

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

**APPLICATION FOR PERMIT**  
 BAYFIELD COUNTY, WISCONSIN  
 RECEIVED  
 SEP 10 2012  
 Bayfield Co. Zoning Dept.

Permit #: 10-0344  
 Date: 9-12-12  
 Amount Paid: \$75,000  
 Refund: 9/10/12 \$100  
 ENTERED

**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: Lovetta Peterson Mailing Address: 3065 Bay Lake Rd Barnes, WI 54873 Telephone: 795-3753

Address of Property: same City/State/Zip: WI 54873 Cell Phone: \_\_\_\_\_

Contractor: self Contractor Phone: \_\_\_\_\_ Plumber: \_\_\_\_\_

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: \_\_\_\_\_ Agent Mailing Address (include City/State/Zip): \_\_\_\_\_

PROJECT LOCATION: Part of 1/4 5 Gov't Lot: \_\_\_\_\_ Lot(s): \_\_\_\_\_ CSM: \_\_\_\_\_ Vol & Page: \_\_\_\_\_ Lot(s) No.: \_\_\_\_\_ Block(s) No.: \_\_\_\_\_ Subdivision: 864 Recorded Document: (i.e. Property Ownership) 66000 Volume 236 Page(s) 452

Section 4, Township 44 N, Range 9 W Town of: Barnes Lot Size \_\_\_\_\_ Acreage 1.011

Distance Structure is from Shoreline: \_\_\_\_\_ feet  
 Distance Structure is from Shoreline: 80 feet

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?  Yes  No  
 Is Property/Land within 1000 feet of Lake, Pond or Flowage?  Yes  No

Is Property in Floodplain Zone?  Yes  No  
 Are Wetlands Present?  Yes  No

Written Authorization Attached  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
\$6000	<input 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 type="checkbox"/> Seasonal <input checked="" 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>Box</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: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_  
 Proposed Construction: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( X X )	
	Residence (i.e. cabin, hunting shack, etc.)	( X X )	
	with Loft	( X X )	
	with a Porch	( X X )	
	with (2 <sup>nd</sup> ) Deck	( X X )	
	with (2 <sup>nd</sup> ) Deck	( X X )	
	with Attached Garage	( X X )	
<input type="checkbox"/> Commercial Use	Bunkhouse w/ ( <input type="checkbox"/> sanitary, <input type="checkbox"/> sleeping quarters, <input type="checkbox"/> cooking & food prep facilities)	( X X )	
	Mobile Home (manufactured date)	( X X )	
	Addition/Alteration (specify) <u>roof over deck</u>	( 30 X 13.5 )	270
	Accessory Building (specify)	( X X )	
	Accessory Building Addition/Alteration (specify)	( X X )	
	Special Use: (explain)	( X X )	
	Conditional Use: (explain)	( X X )	
	Other: (explain)	( X X )	

**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): Lovetta Peterson  
 (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 9-7-12

Rec'd for Issuance same as above (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit same as above Copy of Tax Statement

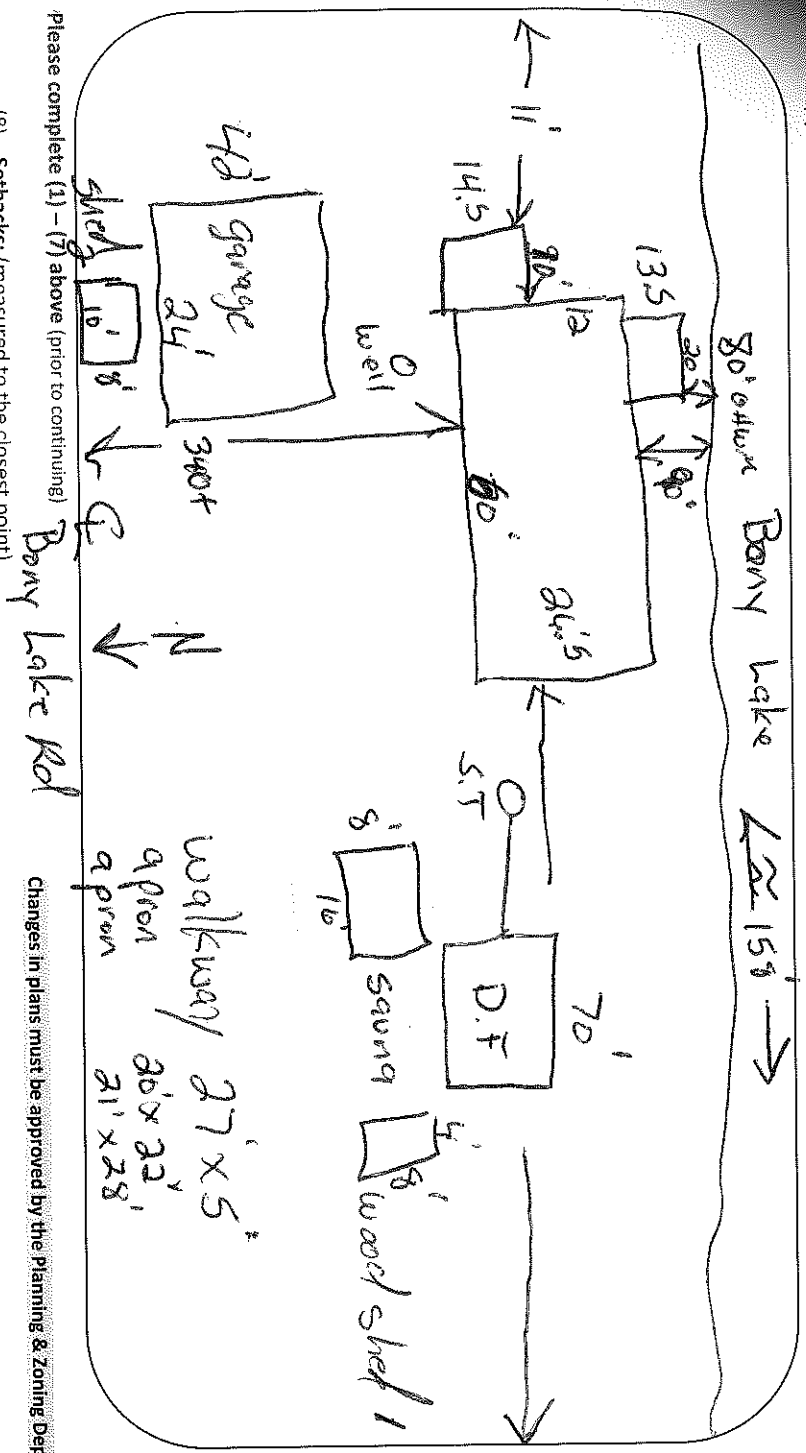
SEP 12 2012 APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Secretarial Staff

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

158' x 300'

- Proposed Construction
- (1) Show location of: North (N) on Plot Plan
  - (2) Show / Indicate: (\* ) Driving Structures on your Property
  - (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%
  - (7) Show any (\*):



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	340' Feet	Setback from the Lake (ordinary high-water mark)	80' Feet
Setback from the Established Right-of-Way	330' Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	N/A Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	N/A Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	70' Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	11' Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	8' Feet	Setback to Well	23' Feet
Setback to Drain Field	8' 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 #: **12-0844** Permit Date: **9-12-12**

Is Parcel a Sub-Standard Lot  Yes  No  
 Is Parcel in Common Ownership  Yes (Fused/Contiguous Lot(s))  No  
 Is Structure Non-Conforming  Yes  No

Granted by Variance (B.O.A.) Case #: \_\_\_\_\_ Previously Granted by Variance (B.O.A.) Case #: \_\_\_\_\_

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

Were Property Lines Represented by Owner Was Property Surveyed  Yes  No

Inspection Record: **Meets all requirements.**

Date of Inspection: **9-11-12** Inspected by: **M. Fuchs** Zoning District: **R-1**  
 Lakes Classification: **R-3**

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

Date of Approval: **9-12-12**

Signature of Inspector: **Michael Fuchs**

Hold For Sanitary:  Hold For TBA:  Hold For Affidavit:  Hold For Fees:

**APPLICATION FOR  
RECREATIONAL VEHICLE**

\$75



**RECEIVED**  
SEP 12 2012

Bayfield County Zoning Department  
P.O. Box 58  
117 East Sixth Street  
Washburn, WI 54891  
Phone - (715) 373-6138

Bayfield Co. Zoning Dept.

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Changes in plans must be approved by the Zoning Department

Office Use:	
Application No.	12-0350
Date	9-12-12
Fee Paid	\$75.00 PDS
CASH	9/12/12

**Applicant** James C Hardy **Property Address** 55805 Wilderness Ct  
**Mailing Address** 1725 Lyax Rd **of RV** Barnes, WI 54873  
Barnes, WI 54873  
**Telephone** 715-795-3202 **Written Authorization Attached:** Yes ( ) No

**Accurate Legal Description involved in this request:** **Zoning District:** R-1, Class 3  
1/4 of 1/4 of Section 18 Township 45 N. Range 9 W. Town of Barnes  
**Gov't Lot** 5 **Block** Subdivision Cree Add. to Pitcairni Estates **CSM #** \_\_\_\_\_  
**Volume** 271 **Page** 537 **of Deeds** 04-004-2-45-09-18-1 00-154-0500 **Parcel I.D. #** \_\_\_\_\_  
**ACREAGE** 1.759

**Additional Legal Description:** \_\_\_\_\_ **ATTACH**  
 Copy of Tax Statement  
 Is your RV in a Shoreland Zone? Yes  No  If Yes, Distance from Shoreline: 75' or greater  < 75' to 40'  less than 40'   
**RV:** New  Replacement  **Vin #** 38555682  
**Make of RV:** Jayco **Model of RV:** Designer Series

FAILURE TO OBTAIN A PERMIT OR PLACING RV ON PROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES  
**APPLICANT - PLEASE COMPLETE REVERSE SIDE**

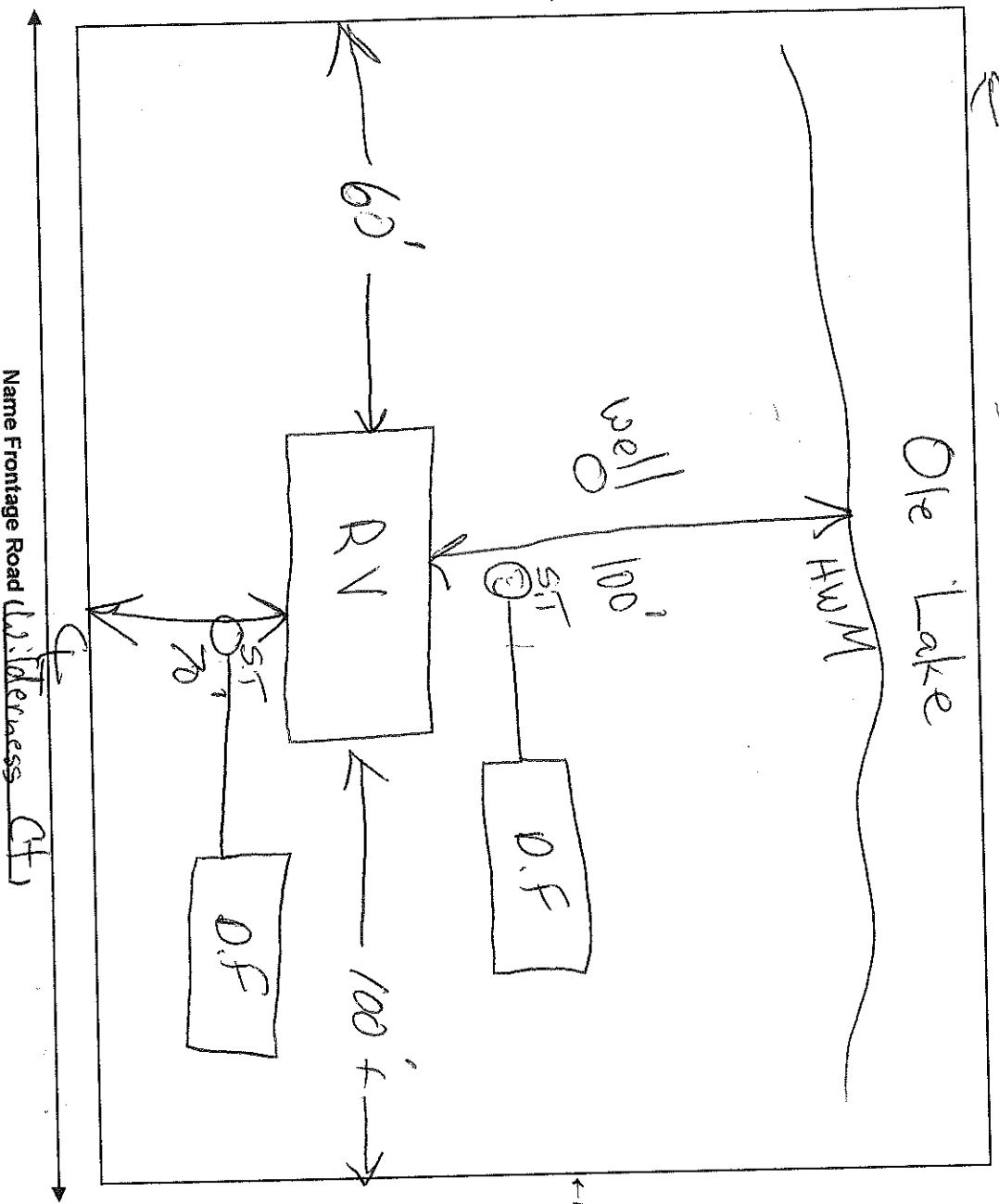
<b>For Office Use Only</b>	
<b>Permit Issued:</b>	<b>Sanitary Number</b> <u>496-387</u> <b>Date</b> <u>5-11-06</u>
<b>Issuance Date</b> <u>9-12-12</u> <b>Permit Number</b> <u>12-0350</u> <b>Permit Denied (Date)</b> _____	
<b>Reason for Denial:</b> _____	
<b>Inspection Record:</b> <u>Met with neighbors.</u>	
By <u>M. Fuchsle</u> <b>Date of Inspection</b> <u>9-11-12</u>	
<b>Variance (B.O.A.) #</b> _____	
<b>Condition:</b> <u>RV may be placed up to 4 months from issuance date.</u> <b>Must be removed by:</b> <u>NA applied for</u>	
<b>Rec'd for Issuance</b> <u>SEP 12 2012</u> <b>Signed</b> <u>Michael Fuchsle</u> <b>Inspector</b> _____ <b>Date of Approval</b> <u>9-12-12</u>	

and use frontage road as a guideline, and indicate North (N) on plot plan  
 show the RV (Recreation Vehicle) location

**IMPORTANT**  
 Detailed Plot Plan is Necessary

Show dimensions in feet on the following:

- a. RV from centerline of road(s).
- b. RV from right-of-way line
- c. RV from property lines
- d. RV from lake, river, stream or pond
- e. RV from Privy



NOTICE: The local town, village, city, state or federal agencies may also require permits.

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 or Authorized Agent Shawn Kelly Date 9/13/19  
 Address to send permit 1735 Lyx Rd, Barnes, WI 54873

**APPLICATION FOR  
RECREATIONAL VEHICLE**

**R E C E I V E D**  
MAY 13 2011

Bayfield County Planning and Zoning Department  
P.O. Box 58  
117 East Sixth Street  
Washburn, WI 54891  
Phone - (715) 373-6138

Bayfield Co. Zoning Dept.

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Office Use:	Zoning District/Lakes Class	<u>R-1</u>
	Application No.	<u>10-0363</u>
	Date	<u>9-14-10</u>
	Fee Paid	<u>\$75.00 RDS</u>
		<u>5/13/11</u>



**Applicant** Neil + Laraine Otis **Property Address** 56280 Bearfoot Trail  
**Mailing Address** 34 Judith Dr Barnes WI 54872  
Chaska, MN 553818  
**Telephone** 952 564 5893 **Written Authorization Attached:** Yes ( ) No (X)

**Accurate Legal Description involved in this request:**

**Zoning District:** R-1

SE 1/4 of A 1/4 of Section 7 Township 45 N. Range 9 W. Town of Barnes  
**Gov't Lot** 4D **Block** \_\_\_\_\_ **Subdivision** \_\_\_\_\_ **CSM #** \_\_\_\_\_

**Volume** 1998 **Page** 114 **of Deeds** **Parcel I.D. #** 2404.245097 **400 sq' Acreage** 1.08

**Additional Legal Description:** Copy Addition to Petition to States **ATTACH**  
 Copy of Tax Statement

Is your RV in a Shoreland Zone? Yes  No  If Yes, Distance from Shoreline: 75' or greater  < 75' to 40'  less than 40'

**RV:** New  **Replacement**  **Vin #** 1M1BA1R00FA038304

**Make of RV:** NVVA **Model of RV:** Trailer 35'

FAILURE TO OBTAIN A PERMIT OR PLACING RV ON PROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES

APPLICANT - PLEASE COMPLETE REVERSE SIDE

<b>Permit Issued:</b>	<b>For Office Use Only</b>
<b>Issuance Date</b> _____	<b>Permit Number</b> _____
<b>Reason for Denial:</b> _____	<b>Sanitary Number</b> _____
<b>Inspection Record:</b> <u>Meets all setbacks Property Lines per owner's representations.</u>	<b>Permit Denied (Date)</b> _____
<b>Variance (B.O.A.) #</b> _____	<b>Date</b> _____
<b>Condition:</b> <u>RV may be placed up to 4 months from issuance date. Must be removed by: 9-30-11</u>	<b>By</b> <u>M Furtak</u> <b>Date of Inspection</b> <u>5-17-11</u>
<b>Rec'd for Issue:</b> <u>Signed</u> <u>Michael Furtak</u> <b>Inspector</b>	<b>Date of Approval</b> <u>5-19-11</u>

SUB

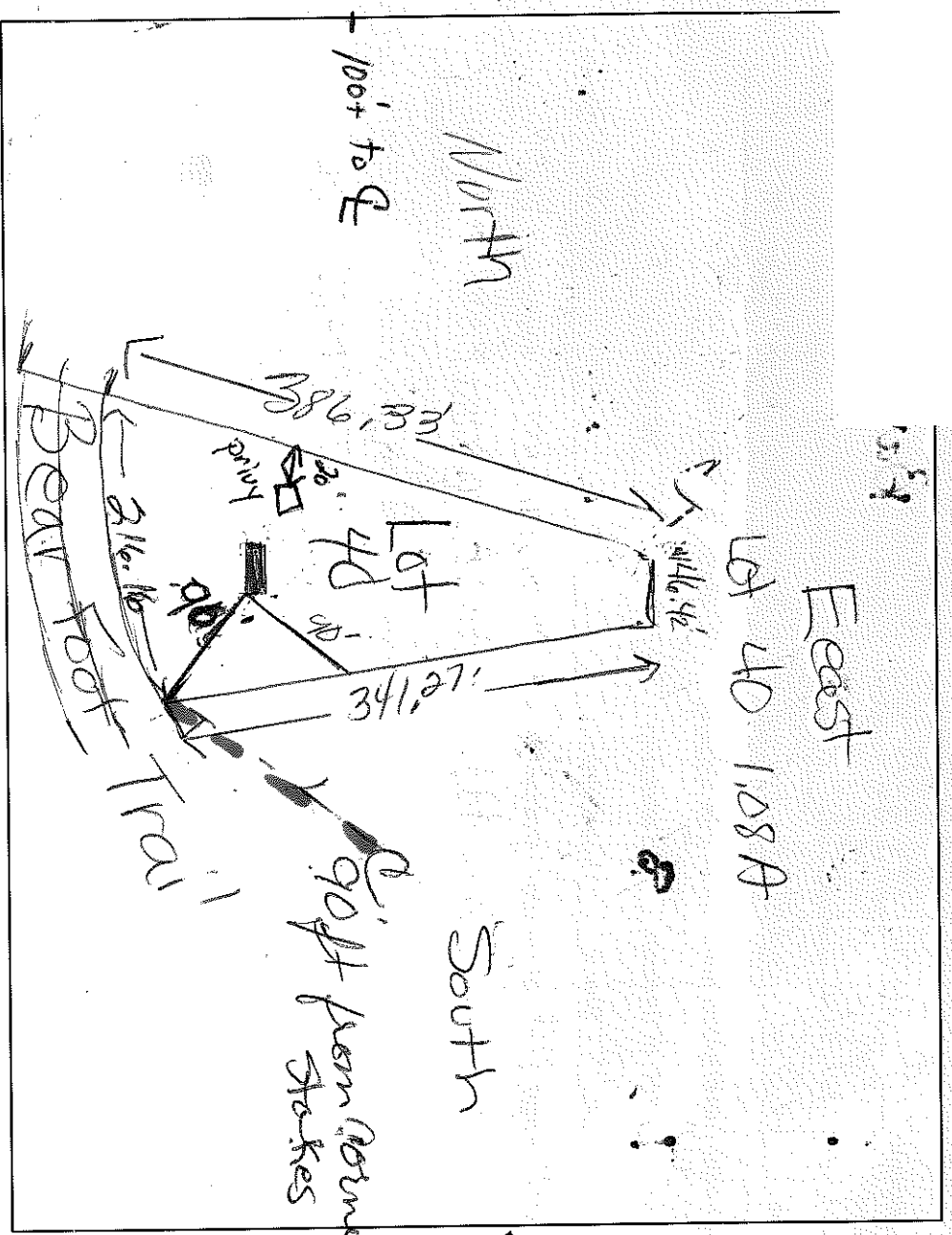
Secretarial Staff

to ISSUE  
 with 2012  
 Permit #

define, and indicate North (N) on plot plan  
 action  
 ming:

**IMPORTANT**  
 Detailed Plot Plan is Necessary

- d. RV from lake, river, stream or pond
- e. RV from Privy



Name Frontage Road (Bear Foot)

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Owner or Authorized Agent Johanne Otis Date 5.6.11  
 Address to send permit 34 Judith Dr Chaska, MN 55318