

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 55
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN
RECEIVED
 Date of Receipt: **MAR 27 2012**

Permit #:	0-000001
Date:	4-13-12
Amount Paid:	\$1105.00 EDS
Refund:	5/28/12

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.
 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: Shone H + Jennifer Boettcher
Mailing Address: 43994 Co Hwy E Ashland WI 54806
City/State/Zip: Ashland WI 54806
Telephone: 715-682-5577
Cell Phone: 715-663-0613

Address of Property: 55790 Four Corners Sbrle Rd.
City/State/Zip: ~~Ashland~~ Mason WI 54856
Plumber Phone: 715-682-6050

Contractor: Dahl Construction Co.
Contractor Phone: 715-309-1527
Plumber: Bakken Plumbing Heating
Agent Mailing Address (include City/State/Zip): 36985 W Grossette Hill Rd Bayfield WI 54814
Agent Phone: 715-309-1527
Recorded Document (i.e. Property Ownership): Volume 1054 Page(s) 753

Authorized Agent: Hans Dahl
Agent Phone: 715-309-1527
Agent Mailing Address (include City/State/Zip): 36985 W Grossette Hill Rd Bayfield WI 54814
Recorded Document (i.e. Property Ownership): Volume 1054 Page(s) 753

PROJECT LOCATION: NW 1/4, NW 1/4
Legal Description: (Use Tax Statement)
 04-030-2-45-05-13-2-03-000-10000
 Subdivision:
 Section 13, Township 35 N, Range 5 W
 Town of: Lindsa

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
\$310,000	<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 checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input checked="" type="checkbox"/> 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"/> Municipal/City <input checked="" 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 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)
Proposed Construction:

Length: 86' **Width:** 58' **Height:** 30'

Proposed Use	Proposed Structure (first structure on property)	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-a-porch with (2nd) porch with a Deck with (2nd) Deck with Attached Garage	(38 x 63) 2028 (24 x 8) 192 () () () (36 x 24) 1220	2028 192 1220
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities	() () () ()	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify) _____ <input type="checkbox"/> Accessory Building (specify) _____ <input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	() () ()	
	Special Use: (explain) _____ Conditional Use: (explain) _____ Other: (explain) _____	() () ()	

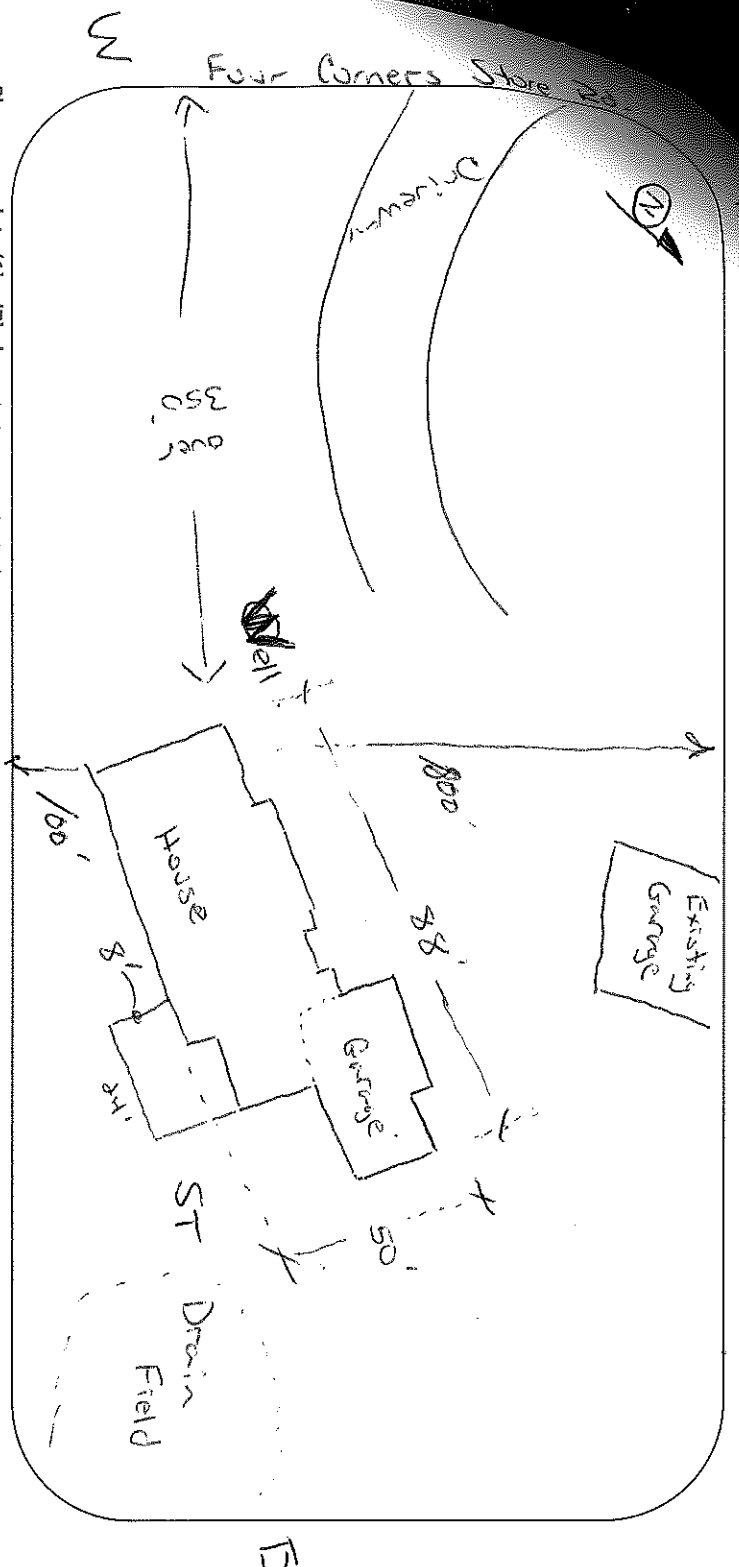
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES.
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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): _____
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: Hans Dahl
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
 Date: 3/27/12

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

APR 13 2012
 Copy of Tax Statement
 Attach
 Recorded Deed
 4/11/12
 1526/13/1

- Indicate 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	over 350' Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	33' Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	800' +/- Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	100' Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	800' +/- Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	800' +/- Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	15' Feet	Setback to Well	15' Feet
Setback to Drain Field	25' 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 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: 1-115 # of bedrooms: 3 Sanitary Date: 4-28-11

Permit #: 12-0056 Permit Date: 4-13-12

Reason for Denial: _____

Is Parcel a Sub-Standard lot Yes (Deed of record) 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 #: _____ Previously Granted by Variance (B.O.A.) Yes No Case #: _____

Was Parcel Legally Created Yes No

Were Property Lines Represented by Owner Yes No

Was Proposed Building Site Delineated Yes No Was Property Surveyed Yes No

Inspection Record: Yes No

Date of Inspection: 4-3-12 Inspected by: M. Fustale Zoning District (4-1)

Conditions: Town, Committee of Board Conditions Attached? Yes No (If No they need to be attached.) Lakes Classification (N/A)

Signature of Inspector: Michael Fustale Date of Approval: 4-3-12

Hold For Sanitary: _____ Hold For TBA: 4/12/12 Hold For Affidavit: _____ Hold For Fees: _____

See TBA