

**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  
**REGULATIVE**  
 Date Submitted: MAY 16 2012

Permit #: 12-0181 **ENTERED**  
 Date: 5-18-12  
 Amount Paid: \$105.00 205  
 Refund: 5/12/12

**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. HOW DOT I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

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

Owner's Name: Jack Gust Mailing Address: 1126 Elm Street City/State/Zip: Menomonie WI 54751 Telephone: 715-235-1915

Address of Property: 3690 Lake Rd City/State/Zip: Barnes WI 54873 Cell Phone: 715 308-2255

Contractor: Maintenance Construction Contractor Phone: 715-795-2220 Plumber: Above Plumber Phone: Above

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Toreny Briscoll Agent Phone: 715 795-2220 Agent Mailing Address (include City/State/Zip): 52230 Maer Rd Barnes WI 54873 Written Authorization Attached:  Yes  No

PROJECT LOCATION: 1/4, 1/4 Legal Description: (Use Tax Statement) 04-004-2-44-09-09-105-003-1000 PIN: (23 digits) 04-004-2-44-09-09-105-003-1000 Recorded Document: (i.e. Property Ownership) 928 Page(s) 113

Section 9, Township 44 N, Range 9 W Town of: Barnes Lot Size 1.601 Acreage

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: 150 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 (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$ <u>35,000</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 <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Storage <input type="checkbox"/> None	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> None	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: <u>Overhead</u> <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 36 Width: 44 Height: 14

Proposed Construction: Length:          Width:          Height:         

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	Residence (i.e. cabin, hunting shack, etc.)	( <u>        </u> )	( <u>        </u> )
<input checked="" type="checkbox"/> Residential Use	with Loft	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	with a Porch	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	with (2 <sup>nd</sup> ) Porch	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	with a Deck	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	with (2 <sup>nd</sup> ) Deck	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	with Attached Garage	( <u>        </u> )	( <u>        </u> )
<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)	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	Mobile Home (manufactured date)	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Municipal Use	Addition/Alteration (specify)	( <u>        </u> )	( <u>        </u> )
<input checked="" type="checkbox"/> Residential Use	Accessory Building (specify) <u>Garage</u>	( <u>36 X 44</u> )	( <u>1584</u> )
<input type="checkbox"/> Municipal Use	Accessory Building Addition/Alteration (specify)	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	Special Use: (explain)	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	Conditional Use: (explain)	( <u>        </u> )	( <u>        </u> )
<input type="checkbox"/> Commercial Use	Other: (explain)	( <u>        </u> )	( <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): \_\_\_\_\_ Date: 5/12/12

(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: 5/12/12

Record for Issuance: [Signature] at signing on behalf of the owner(s) a letter of authorization must accompany this application)

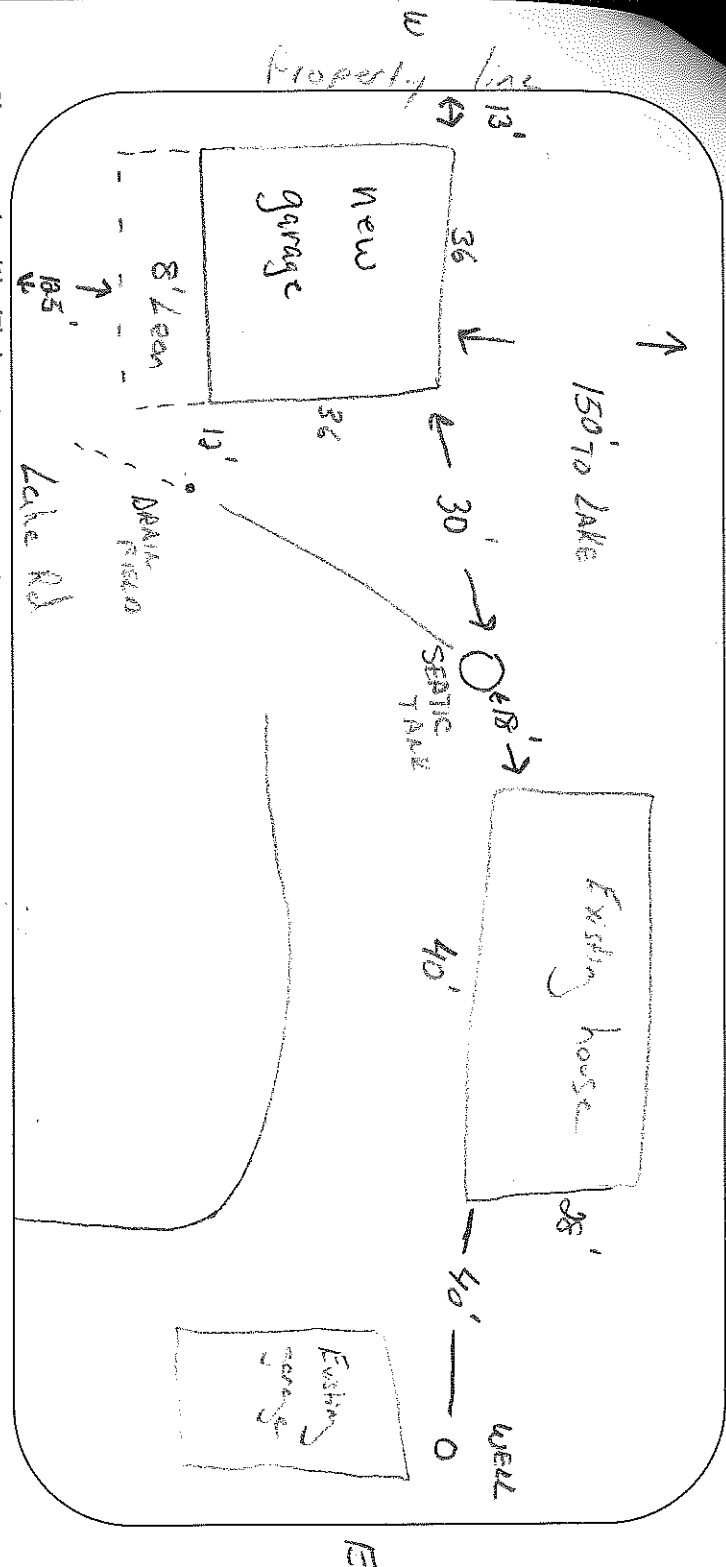
Address to send permit: 52230 Maer Rd Barnes WI 54873 Copy of Tax Statement

Attachments:         

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Secretary Staff

- Draw or Sketch your Property** (regardless of what you are applying for)
- Show Location of:
    - Show / Indicate: North (N) on Plot Plan
    - Show Location of (\*): All Existing Structures on your Property
    - Show: (\*): Well (W), (\*): Septic Tank (ST), (\*): Drain Field (DF), (\*): Holding Tank (HT) and/or (\*): Privy (P)
    - Show any (\*): (\*): Lake, (\*): River, (\*): Stream/Creek, or (\*): Pond
    - 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	12.5 Feet	Setback from the Lake (ordinary high-water mark)	150 Feet
Setback from the Established Right-of-Way	N/A Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	130 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	12.5 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	13 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	130 Feet	Elevation of Floodplain	136.7 Feet
Setback to Drain Field	30 Feet	Setback to Well	130 Feet
Setback to Privy (Portable, Composting)	N/A 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.

**Issuance Information (County Use Only)**

Permit Denied (Date): \_\_\_\_\_ Sanitary Number: \_\_\_\_\_ # of bedrooms: \_\_\_\_\_ Sanitary Date: \_\_\_\_\_

Permit #: 12-0131 Permit Date: 5-18-12

Is Parcel a Sub-Standard Lot  Yes  No (Deed of Record)  No

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

Were Property Lines Represented by Owner Was Property Surveyed  Yes  No

Inspection Record: Well staked. Met all setbacks. Inspected by: M Fustak Zoning District (R-1) Lakes Classification (1)

Date of Inspection: 5-15-12 Inspected by: M Fustak Date of Re-Inspection: \_\_\_\_\_

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

No water under pressure in structure. May not be used for human habitation.

Signature of Inspector: Michael Fustak Date of Approval: 5-16-12

Hold For Sanitary:  \_\_\_\_\_ Hold For TBA:  \_\_\_\_\_ Hold For Affidavit:  \_\_\_\_\_ Hold For Fees:  \_\_\_\_\_