

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

Date Stamp Received  
 OCT 23 2017

Bayfield Co. Zoning Dept.

ENTERED

Permit #:	17-04520
Date:	11-7-17
Amount Paid:	\$690 10-20-17
Refund:	\$100 10-20-17

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: Gary Florence Schacht Mailing Address: N5725 Cobble Rd Elk Horn WI 53121 Telephone: 262-723-3689

Address of Property: Iron River WI 54847 City/State/Zip: Iron River WI 54847 Cell Phone: \_\_\_\_\_

Contractor: Dykstra Construction Inc Contractor Phone: 715-682-9599 Plumber: Greg Brown Plumbing Plumber Phone: 715-204-0161

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Tim Dykstra Agent Phone: 715-682-9599 Agent Mailing Address (Include City/State/Zip): 50181 st Hwy 13 Ashland WI 54806 Written Authorization Attached  Yes  No

PROJECT LOCATION: 1/4, \_\_\_\_\_ 1/4 Gov't Lot 5 Lot(s) 2 CSM W19271 V730 P.268 Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_

Section 08, Township 47 N, Range 08 W Town of: Iron River Lot Size \_\_\_\_\_ Acreage 2.4

Legal Description: (Use Tax Statement) 19172 Recorded Deed (i.e. # assigned by Register of Deeds) Document #: \_\_\_\_\_ R. \_\_\_\_\_

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: 105 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

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>230,000</u>	<input checked="" type="checkbox"/> New Construction <input 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"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement (existing bldg) <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> _____ <input type="checkbox"/> None	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary Specify Type: <u>Covered</u> <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 type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input checked="" type="checkbox"/> City <input type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 53 Width: 37 Height: 16

Proposed Construction: PAVED 11-6-17 Proposed Structure: regular w/ porch + deck Height: 16

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)	<input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) <u>Irregular</u>	( <u>53</u> x <u>37</u> )	<u>1526</u>
<input type="checkbox"/> Residential Use	with Loft	( <u>5'8" x 7</u> )	<u>42</u>
<input type="checkbox"/> Residential Use	with a Porch	( <u>12</u> x <u>24</u> )	<u>288</u>
<input type="checkbox"/> Residential Use	with a Deck	( <u>23'4" x 21'4"</u> )	<u>467</u>
<input type="checkbox"/> Commercial Use	with Attached Garage	( _____ )	( _____ )
<input type="checkbox"/> Commercial Use	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( _____ )	( _____ )
<input type="checkbox"/> Commercial Use	Mobile Home (manufactured date)	( _____ )	( _____ )
<input type="checkbox"/> Commercial Use	Addition/Alteration (specify)	( _____ )	( _____ )
<input type="checkbox"/> Commercial Use	Accessory Building (specify)	( _____ )	( _____ )
<input type="checkbox"/> Commercial Use	Accessory Building Addition/Alteration (specify)	( _____ )	( _____ )
<input type="checkbox"/> Municipal Use	Special Use: (explain)	( _____ )	( _____ )
<input type="checkbox"/> Municipal Use	Conditional Use: (explain)	( _____ )	( _____ )
<input type="checkbox"/> Municipal Use	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.

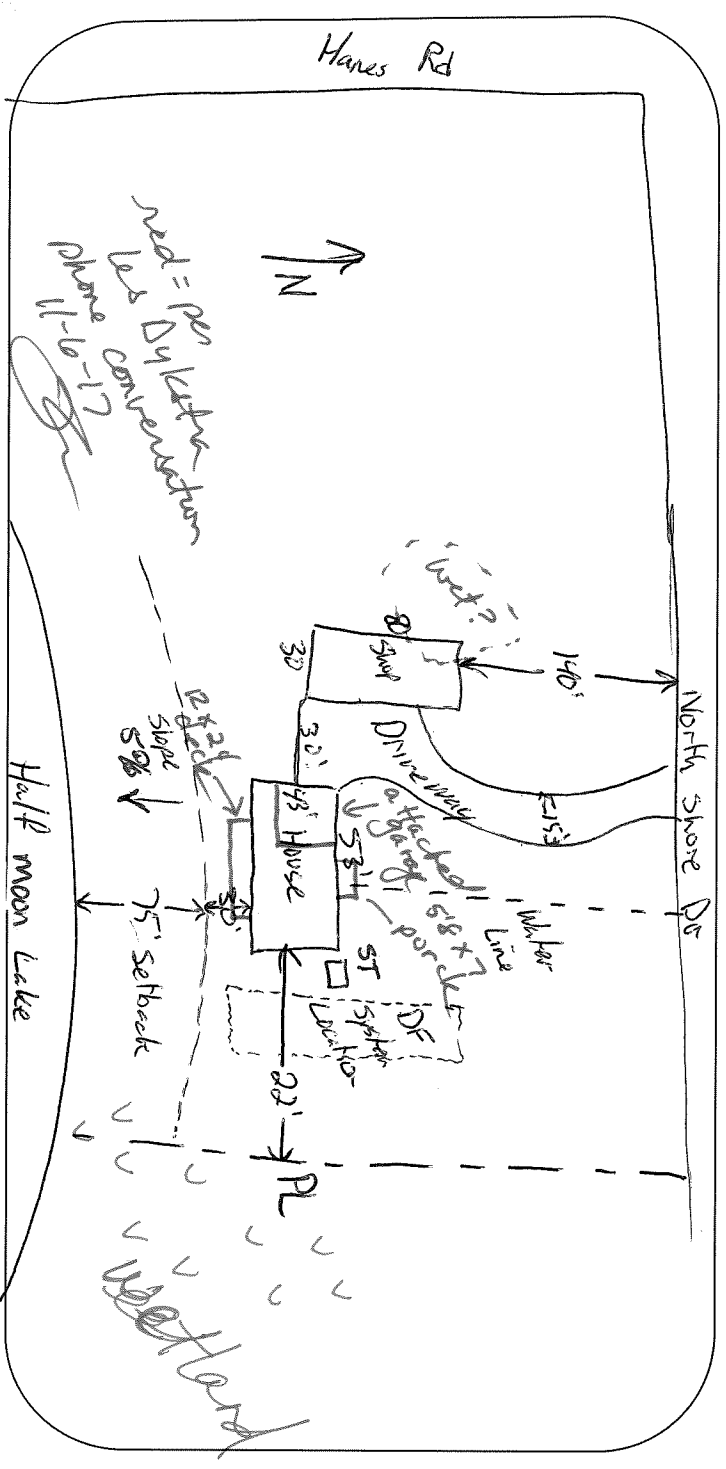
Owner(s): \_\_\_\_\_ Date \_\_\_\_\_  
 (If there are Multiple Owners listed on the Deed All Owners must sign OR letter(s) of authorization must accompany this application)

Authorized Agent: [Signature] Date 10/23/17  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit \_\_\_\_\_ Attach \_\_\_\_\_  
 (If you recently purchased the property send your Recorded Deed)

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

- Show Location of:**
- (1) Show / Indicate: **Proposed Construction**
  - (2) Show Location of (\*): **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)	93 105 12 Feet DECK
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	180 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	105 93 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	350 Feet	20% Slope Area on property	125 FT
Setback from the East Lot Line	22 Feet	Elevation of Floodplain	Yes No
Setback to Septic Tank or Holding Tank	12 Feet	Setback to Well	Feet
Setback to Drain Field	15 Feet		Feet
Setback to Privy (Portable, Composting)	Feet		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)**

Permit Denied (Date): \_\_\_\_\_ Sanitary Number: 17-1465 # of bedrooms: 2 Sanitary Date: 10-30-17

Permit #: 17-0182 Permit Date: 11-7-17

Is Parcel a Sub-Standard Lot  Yes  No (Beed or Record) \_\_\_\_\_

Is Parcel in Common Ownership  Yes (Fused/contiguous lots)  No

Is Structure Non-Conforming  Yes \_\_\_\_\_  No

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

Was Parcel Legally Created  Yes  No CSW

Was Proposed Building Site Delineated  Yes  No Staked.

Inspection Record: ORIGINAR CSW DOES NOT SHOW ANY ATTY TRAIL

Date of Inspection: 11-2-17 Inspected by: J Murphy

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

Zoning District (R-1)

Lakes Classification (3-1/2 MOON)

THE WDRN FIRST. IF PAVES, DIMENSIONS, PLACEMENT OF HOUSE

Signature of Inspector: \_\_\_\_\_

Hold For Sanitary:  \_\_\_\_\_ Hold For TBA:  \_\_\_\_\_ Hold For Affidavit:  \_\_\_\_\_ Hold For Fees:  \_\_\_\_\_ Date of Approval: 11-2-17

CHANGES, AMENDMENT SHALL BE APPROVED BY COUNTY

1st UDC PERMIT + INSPECTION REQUIRED

village, State or Federal  
May Also Be Required

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

USE - X  
UNITARY - 17-130S  
GN -  
SPECIAL -  
CONDITIONAL -  
BOA -

No. **17-0450** Issued To: **Gary & Florence Schacht**

Location: - 1/4 of - 1/4 Section **8** Township **47** N. Range **8** W. Town of **Iron River**

Par in  
Gov't Lot **5** Lot **2** Block Subdivision CSM#

For: **Residential Use:** [ **1- Story; Residence (53' x 37') = 1,961 sq. ft.; Porch (5.8' x 7') = 40.6 sq. ft.; Deck (12' x 24') = 288 sq. ft.; Attached Garage (23.4' x 21.4') = 500.76 sq. ft. ]**  
**Total Overall = 2,790 sq. ft.**

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

**Condition(s):** No wetland shall be disturbed - filled or graded - in the process of building without a permit being issued by the WDNR first. If plans, dimensions, placement of the house change, amendment shall be approved by County first. UDC permit and inspection 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

**November 7, 2017**

Date