

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
 Bayfield County  
 Planning and Zoning Depart.  
 P.O. Box 58  
 Washburn, WI 54891  
 (715) 373-6138

APPLICATION FOR PERMIT  
 FILED COUNTY RECORDS  
 Stamp (received)  
 JUL 25 2012  
 Bayfield Co. Zoning Dept.

Permit #:	12-0975	<b>ENTERED</b>
Date:	8-1-12	
Amount Paid:	\$75.00 (25)	
Refund:	7/26/12	

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

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

Owner's Name: Kent Bahner Mailing Address: 259 Cove Lane City/State/Zip: Hudson WI 54016 Telephone: 715-386-2814

Address of Property: 50795 Peninsula Rd City/State/Zip: Barnes WI 54873 Cell Phone: \_\_\_\_\_

Contractor: Dave Christensen Const. Contractor Phone: 715-785-9358 Plumber: \_\_\_\_\_ Plumber Phone: \_\_\_\_\_

Authorized Agent: (Person Signing Application on behalf of Owner(s))  
Dave Christensen Agent Phone: 795-2358 Agent Mailing Address (include City/State/Zip): 52685 Lake Rd Barnes WI 54873 Written Authorization Attached  Yes  No

PROJECT LOCATION: Legal Description: (Use Tax Statement) 1/4, \_\_\_\_\_ 1/4 Gov't Lot \_\_\_\_\_ Lot(s) 5w CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. 1 Block(s) No. 2 Subdivision: Eastview Lake Park Recorded Document: (i.e. Property Ownership) 14600 Volume 1052 Page(s) 225

Section 09, Township 44 N, Range 09 W Town of: Barnes Lot Size 200 X 600 Acreage 2.84

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

Distance Structure is from Shoreline: 150' 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>14,500.00</u>	<input checked="" type="checkbox"/> New Construction <input checked="" 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 checked="" type="checkbox"/> Seasonal <input type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Existing Tank</u> <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 type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Proposed Construction: Screen Pools Length: 218" Width: 15' Height: 8'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( ) X ( )	
	Residence (i.e. cabin, hunting shack, etc.)	( ) X ( )	
	with Loft	( ) X ( )	
	with a Porch	( ) X ( )	
	with (2 <sup>nd</sup> ) Deck	( ) X ( )	
	with a Deck	( ) X ( )	
	Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities)	( ) X ( )	
	Mobile Home (manufactured date)	( ) X ( )	
<input checked="" type="checkbox"/> Residential Use	Addition/Alteration (specify) <u>Replacing existing Screen Pool 218" X 15'</u>	( ) X ( )	<u>526</u>
	Accessory Building (specify) <u>Changing room pitch/lift</u>	( ) X ( )	
	Accessory Building Addition/Alteration (specify)	( ) X ( )	
	Special Use: (explain)	( ) X ( )	
	Conditional Use: (explain)	( ) X ( )	
	Other: (explain)	( ) X ( )	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
 I (we) declare that this application (including an 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: Kent Bahner Date 7-24-12  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

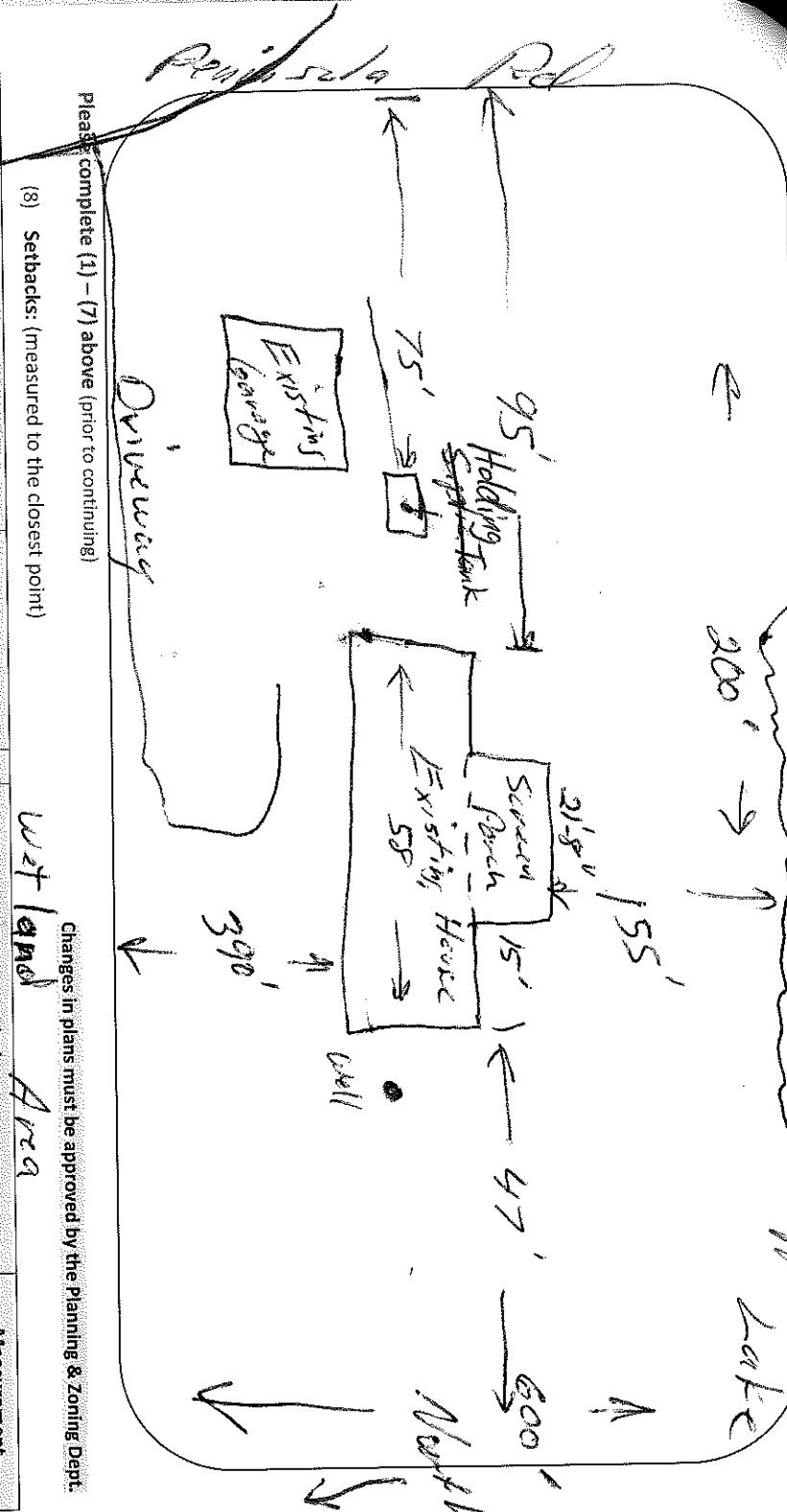
Rec'd for Issuance 2685 Lake Rd Barnes WI 54873 Attach Copy of Tax Statement   
 Address to send permit \_\_\_\_\_  
 AUG 1 2012

Secretarial Staff

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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

- (1) Show Location of: Proposed Construction  
 North (N) on Plot Plan  
 (\*) Driveway and (\*) Frontage Road (Name Frontage Road)  
 (3) Show Location of (\*): All Existing Structures on your Property  
 (4) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)  
 (5) Show: (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond  
 (6) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)  
 Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	350+	Setback from the Lake (ordinary high-water mark)	155
Setback from the Established Right-of-Way	350+	Setback from the River, Stream, Creek	NA
Setback from the North Lot Line	390	Setback from the Bank or Bluff	NA
Setback from the South Lot Line	155	Setback from Wetland	390
Setback from the West Lot Line	47	Setback from 20% Slope Area	NA
Setback from the East Lot Line	95	Elevation of Floodplain	NA
Setback to Septic Tank or Holding Tank	45	Setback to Well	10
Setback to Drain Field	35		
Setback to Privy (Portable, Composting)	NA		

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: \_\_\_\_\_  
 Reason for Denial: \_\_\_\_\_

Permit #: **19-0075** Permit Date: **8-1-12**

Is Parcel a Sub-Standard Lot:  Yes (Deed of Record)  No  No  
 Is Parcel in Common Ownership:  Yes (Fused/contiguous lots)  No  No  
 Is Structure Non-Conforming:  Yes  No  No

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

Was Parcel Legally Created:  Yes  No  No  No  
 Was Proposed Building Site Delineated:  Yes  No  No  No

Were Property Lines Represented by Owner:  Yes  No  Yes  No  
 Was Property Surveyed:  Yes  No  Yes  No

Affidavit Required:  Yes  No  Yes  No  
 Affidavit Attached:  Yes  No  Yes  No

Inspection Record:  
 Structure is existing.  
 Date of Inspection: **7-24-12** Inspected by: **M. Fuchs**  
 Zoning District: **(R-1)**  
 Lakes Classification: **(1)**  
 Date of Re-Inspection: \_\_\_\_\_

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

Signature of Inspector: **M. Fuchs** Date of Approval: **7-25-12**  
 Signature of Applicant: **Justin**  
 Hold For Sanitary:  \_\_\_\_\_ Hold For TBA:  \_\_\_\_\_ Hold For Affidavit:  \_\_\_\_\_ Hold For Fees:  \_\_\_\_\_