

APPLICATION FOR SIGN

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

7/12/2012
RDS

Office Use:
Application No. <u>13-0153</u>
Date <u>6-26-13</u>
Fee Paid <u>50-7-12-13</u>
<u>TRH 125-7-12-12</u>

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.
Changes in plans must be approved by the Zoning Department



Applicant Renate Hauser Contractor Self

Address 87380 Betzold Rd Authorized Agent _____

Bayfield, WI 54814 Agent's Telephone _____

Telephone 715-779-0121 Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request: Ag-1 Zoning District: _____

NE 1/4 of SW 1/4 of Section 2 Township 50 N. Range 4 W. Town of Bayfield

Gov't Lot _____ Lot _____ Block _____ Subdivision _____ CSM # _____

Volume 1083 Page 981 of Deeds Parcel I.D. # _____ ACREAGE 80 40

Additional Legal Description: _____ ATTACH Copy of Tax Statement

Sign: On-premise Off-premise Sign: New Replacement

Size of Sign: 4 Feet by 4 Feet Height of Sign: _____ Feet from grade to top of Sign

If this sign is off-premise, owner of property must complete the following:

I, _____, owner of the above described property, do hereby give my authorization for _____ Signed _____ Date _____ to erect and maintain a sign on my property.

Property Owner
FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
APPLICANT - PLEASE COMPLETE REVERSE SIDE

Permit Issued:	Permit Number <u>13-0153</u>	Permit Denied (Date)	Secretarial Staff
Date <u>10-26-13</u>			
Reason for Denial:			

Rec'd for Issuance
JUN 26 2013

Inspection Record: Existing Posts Used For Sign Located Where Requested

Application By Robt Sliemers Date of Inspection 6/24/2013

Variance (B.O.A.) # _____

Condition _____ Signed [Signature] Date of Approval 6/25/2013
Inspector [Signature]

FRS 225' T & A

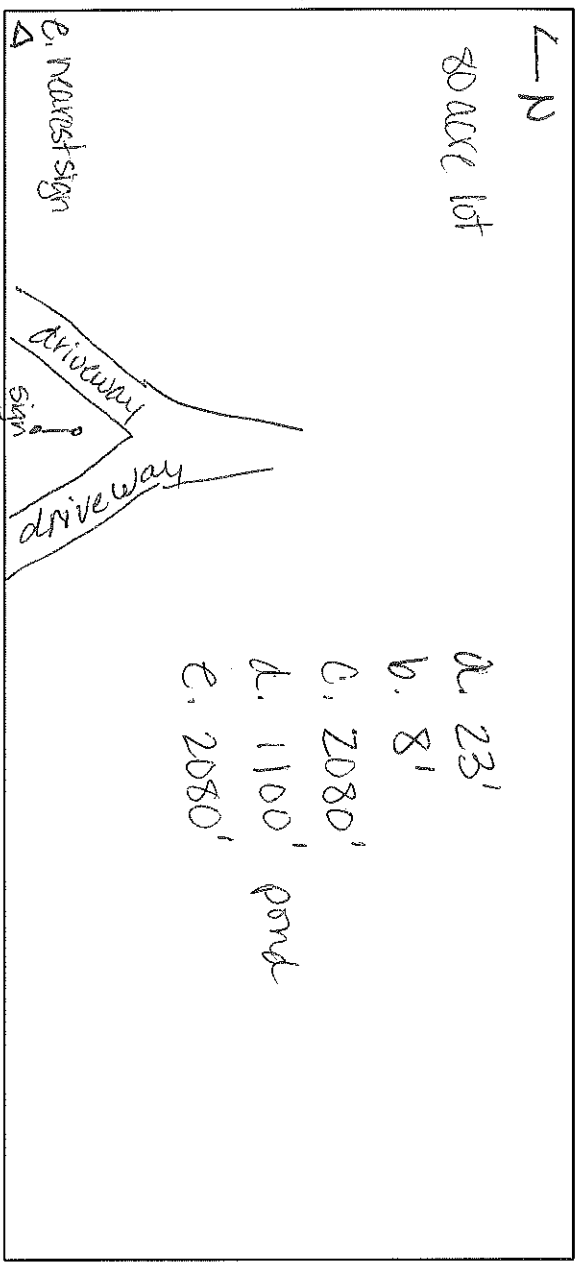
and use frontage road as a guideline, and indicate North (N) on plot plan

the sign location

IMPORTANT
Detailed Plot Plan is Necessary

Show dimensions in feet on the following:

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



Name Frontage Road (Betzold Rd)
 NOTICE: The local town, village, city, state or federal agencies may also require permits.
 Sign Plan
 (Fill in Information Desired on Sign)

see attached

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.

I, the undersigned, attest that the information contained herein is accurate and true.

Samara Harlow Applicant's/ Agent's Signature 7.12.12 Date
PO Box 1241, Bayfield, WI 54814 Address to Mail Permit to

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 (Required)
JUN 07 2013
 Bayfield Co. Zoning Dept.

#1/200 + \$175
ENTERED
 Permit #: 13-0154
 Date: 6-26-13
 Amount Paid: \$1575
 Return: 6-10-13

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: BAUCE S RAND GOLOB-RAND
Address of Property: 17410 32nd AVE N PLYMOUTH, WI 53447
 37267 County Hwy J
City/State/Zip: BAYFIELD, WI 54814
Telephone: 743 464-1301
Cell Phone: 612-840-7404

Contractor: Cedar Brook Const LLC
Agent Phone: 278-3400
Plumber: BUCKENAN PLUMBING
Plumber Phone: 715 282 2050
Agent Mailing Address (include City/State/Zip): Heating
 715 282 2050
Written Authorization Attached: Yes No

PROJECT LOCATION: NW 1/4, SW 1/4
Legal Description: (Use Tax Statement)
 PIN: (23 digits) 04-006-2-50-04-15-2 0000-0000
 Section 15 Township 52 N. Range 4 W
Gov't Lot: 2 **Lot(s):** 2 **CSM:** 1379 **Vol & Page:** 8 218 **Lot(s) No.:** 2 **Block(s) No.:** 2
Subdivision: BAYFIELD **Volume:** 1000 **Page(s):** 687
Recorded Document: (i.e. Property Ownership)
Lot Size: **Acres:** 5

Non-Shoreland

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: _____ 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
\$ 400,000	<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 type="checkbox"/> 1-Story <input checked="" 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"/> None	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) <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"/> Sewer <input 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	<input type="checkbox"/> Principal Structure (first structure on property) <input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2 nd) Deck with a Deck with (2 nd) Deck with Attached Garage	(54' x 33') (26' x 15') () () (14' x 12') (14' x 12') (28' x 28')	1782 390)) 168 784
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities) <input type="checkbox"/> Mobile Home (manufactured date) _____ <input type="checkbox"/> Addition/Alteration (specify) _____ <input type="checkbox"/> Accessory Building (specify) _____ <input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	() () () () ())))))
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Special Use: (explain) _____ <input type="checkbox"/> Conditional Use: (explain) _____ <input type="checkbox"/> Other: (explain) _____	() () ())))

Rec'd for issuance JUN 26 2013

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) understand that the application 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): Bauc S-Rand / Dan Granger
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

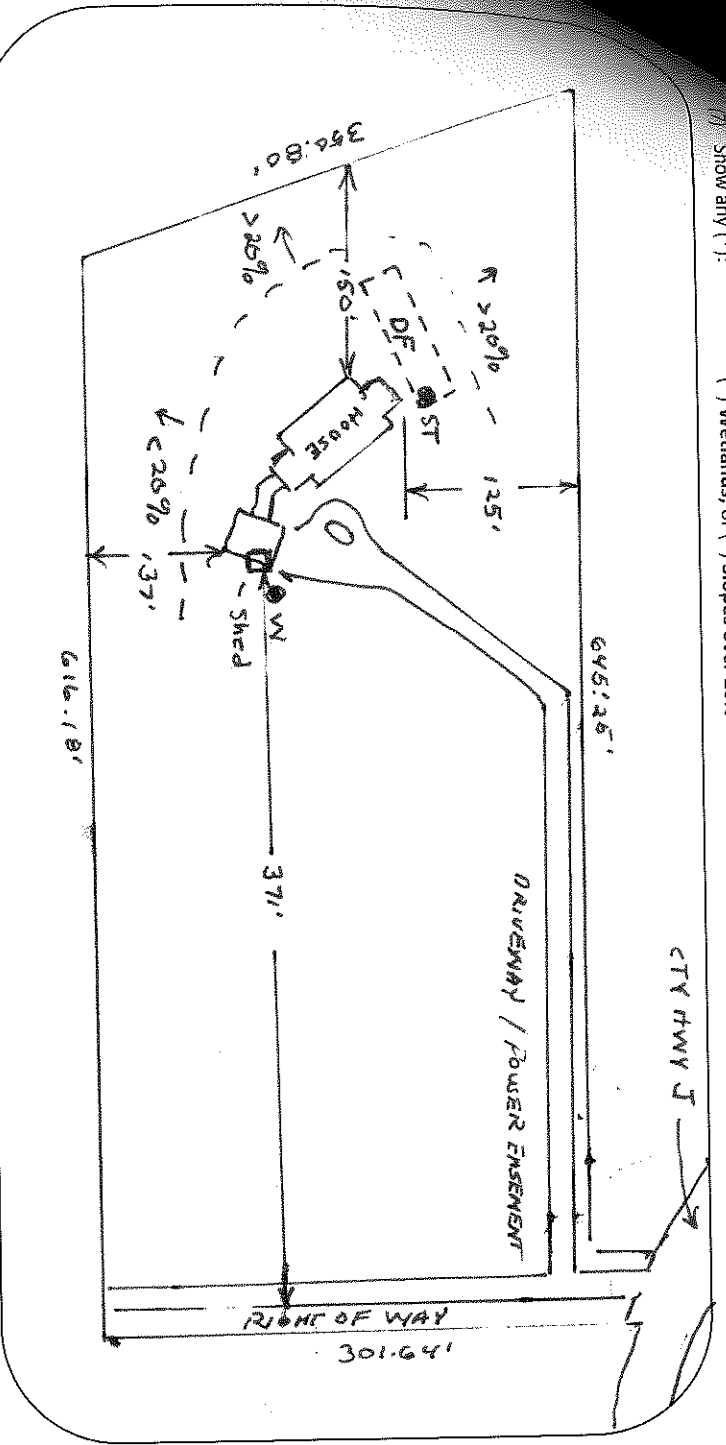
Authorized Agent: _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: 17410 32nd Ave N Plymouth, WI 53447
 (If you recently purchased the property send your Recorded Deed)

Date: June 7, 2013

Attach Copy of Tax Statement
 Copy of Recorded Deed

- Sketch your Property (regardless of what you are applying for):
- Proposed Construction
 - North (N) on Plot Plan
 - (*) Driveway and (*) Frontage Road (Name Frontage Road)
 - All Existing Structures on your Property
 - (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
 - (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 - (*) Wetlands; or (*) Slopes over 20%
- Show any (*):
- Show any (*):
- 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	371' Feet	Setback from the Lake (ordinary high-water mark)	NA
Setback from the Established Right-of-Way	371' Feet	Setback from the River, Stream, Creek	NA
Setback from the North Lot Line	125' Feet	Setback from the Bank or Bluff	NA
Setback from the South Lot Line	150' Feet	Setback from Wetland	NA
Setback from the West Lot Line	150' Feet	Setback from 20% Slope Area	55' Feet
Setback from the East Lot Line	371' Feet	Elevation of Floodplain	NA
Setback to Septic Tank or Holding Tank	13 Feet	Setback to Well	250' Feet
Setback to Drain Field	13 Feet		
Setback to Privy (Portable, Composting)	NA		

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 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) Sanitary Number: **B-533** # of bedrooms: **2** Sanitary Date: **6-20-13**

Permit Denied (Date): Reason for Denial: **6-20-13**

Permit #: **B-0154** Permit Date: **6-20-13**

Is Parcel a Sub-Standard lot Yes No

Is Parcel in Common Ownership Yes No

Is Structure Non-Conforming Yes No

Granted by Variance (B.O.A.) Yes No Case #: **NA**

Were Property Lines Represented by Owner Was Property Surveyed Yes No

Were Property Lines Represented by Owner Was Property Surveyed Yes No

Inspection Record: **Excellent delineation of building site & very well staked building site; Septic location. Owner identifies Code Compliant location.**

Date of Inspection: **6/11/2013** Inspected by: **Robert Schirman** Date of Re-Inspection:

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

Owner must obtain Uniform Dwelling Code (UDC) Permit, prior to starting construction, from locally contracted UDC inspector.

Signature of Inspector: **[Signature]** Date of Approval: **6/13/2013**

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