

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  
 Bayfield Co. Zoning Dept.  
 Date Stamp: APR 10 2012

Permit #:	18-007
Date:	4-19-12
Amount Paid:	\$75.00
Refund:	4/11/12

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.  
 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: Peter Hexum  
 Mailing Address: PO Box 80  
 City/State/Zip: IRON RIVER, WI 54847  
 Telephone: 715-372-6611

Address of Property: 70745 Rangeline Rd.  
 City/State/Zip: IRON RIVER, WI 54847  
 Cell Phone: \_\_\_\_\_

Contractor: Dunn  
 Contractor Phone: \_\_\_\_\_  
 Plumber: DOUG MATHIEY  
 Plumber Phone: 715-292-4433

Authorized Agent: (Person Signing Application on behalf of Owner(s))  
 Agent Phone: \_\_\_\_\_  
 Agent Mailing Address (include City/State/Zip): \_\_\_\_\_  
 Written Authorization Attached:  Yes  No

PROJECT LOCATION: Legal Description: (Use Tax Statement)  
SE 1/4, NE 1/4 Gov't Lot \_\_\_\_\_ Lot(s) C5M N1/2 1058 05 Vol & Page  
 Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section 310, Township 48 N, Range 9 W Town of: OUQU Lot Size \_\_\_\_\_ Acreage 20.0 acres

Recorded Document: (i.e. Property Ownership) Volume 1058 Page(s) 65, 645

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?  Yes  No  
 Distance Structure is from Shoreline: 250 feet  
 Distance Structure is from Floodplain: 250 feet

Is Property/Land within 1000 feet of Lake, Pond or Flowage?  Yes  No  
 If Yes---Continue  
 If Yes---Continue

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
\$ <u>900.00</u>	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story		<input type="checkbox"/> 3	Specify Type: _____ <input type="checkbox"/> Sanitary (exists)	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement			<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement			<input type="checkbox"/> Portable (w/service contract)	
		<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it)  
 Proposed Construction:  
 Length: 20' Width: 12' Height: \_\_\_\_\_  
 Length: 20' Width: 12' Height: \_\_\_\_\_

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 <sup>nd</sup> ) Porch with a Deck with (2 <sup>nd</sup> ) Deck with Attached Garage	( X ) ( X ) ( X ) ( X ) ( X ) ( X ) ( X ) ( X )	
<input type="checkbox"/> Commercial Use	Bunkhouse w/ ( <input type="checkbox"/> sanitary, gr <input type="checkbox"/> sleeping quarters, gr <input type="checkbox"/> cooking & food prep facilities) Mobile Home (manufactured date) _____	( X ) ( X )	
<input type="checkbox"/> Municipal Use	Addition/Alteration (specify) _____ Accessory Building (specify) <u>CARPORT</u> Accessory Building Addition/Alteration (specify) _____	( X ) ( 12 X 24 ) ( X )	288 SF
	Special Use: (explain) _____	( X )	
	Conditional Use: (explain) _____	( X )	
	Other: (explain) _____	( 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 legal 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): [Signature]  
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)  
 Authorized Agent: [Signature]  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Rec'd for Issuance ASB/E  
 APR 19 2012  
 Date 4-10-12  
 Attach Copy of Tax Statement  
 If you recently purchased the property send your Recorded Deed

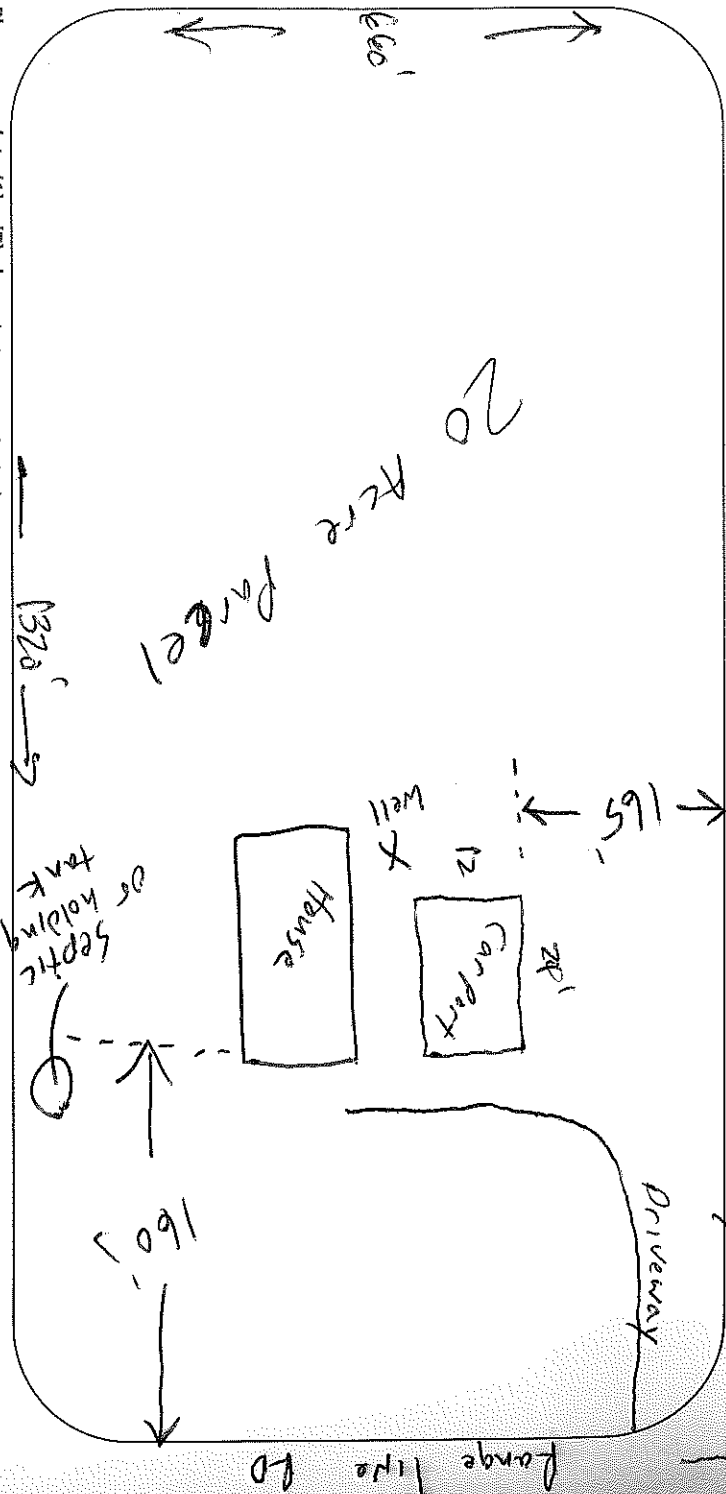
Administrative Staff

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

OK 4/11/12

Below: 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)

(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	160 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	160 Feet	Setback from the River, Stream, Creek	160 Feet
Setback from the North Lot Line	47 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	47 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	30 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	30 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank of Holding Tank	Feet	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.

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: 12-015 # of bedrooms: 2 Sanitary Date: 2012

Permit # 12-0070 Permit Date: 4-19-12

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

Is Parcel in Common Ownership  Yes (Fused/Contiguous Lot(s))  Yes  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: Relaxed Building Site is constructed by other persons to meet all

Service Requirements/Local Ordinance Body Result may be issued

Date of Inspection: 4-10-12 Inspected by: DC

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

Signature of Inspector: [Signature] Date of Approval: 4-10-12

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