

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)
 JUL 09 2013
 Bayfield Co. Zoning Dept.

| | |
|--------------|--------------|
| Permit #: | 13-0195 |
| Date: | 7-19-13 |
| Amount Paid: | \$75 7-15-13 |
| Refund: | |

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: Greg Jansen
 Address of Property: 110975 fels Rd
 City/State/Zip: Cable, WI 54821
 Mailing Address: 2710 S 98th
 City/State/Zip: West Allis, WI 53227
 Contractor: Al Amundson
 Contractor Phone: 715-798-3620
 Plumber: Cable
 Authorized Agent: (Person Signing Application on behalf of Owner(s))
 Agent Phone: Agent Mailing Address (include City/State/Zip):

PROJECT LOCATION: SE 1/4, SE 1/4
 DNF (23 Acres) 04 012-2-43-07-22-4 04-00-3000
 Volume 1070 Page(s) 625
 Section 22, Township 43 N, Range 7 W, Town of: Cable
 Lot Size: _____ Acreage: 40

Recorded Document: (i.e. Property Ownership) _____
 Written Authorization Attached Yes No

Non-Shoreland

Shoreland → Is Property/Land within 300 feet of River, Stream, or Lake? Is Property/Land within 1000 feet of Lake, Pond or Flowage Creek or Landward side of Floodplain? antline → 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 |
|--|---|--|--|--|--|---|
| \$ | <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 type="checkbox"/> 1-Story <input checked="" type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story | <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 | <input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: <u>Drainfield</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: 13' 10" Width: 10' Height: 12'

Proposed Construction: _____

| Proposed Use | Proposed Structure | Dimensions | Square Footage |
|--|--|---------------------------------|----------------|
| <input type="checkbox"/> Principal Structure (first structure on property) | | () | |
| <input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) | | () | |
| <input type="checkbox"/> with Loft | | () | |
| <input checked="" type="checkbox"/> Residential Use | with a Porch with (2 nd) Porch with a Deck with (2 nd) Deck 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"/> Mobile Home (manufactured date) | | () | |
| <input type="checkbox"/> Addition/Alteration (specify) | | () | |
| <input type="checkbox"/> Accessory Building (specify) | | () | |
| <input checked="" type="checkbox"/> Accessory Building Addition/Alteration (specify) | <u>Woodshed</u> | (10' X 13'10") | 139' |
| Rec'd for issuance | | | |
| | Special Use: (explain) | () | |
| | Conditional Use: (explain) | () | |
| | 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 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.

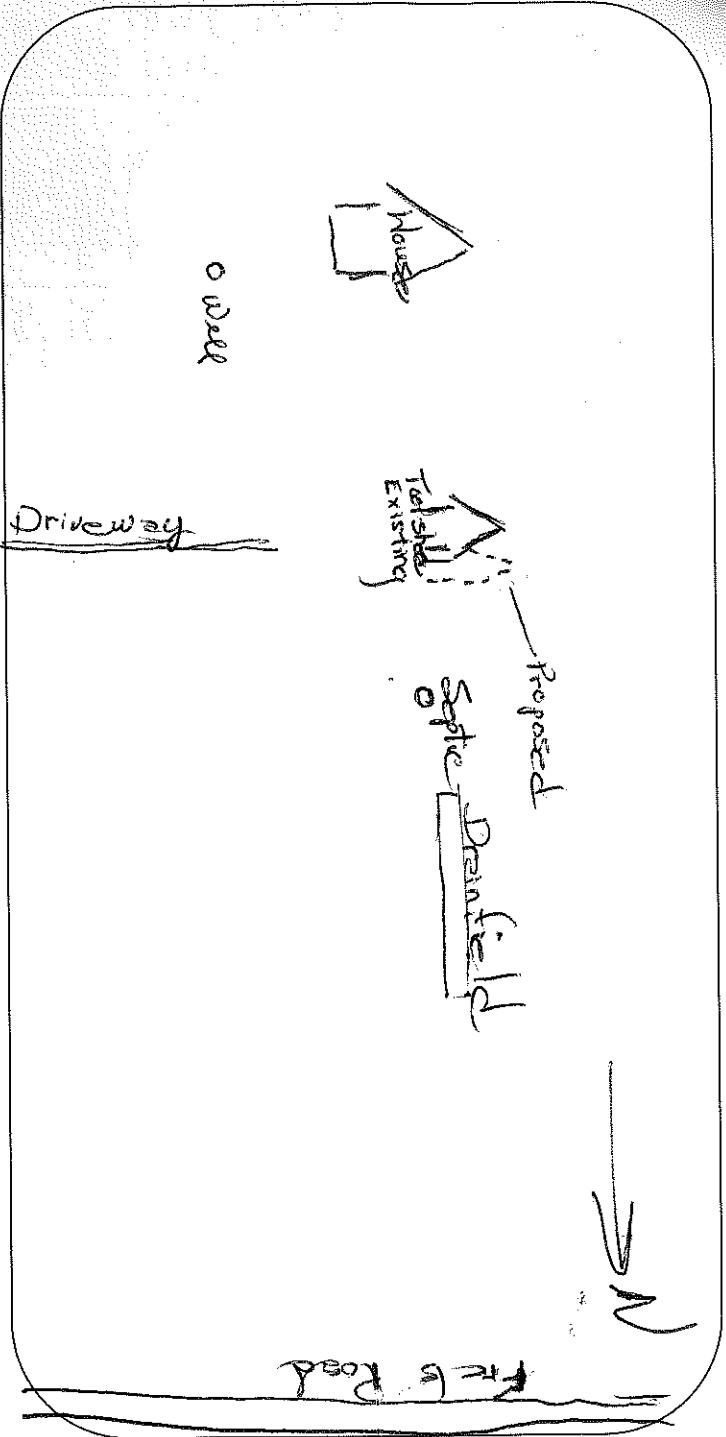
Owner(s): Greg Jansen
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Date 7/2/2013

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

Address to send permit same as above
 Attach

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

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: 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)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

| Description | Measurement | Description | Measurement |
|---|-------------|--|-------------|
| Setback from the Centerline of Platted Road | 1600' Feet | Setback from the Lake (ordinary high-water mark) | — Feet |
| Setback from the Established Right-of-Way | — Feet | Setback from the River, Stream, Creek | — Feet |
| Setback from the North Lot Line | 1000' Feet | Setback from the Bank or Bluff | — Feet |
| Setback from the South Lot Line | 320' Feet | Setback from Wetland | — Feet |
| Setback from the West Lot Line | 500' Feet | Setback from 20% Slope Area | — Feet |
| Setback from the East Lot Line | 800' Feet | Elevation of Floodplain | — Feet |
| Setback to Septic Tank or Holding Tank | 42' Feet | Setback to Well | 75' Feet |
| Setback to Drain Field | 52' Feet | | |
| Setback to Privy (Portable, Composting) | 114' 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: _____ # of Bedrooms: _____ Sanitary Date: _____

Reason for Denial: _____

Permit #: 13-0195 Permit Date: 7-19-13

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

Was Proposed Building Site Delisted Yes No

Were Property Lines Represented by Owner Yes No

Was Property Surveyed Yes No

Were Property Lines Represented by Owner Yes No

Was Property Surveyed Yes No

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

Affidavit Required Yes No

Affidavit Attached Yes No

Inspection Record:

Date of Inspection: 7-18-13 Inspected by: M. Finkbe

Zoning District: RKB

Lakes Classification: NA

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 Gwate Date of Approval: 7-19-13

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

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

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

RECEIVED
 JUL 1 0 2013

| | | |
|--------------|---------|---------|
| Permit #: | 13-0196 | ENTERED |
| Date: | 7-19-13 | |
| Amount Paid: | \$185 | 7-10-13 |
| Refund: | | |

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 Bayfield Co. Zoning Dept. HOW DO I FILE 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: JAMES + JUDY KRUEGER
 Address of Property: 18920 HWY M
 Mailing Address: 44795 BENE POND RD
 City/State/Zip: CARLE WI 57821
 Telephone: 715-798-3365

Contractor: JONES CONSTRUCTION
 Contractor Phone: 715-580-0826
 Plumber: CARLE WI 57821
 Plumber Phone: NO

Authorized Agent: (Person Signing Application on behalf of Owner(s))
 Agent Phone: 715-580-0826
 Agent Mailing Address (include City/State/Zip): CARLE WI 57821
 Written Authorization Attached: Yes No

PROJECT LOCATION: S/4 SE 1/4 SE 1/4
 Legal Description: (Use Tax Statement) PIN: (23 digits) 04-012-2-43-07-13-404-000
 Volume: 874 Page(s): 1035

Section: 13, Township: 43 N, Range: 7 W
 Town of: CARLE
 Lot Size: _____ Acreage: 150

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 |
|--|---|--|---|---|--|--|
| \$ | <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 type="checkbox"/> 1-Story <input checked="" type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> Foundation | <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round | <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> None | <input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: _____ <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input checked="" type="checkbox"/> Compost Toilet <input checked="" type="checkbox"/> None | <input type="checkbox"/> City <input type="checkbox"/> Well <input checked="" type="checkbox"/> None |

Existing Structure: (if permit being applied for is relevant to it) Length: 120' Width: 12' Height: 12'-8"

Proposed Construction: _____

| Proposed Use | Proposed Structure | Dimensions | Square Footage |
|---|---|------------|----------------|
| <input checked="" type="checkbox"/> Residential Use | Principal Structure (first structure on property) | () () | () |
| | Residence (i.e. cabin, hunting shack, etc.) | () () | () |
| | with Loft | () () | () |
| | with a Porch | () () | () |
| | with (2 nd) Porch | () () | () |
| | with a Deck | () () | () |
| | with (2 nd) Deck | () () | () |
| | with Attached Garage | () () | () |
| | Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities) | () () | () |
| | Mobile Home (manufactured date) | () () | () |
| | Addition/Alteration (specify) ADDITION TO EXISTING DOORWAY | (120 x 12) | 1440 |
| | Accessory Building (specify) | () () | () |
| | Accessory Building Addition/Alteration (specify) | () () | () |
| <input type="checkbox"/> Municipal Use | | | |
| Rec'd for Issuance | Special Use: (explain) | () () | () |
| | Conditional Use: (explain) | () () | () |
| | Other: (explain) | () () | () |

SECRETARIAL STAFF
 JUL 19 2013

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 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 and/or reasonable time for the purpose of inspection.

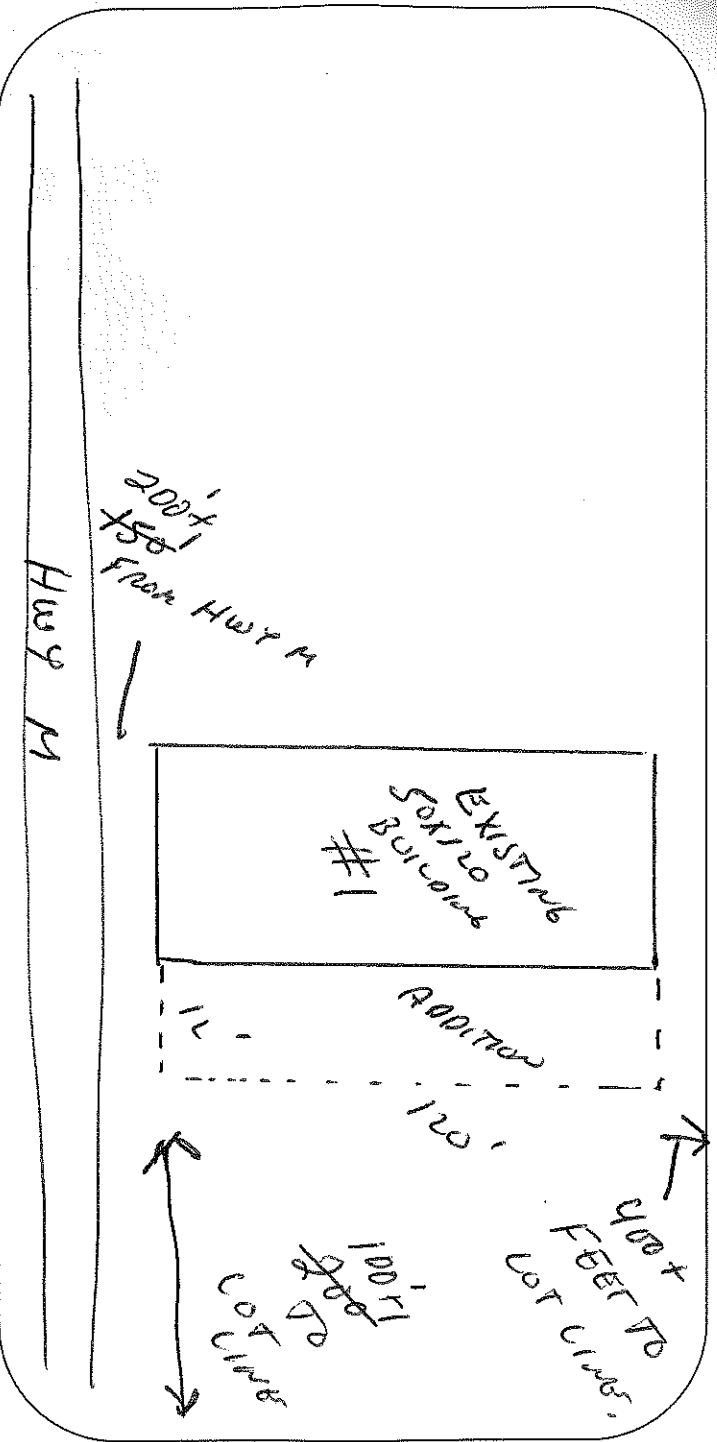
Owner(s): _____
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Address to send permit: Same as above
 Date: 7/11/13

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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' 150' | Setback from the Lake (ordinary high-water mark) | — Feet |
| Setback from the Established Right-of-Way | 120' + | Setback from the River, Stream, Creek | — Feet |
| Setback from the North Lot Line | 400' + | Setback from the Bank or Bluff | — Feet |
| Setback from the South Lot Line | 150' | Setback from Wetland | — Feet |
| Setback from the West Lot Line | 1000' | Setback from 20% Slope Area | — Feet |
| Setback from the East Lot Line | 100' setback | Elevation of Floodplain | — Feet |
| Setback to Septic Tank or Holding Tank | — | Setback to Well | — Feet |
| Setback to Drain Field | — | | — Feet |
| Setback to Privy (Portable, Composting) | — | | — 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.

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(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: | # of bedrooms: | Sanitary Date: |
| Permit Denied (Date): | | Reason for Denial: | | |
| Permit #: 13-0196 | Permit Date: 7-18-13 | | | |
| Is Parcel a Sub-Standard Lot | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Is Parcel in Common Ownership | <input type="checkbox"/> Yes (Deed of Record) | <input checked="" type="checkbox"/> No |
| Is Structure Non-Conforming | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Is Structure Non-Conforming | <input type="checkbox"/> Yes (Fused/Contiguous Lots) | <input checked="" type="checkbox"/> No |
| Granted by Variance (B.O.A.) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Case #: | Previously Granted by Variance (B.O.A.) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Was Parcel Legally Created | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Were Property Lines Represented by Owner | Was Property Surveyed | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Was Proposed Building Site Delineated | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Mitigation Required | Mitigation Attached | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Inspection Record: | Metc. all setbacks. | | | |
| Date of Inspection: 7-18-13 | Inspected by: M. Fuchs | Affidavit Required | Affidavit Attached | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (if No they need to be attached.) | | Zoning District: (F-1) | Lakes Classification: (NH) | Date of Re-inspection: |
| No water under pressure in structure. | | May not be used for human habitation. | | |
| Signature of Inspector: Michael Soutal | | Date of Approval: 7-18-13 | | |
| Hold For Sanitary: <input type="checkbox"/> | Hold For TBA: <input type="checkbox"/> | Hold For Affidavit: <input type="checkbox"/> | Hold For Fees: <input type="checkbox"/> | <input type="checkbox"/> |