

**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)  
 AUG 25 2011  
 Bayfield Co. Zoning Dept.

**ENTERED**

Permit #:	170487
Date:	10-30-17
Amount Paid:	510 8-25-17
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 APPLICANT.

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

Owner's Name: JESSIE Klobucher Mailing Address: 63690 Cty Hwy A Iron River, WI 54847 City/State/Zip: Iron River WI 54847 Telephone: \_\_\_\_\_  
 Address of Property: 64495 N. P. Drive Contractor Phone: Iron River WI 54847 Plumber: RENO GUERARD # 223804 Cell Phone: 715 813-0303  
 Contractor: \_\_\_\_\_ Agent Phone: \_\_\_\_\_ Agent Mailing Address (include City/State/Zip): RENO GUERARD # 224109 Plumber Phone: 218) 391-0516 Written Authorization Attached  Yes  No  
 Authorized Agent: (Person Signing Application on behalf of Owner(s)) \_\_\_\_\_

**PROJECT LOCATION** Legal Description: (Use Tax Statement) Tax ID #: (4-5 digits) \_\_\_\_\_  
NW 1/4, SE 1/4 Gov't Lot \_\_\_\_\_ Lot(s) \_\_\_\_\_ CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section 21, Township 47 N, Range 8 W Town of: Iron River Lot Size \_\_\_\_\_ Acreage 1.71

**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: \_\_\_\_\_ feet  No  No  
2 lakes: 7207- to 7207- to 5327- to lakes pipe

Value at Time of Completion \*Include donated time & material: \$180,000

Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
<input checked="" 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 type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 2-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input checked="" 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"/> Foundation	<input type="checkbox"/> _____	<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: 46' Width: 30' Height: 26'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	( <u>46</u> x <u>30</u> )	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	( <u>36</u> x <u>30</u> )	
	with Loft	( <u>   </u> x <u>   </u> )	
	with a Porch	( <u>   </u> x <u>   </u> )	
	with (2 <sup>nd</sup> ) Deck	( <u>   </u> x <u>   </u> )	
	with a Deck	( <u>   </u> x <u>   </u> )	
	with (2 <sup>nd</sup> ) Deck	( <u>   </u> x <u>   </u> )	
<input type="checkbox"/> Commercial Use	with Attached Garage	( <u>24</u> x <u>26</u> )	
	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( <u>   </u> x <u>   </u> )	
	Mobile Home (manufactured date) _____	( <u>   </u> x <u>   </u> )	
	Addition/Alteration (specify) _____	( <u>   </u> x <u>   </u> )	
	Accessory Building (specify) _____	( <u>   </u> x <u>   </u> )	
	Accessory Building Addition/Alteration (specify) _____	( <u>   </u> x <u>   </u> )	
	Special Use: (explain) _____	( <u>   </u> x <u>   </u> )	
	Conditional Use: (explain) _____	( <u>   </u> x <u>   </u> )	
	Other: (explain) _____	( <u>   </u> x <u>   </u> )	

**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.

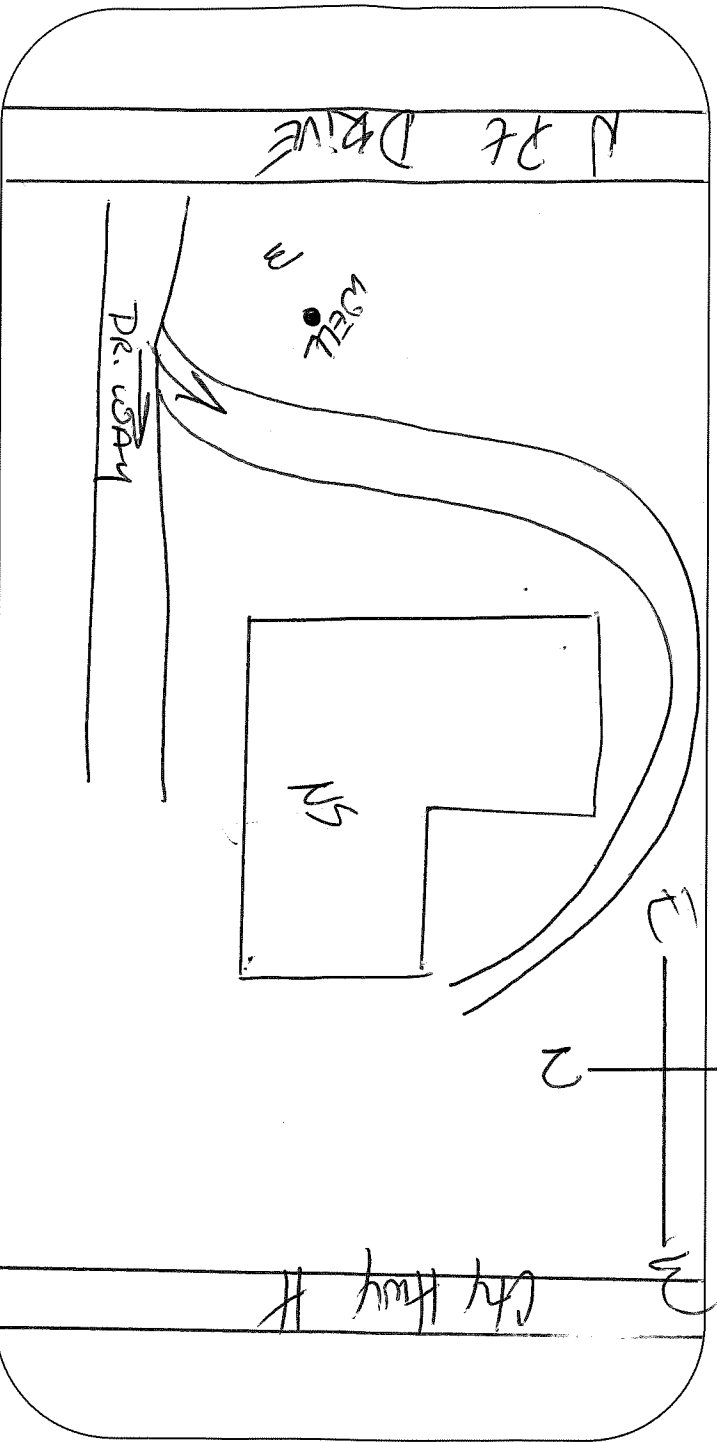
Owner(s): Jessie Klobucher Date 8/22/17  
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

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

Look 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	200 Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	13 20 Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	50 20 Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	150 200 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	+ 200 Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	150 Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	NA 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.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: <b>17-0437</b>	Permit Date:	<b>150 Ft wide</b>	<b>10-30-17</b>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is Parcel a Sub-Standard Lot <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is Parcel in Common Ownership <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is Structure Non-Conforming <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Mitigation Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Affidavit Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Affidavit Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Granted by Variance (B.O.A.) Case #: _____	<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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Were Property Lines Represented by Owner <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was Property Surveyed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previously Granted by Variance (B.O.A.) Case #: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Zoning District <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Lakes Classification ( <b>3</b> )
Inspection Record: <b>Site not staked 9-13 + setback measurements were accurate. called 9-13. just plan converted to existing structure</b>	Date of inspection: <b>9-13 + 9-22</b>	Inspected by: <b>SCMPP/HT</b>	Date of Re-Inspection: <b>removed.</b>	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: <b>UDC permit + inspection required</b>				
Hold For Sanitary: <input checked="" type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	Date of Approval: <b>10-10-17</b>

City, Village, State or Federal  
May Also Be Required

LAND USE – X  
SANITARY – 17-136S  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **17-0437** Issued To: **Jessie Klobucher**

Par in  
Location: **NW** ¼ of **SE** ¼ Section **21** Township **47** N. Range **8** W. Town of **Iron River**

Gov't Lot                      Lot                      Block                      Subdivision                      CSM#

For: **Residential Use: [ 2- Story; Residence (46' x 30') = 1,380 sq. ft.; Attached Garage (24' x 26') = 624 sq. ft. ]**  
(Disclaimer): Any future expansions or development would require additional permitting.

**Condition(s): UDC permit and inspections required.**

**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 30, 2017**  
Date