN –
SPECIAL – Class A
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0389** Issued To: **Greg & Dana Brown**

Less NW ¼

Location: **NE** ¼ of **NE** ¼ Section **7** Township **46** N. Range **7** W. Town of **Delta**

Gov't Lot	Lot	Block	Subdivision	CSM#
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For: **Residential Use: [1- Story; Residence (40' x 28') = 1,120 sq. ft.; Porch (6' x 40') = 240 sq. ft.]**
Total Overall = 1,360 sq. ft.

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

Condition(s): A 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

September 26, 2017

Date