

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
 APR 27 2016
 Bayfield Co. Zoning Dept.

Permit #: 17-0413
 Date: 10-10-17
 Amount Paid: 300 9-8-16
 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.

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

Owner's Name: Anthony Fischer Mailing Address: PO Box 517 City/State/Zip: Washburn, WI 54891 Telephone: 715-834-2126

Address of Property: Anthony Fischer City/State/Zip: Washburn, WI 54891 Cell Phone: 715-834-2126

Contractor: Sorenson Construction Contractor Phone: 715-292-0594 Plumber: _____ Plumber Phone: _____

Authorized Agent: (Person Signing Application on behalf of Owner(s)) _____ Agent Phone: _____ Agent Mailing Address (include City/State/Zip): _____ Written Authorization Attached Yes No

PROJECT LOCATION: NE 1/4, SE 1/4 Gov't Lot: 2000 Lot(s): LOT 1 CSM: 1894 Vol & Page: W1153 Lot(s) No.: LOT 1 Block(s) No.: _____ Subdivision: _____ Recorded Document: (i.e. Property Ownership) 11 Page(s) 153

Section: 15, Township: 49 N, Range: 05 W Town of: Bayview Lot Size: _____ Acreage: 14.17

Shoreland Non-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 -->

Distance Structure is from Shoreline: _____ feet Is Property in Floodplain Zone? Yes No

Distance Structure is from Shoreline: _____ feet Are Wetlands Present? Yes No

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>\$ 100,000</u>	<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 type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input 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"/> None	<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 checked="" 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 checked="" type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____

Existing Structure: (if permit being applied for is relevant to it) Length: 80 Width: 52 Height: 16

Proposed Construction: Length: _____ Width: _____ Height: _____

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	<u>52 x 80</u>	<u>4160</u>
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	()	()
	<input type="checkbox"/> with Loft	()	()
	<input type="checkbox"/> with a Porch	()	()
	<input type="checkbox"/> with (2 nd) Deck	()	()
	<input type="checkbox"/> with (2 nd) Deck	()	()
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> with Attached Garage	()	()
	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	()	()
	<input type="checkbox"/> Mobile Home (manufactured date) _____	()	()
	<input type="checkbox"/> Addition/Alteration (specify) _____	()	()
	<input type="checkbox"/> Accessory Building (specify) _____	<u>52 x 80</u>	<u>4160</u>
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	<u>14 x 80</u>	<u>1120</u>
	<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): Anthony Fischer Date: 4-26-16

(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: _____

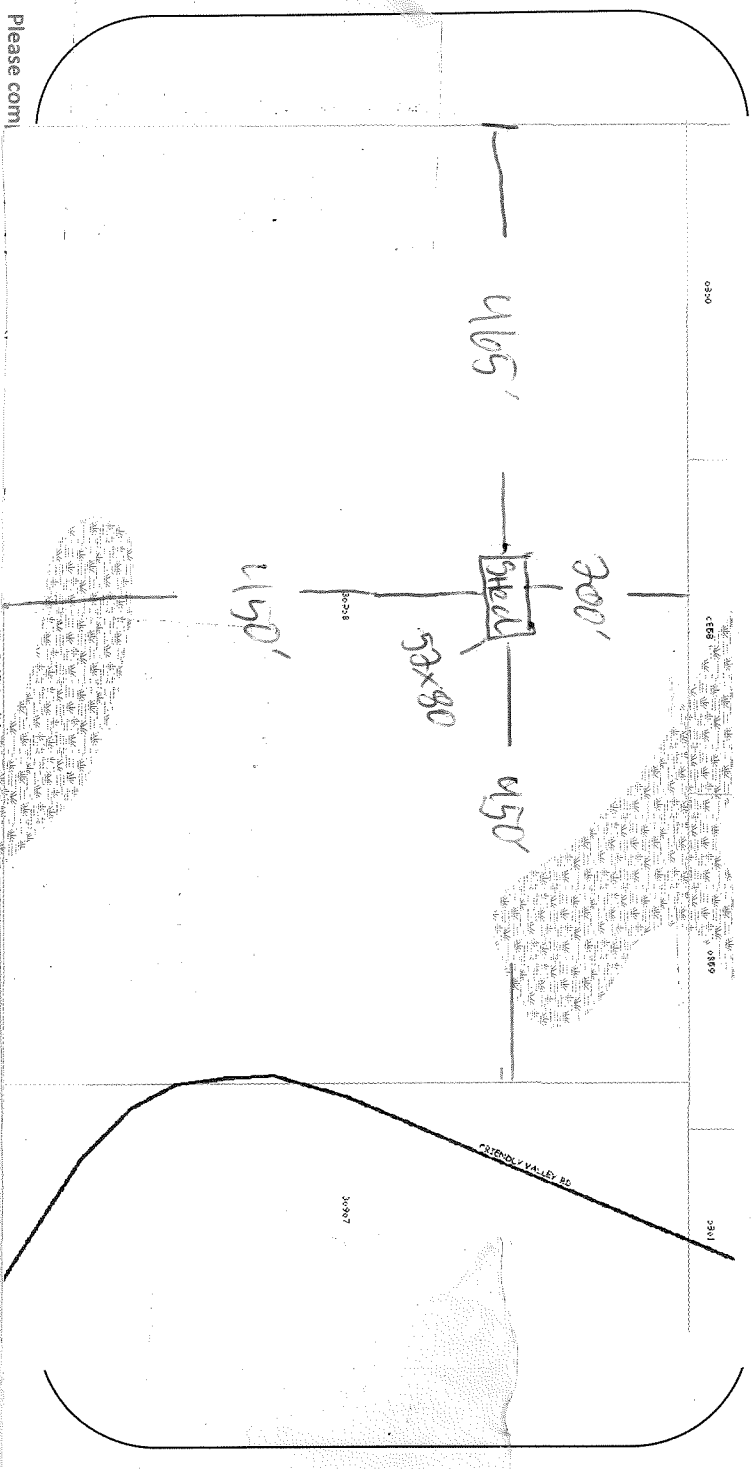
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: PO Box 517 Washburn, WI 54891 Attach Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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 (*): **(*) Wetland**



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

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	435 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	430 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	450 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	465 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	450 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	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.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:			
Permit Denied (Date):		Reason for Denial:					
Permit #: <u>17-0413</u>		Permit Date: <u>10-10-17</u>					
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(Deed of Record)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel In Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(Fused/Contiguous Lot(s))	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit 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						
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	Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ATE	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Inspection Record: <u>KENNETH + JUNK / SHAWNEE TRIED TO INSPECT 5-3 BUT NO FEES # A CAUTION FROM JUNK VIO ABOVE KEYWORD (E-1)</u>		Zoning District		<u>RE-1</u>	Date of Re-Inspection:		
Date of Inspection: <u>5-16-16</u>		Inspected by: <u>J Greenberg Murray</u>					
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - (If No they need to be attached.)							
Buildings is not approved for human habitation or commercial purposes. Residential storage only. Property shall not be used as junk/straw yard or for kennel use.							
Signature of Inspector:		<u>[Signature]</u>				Date of Approval: <u>10-18-17</u>	
Hold For Sanitary: <input type="checkbox"/>	Hold For JDA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>				

Forwarded weekend via to work

City, Village, State or Federal
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. **17-0413** Issued To: **Anthony Fischer**

Location: - 1/4 of - 1/4 Section **15** Township **49** N. Range **5** W. Town of **Bayview**

Gov't Lot Lot **1** Block Subdivision CSM# **1894**

For: **Residential Accessory Structure: [1- Story; Pole Building (52' x 80') = 4,160 sq. ft.;**
(2) Lean-to (14' x 80') (14' x 80') = 2,240 sq. ft.] Total Overall = 6,400 sq. ft.

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

Condition(s): Building is not approved for human habitation or commercial purposes. Residential storage only. Property shall not be used as junk/salvage yard or dog kennel without necessary permits.

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 10, 2017

Date