

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  
 FEB 21 2012

Permit #: 12-0017  
 Date: 3/21/12  
 Amount Paid: \$144.00 KOS  
 Refund: 2/24/2012

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.  
 Bayfield Co. Zoning Dept. 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: Craig & Patti Vernon Mailing Address: 27505 Cherylville Rd Ashland, WI 54806 Telephone: 715-682-8308

Address of Property: 27505 Cherylville Rd City/State/Zip: Ashland, WI 54806 Cell Phone: 715-209-0706

Contractor: LIPKA Construction Inc Contractor Phone: 715-685-0855 Plumber: N/A Plumber Phone: \_\_\_\_\_

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Frank Lipka Agent Phone: 715-209-1922 Agent Mailing Address (include City/State/Zip): 3100 Ellis Ave, Ashland, WI Written Authorization Attached:  Yes  No

PROJECT LOCATION: NW 1/4, SE 1/4 Legal Description: (Use Tax Statement) 04-012-2-48-05-33-4 62-000-10000 PIN: (23 digits) 04-012-2-48-05-33-4 62-000-10000 Recorded Document: (i.e. Property Ownership) \_\_\_\_\_ Page(s) 252 340

Section 33, Township 48 N, Range 5 W Town of: Barksdale Lot Size \_\_\_\_\_ Acreage 35 acres

Shoreland  Is Property/Land within 300 feet of River, Stream (incl. Intermittent) \_\_\_\_\_ Distance Structure Is from Shoreline: \_\_\_\_\_ feet  
 Is Property/Land within 1000 feet of Lake, Pond or Flowage \_\_\_\_\_ Distance Structure Is from Shoreline: \_\_\_\_\_ feet  
 Non-Shoreland

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>42,000</u>	<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"/> No Basement <input type="checkbox"/> Foundation	<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 type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Mound</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: 26' x 20' Width: 32' x 12' Height: 19' 8"

Proposed Construction:

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	( ) ( )	( )
<input type="checkbox"/> Commercial Use	Residence (i.e. cabin, hunting shack, etc.)	( ) ( )	( )
<input type="checkbox"/> Municipal Use	with Loft	( ) ( )	( )
	with a Porch	( ) ( )	( )
	with (2 <sup>nd</sup> ) Porch	( ) ( )	( )
	with a Deck	( ) ( )	( )
	with Attached Garage	( ) ( )	( )
	Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( ) ( )	( )
	Mobile Home (manufactured date)	( ) ( )	( )
	Addition/Alteration (specify) <u>Addition (w/ privy mound)</u>	( <u>32</u> x <u>46</u> )	<u>1632</u>
	Accessory Building (specify) _____	( ) ( )	( )
	Accessory Building Addition/Alteration (specify) _____	( ) ( )	( )
	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 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.

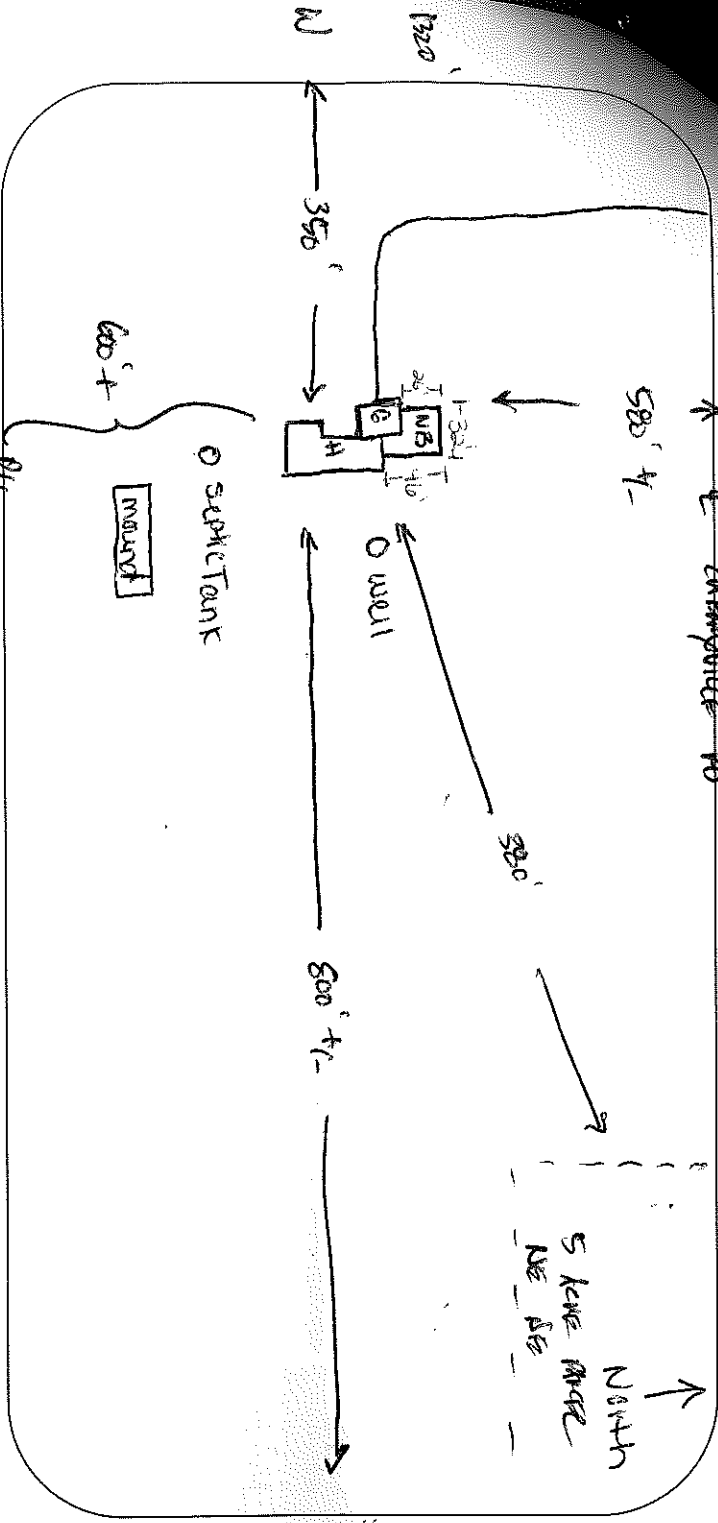
Owner(s): \_\_\_\_\_ Date: 2-14-12  
 (if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Frank Lipka Date: 2-14-12  
 (if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE  
 Address for Deed: 3100 Ellis Avenue, Ashland, WI 54806 Copy of Tax Statement  
 Address to send permit: 3100 Ellis Avenue, Ashland, WI 54806 If you recently purchased the property send your Recorded Deed  
 MAR 3 2012 \*ADDITION IS NOT SHIPPED\*  
 Attach DEED 3/14/12  
15000 RL

of Street 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%



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	504 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	504 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	600 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	300 Feet	Setback from 20% Slope Area	Feet
Setback from the East Lot Line	480 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	789 Feet	Setback to Well	550 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.

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: 248099 # of bedrooms: \_\_\_\_\_ Sanitary Date: 4/11

Permit #: 12-0017 Permit Date: 3/8/10

Is Parcel a Sub-Standard Lot  Yes  No  (Deed of Record)  Yes  No  (Fused/Contiguous Lot(s))  Yes  No  No

Is Structure in Common Ownership  Yes  No  (Fused/Contiguous Lot(s))  Yes  No  No

Is Structure Non-Conforming  Yes  No  No

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

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

Was Parcel Legally Created  Yes  No  No

Was Proposed Building Site Delineated  Yes  No  No

Inspection Record: **PROPOSED ADDITION FOR WADING AREA IS REVIEWED BY AGENT APPROVED TO MEET MINIMUM GRADE REQUIREMENTS PER'S COUNTY & VILLAGE REGULATIONS**

Date of Inspection: 2-28-12 Inspected by: [Signature]

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

Signature of Inspector: [Signature] Date of Approval: 2-28-12

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