

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  
 JUL 31 2017  
 8-28  
 fees  
 received



Permit #:	17-0399
Date:	10-3-17
Amount Paid:	\$75 10-3-17
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 BAYFIELD Co. Zoning Dept.

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

Owner's Name: Kevin Meieroth Mailing Address: PO Box 1528 Bayfield, WI 57814 Telephone: 715-779-7069

Address of Property: City/State/Zip: Bayfield, WI 57814 Contractor Phone: 715-269-0876 Cell Phone: 715-269-0876

Contractor: \_\_\_\_\_ Plumber: \_\_\_\_\_

Authorized Agent: (person Signing Application on behalf of Owner(s)) Agent Phone: \_\_\_\_\_ Agent Mailing Address (include City/State/Zip): \_\_\_\_\_ Plumber Phone: \_\_\_\_\_

PROJECT LOCATION: Part of NW 1/4, SE 1/4 Gov't Lot \_\_\_\_\_ Lot(s) \_\_\_\_\_ CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_

Section 23, Township S1 N. Range 4 W Town of: Russell Lot Size \_\_\_\_\_ Acreage 30

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

Recorded Deed (i.e. # assigned by Register of Deeds) Document #: 11000 R. 411

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>\$257K</u> <u>per above message 9-18-16</u>	<input type="checkbox"/> New Construction <input type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input checked="" type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> 1-Story <input checked="" type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> _____ <input type="checkbox"/> _____	<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 <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input checked="" type="checkbox"/> Compost Toilet <input checked="" type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

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"/>	Principal Structure (first structure on property)	( X X )	
<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( X X )	
	with Loft	( X X )	
	with a Porch	( X X )	
	with (2 <sup>nd</sup> ) Porch	( X X )	
	with a Deck	( X X )	
	with (2 <sup>nd</sup> ) Deck	( X X )	
	with Attached Garage	( X X )	
	Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X X )	
	Mobile Home (manufactured date) _____	( X X )	
	Addition/Alteration (specify) _____	( X X )	
	Accessory Building (specify) <u>Shed for lumber, tools, etc.</u>	( 16 X 30 )	320
	Accessory Building Addition/Alteration (specify) _____	( 14 X 16 )	224
	Special Use: (explain) _____	( X X )	
	Conditional Use: (explain) _____	( X X )	
	Other: (explain) _____	( X 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 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.

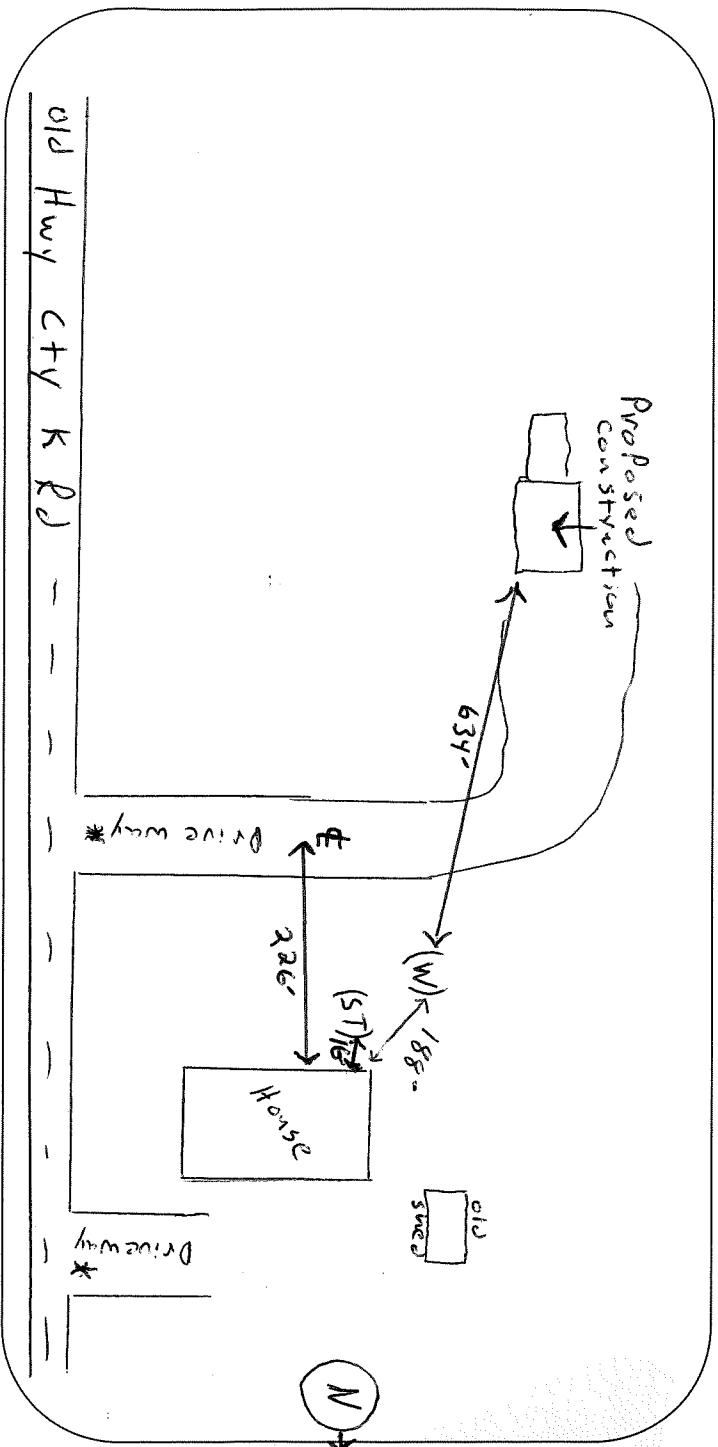
Owner(s): Kevin Meieroth Michelle Meieroth Date 7-31-17  
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

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 PO Box 1528 Bayfield WI 57814 Attach Copy of Tax Statement

Below: 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)

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)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River Stream, Creek	Feet
Setback from the North Lot Line	6 1/6 Feet	Setback from the Bank or Bluff	103 Feet
Setback from the South Lot Line	191 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	1282 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	828 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	188 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.  
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.

<b>Issuance Information (County Use Only)</b>	Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		
Permit #: <b>17-0399</b>	Permit Date: <b>10-3-17</b>		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	Deed of Record (Fused/contiguous lots)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input type="checkbox"/> No	Mitigation Required Mitigation Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #: _____	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Case #: _____	Were Property Lines Represented by Owner Was Property Surveyed
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record:	Date of Inspection: <b>9-25-17</b>		Inspected by: <b>JC Murphy</b>
<p><i>but they applied for a variance. Denied due to previous owner's issues.</i></p> <p><i>This site was previously applied for but they applied for a variance. Denied due to previous owner's issues.</i></p>			
Condition(s): Town, Committee or Board Conditions Attached?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(If No they need to be attached)	
<p><i>Builder shall NOT BE USED FOR human habitation or septic purposes. VOC permit + inspection shall be obtained if intended for human habitation. No plumbing fixtures w/permits.</i></p>			
Signature of Inspector:	Date of Approval: <b>9-26-17</b>		
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>

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. **17-0399** Issued To: **Kevin Meierotto**

**THE N 700' OF NE SE &  
Location: NW 1/4 of SE 1/4 Section 23 Township 51 N. Range 4 W. Town of Russell  
LYING W OF CO HWY K**

Gov't Lot	Lot	Block	Subdivision	CSM#
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For: **Residential Accessory Structure: [ 1- Story; Shed (16' x 20') (14' x 16') = 544 sq. ft. ]**  
(Disclaimer): Any future expansions or development would require additional permitting.

**Condition(s):** Building shall not be used for human habitation or sleeping purposes. UDC permit and inspection shall be obtained if intended for human habitation. No plumbing fixtures with pressurized water unless POWTS approved and installed.

**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

**October 3, 2017**  
Date