

**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**

**PAID**  
 Bayfield Co. Zoning Dept  
 MAR 27 2013

Permit #:	13-0039
Date:	4-10-13
Amount Paid:	\$1,025.00 \$175.75 3-27-13
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: Thomas & Bonnie Ryszka Mailing Address: 28820 N. Lemon Rd. Mundelein, IL 60060 Telephone: 847-736-2090

Address of Property: 70510 Olive Rock Rd. City/State/Zip: Brode, WI 54820 Cell Phone: 847-736-8968

Contractor: Woodbeck Builders, Inc Contractor Phone: 906-932-8055 Plumber: Blakeman Plumbing & Heating Plumber Phone: 715-682-6050

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Job Estola (Contractor) Agent Phone: 906-932-8055 Agent Mailing Address (include City/State/Zip): Ironwood, MI 49928 Written Authorization Attached  Yes  No

PROJECT LOCATION: SW 1/4, NW 1/4 Legal Description: (Use Tax Statement) 04-038-2-48-00-32-2 03-000-10000 Recorded Document (i.e. Property Ownership) Volume 1039 Page(s) 14

Section 32, Township 48 N, Range 9 W Town of: Olive Lot Size 40,000 Acreage

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?  If Yes---continue  Distance Structure is from Shoreline: \_\_\_\_\_ feet

Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue  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
\$ <u>370,000</u>	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input checked="" 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 checked="" type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type: <u>MOUND</u>	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing blgd)	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant to it) Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Proposed Construction: Length: 60' Width: 58' Height: 19'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	<u>(26x58* 21x11)</u>	<u>1739</u>
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> with Loft	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> with a Porch	<u>( 13 X 6 )</u>	<u>78</u>
	<input type="checkbox"/> with (2 <sup>nd</sup> ) Porch	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> with a Deck ( <u>PANE</u> )	<u>( 12 X 14 )</u>	<u>168</u>
	<input type="checkbox"/> with (2 <sup>nd</sup> ) Deck	<u>( 24 X 34 )</u>	<u>816</u>
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> Mobile Home (manufactured date) _____	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> Addition/Alteration (specify) _____	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> Accessory Building (specify) <u>Detached Garage w/ covered slab</u>	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> Special Use: (explain) _____	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> Conditional Use: (explain) _____	<u>( )</u>	<u>( )</u>
	<input type="checkbox"/> Other: (explain) _____	<u>( )</u>	<u>( )</u>

APR 12 2013

Secretarial Staff: \_\_\_\_\_

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

Owner(s): See written authorization Date: 3/20/2013

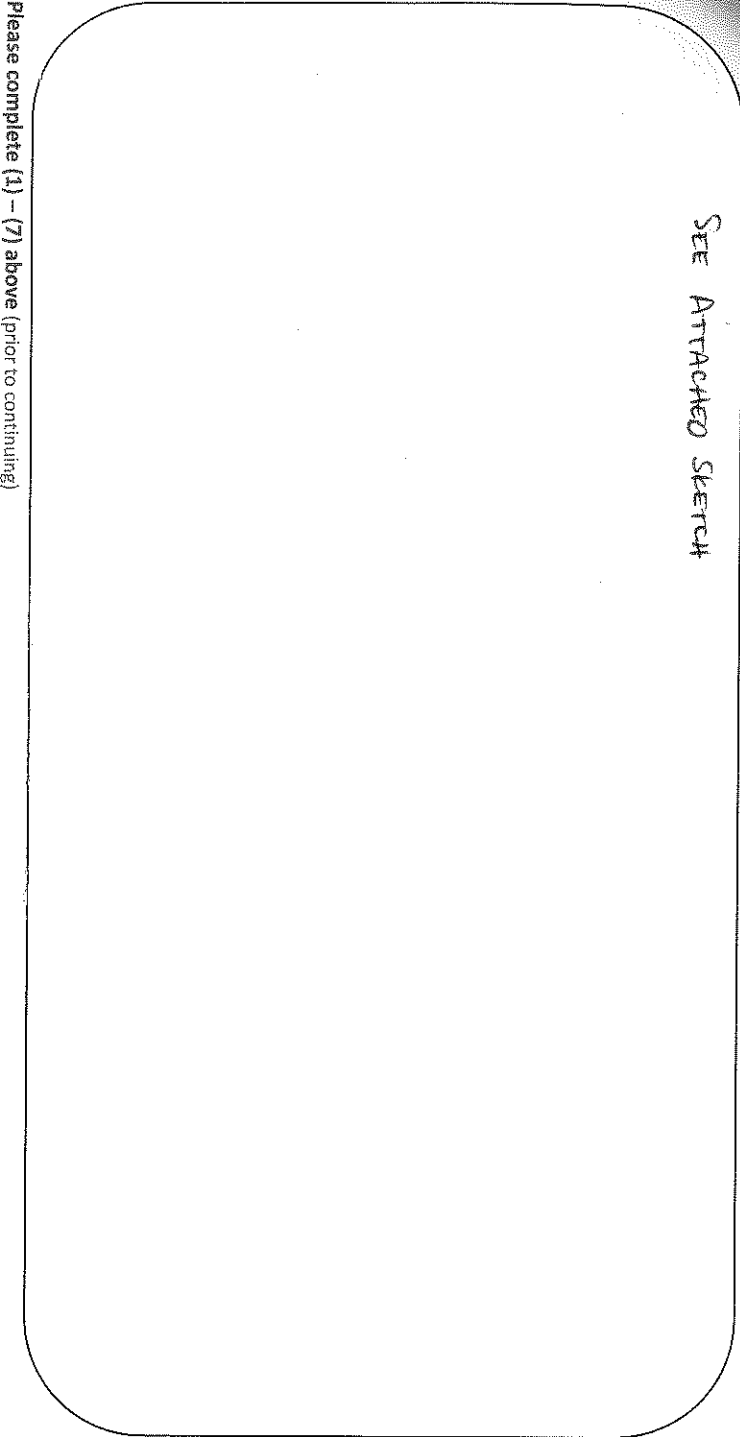
Authorized Agent: Job Estola Date: 3/20/2013

Address to send permit: 219 E. Frederick St. Ironwood MI 49938

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

- 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 (\*): All Existing Structures on your Property
  - (4) Show: (\* ) Driveway and (\* ) Frontage Road (Name Frontage Road)
  - (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%

SEE ATTACHED SKETCH



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	225 ± Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	200 ± Feet	Setback from the River, Stream, Creek	NA 500 Feet
Setback from the North Lot Line	900 ± Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	260 ± Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	200 ± Feet	Setback from 20% Slope Area	NA Feet
Setback from the East Lot Line	1000 ± Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	TBD Feet	Setback to Well	TBD Feet
Setback to Drain Field	TBD Feet		
Setback to Privy (Portable, Composting)	NA 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)** Sanitary Number: 3-4fs # of bedrooms: 4 Sinking Date: 4-4-13

Permit Denied (Date): \_\_\_\_\_ Reason for Denial: \_\_\_\_\_

Permit #: 13-0039 Permit Date: 4-18-13

Is Parcel a Sub-Standard Lot  Yes  No  
 Is Parcel in Common Ownership  Yes (Fused/Contiguous lots)  No  
 Is Structure Non-Conforming  Yes  No

Granted by Variance (B.O.A.) Case #: \_\_\_\_\_ Previously Granted by Variance (B.O.A.) Case #: \_\_\_\_\_

Was Parcel Legally Created  Yes  No  
 Was Proposed Building Site Delineated  Yes  No

Were Property Lines Represented by Owner  Yes  No  
 Was Property Surveyed  Yes  No

Mitigation Required  Yes  No  
 Mitigation Attached  Yes  No

Affidavit Required  Yes  No  
 Affidavit Attached  Yes  No

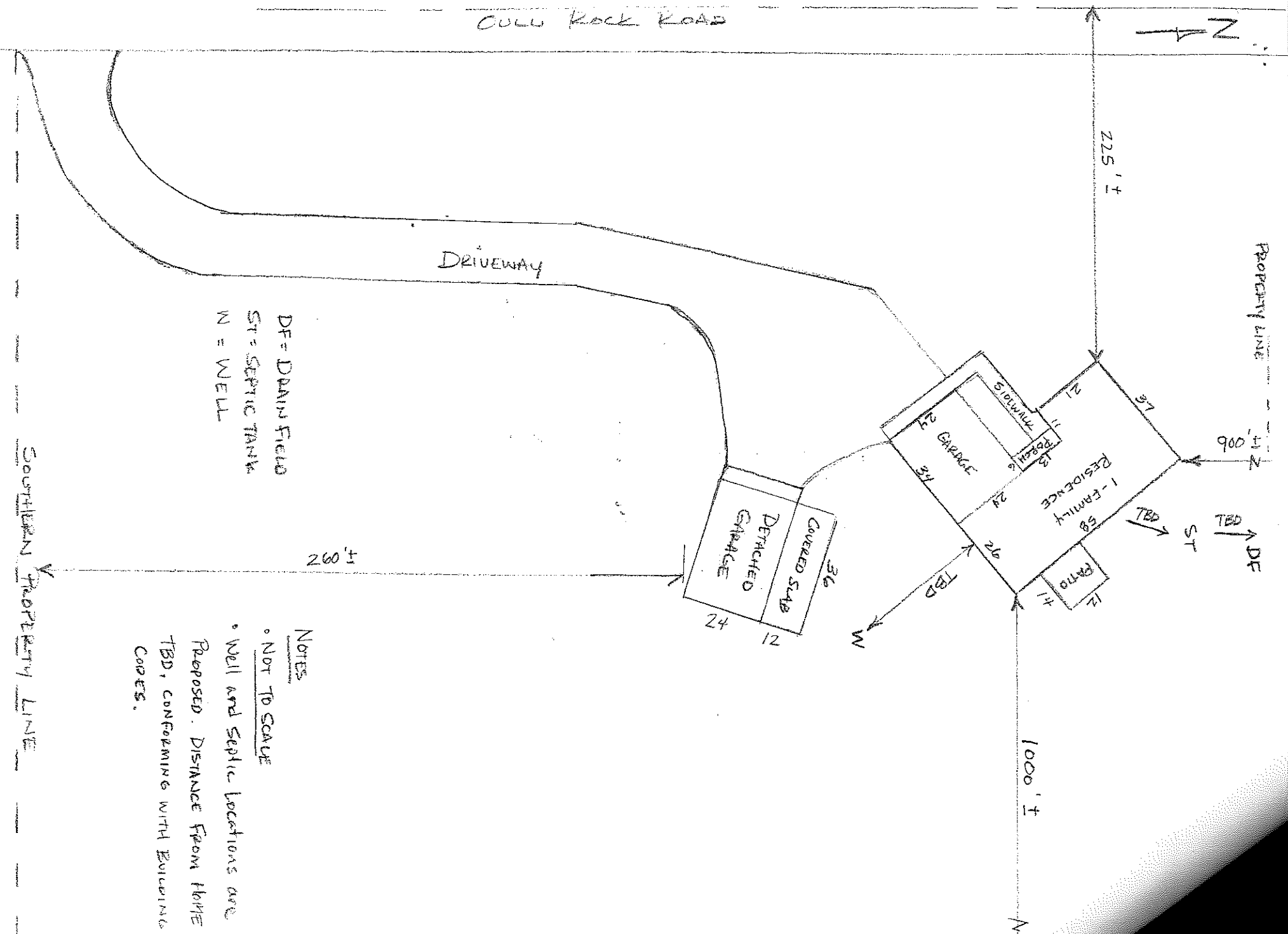
Inspection Record: found structure located as indicated by Matt Harvey's to meet knowledge  
came requirements & that way the order of cadastre.

Date of inspection: 4-8-13 Inspected by: DR Date of Re-inspection: \_\_\_\_\_

Conditions of Town, Committee or Board Conditions Attached?  Yes  No (If No they need to be attached)  
A condition already code (VOC) that flow from the County contracts are us a local Agency  
not be attached prior to the start of construction

Signature of Inspector: [Signature] Date of Approval: 4-1-13

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



DF = DRAIN FIELD  
 ST = SEPTIC TANK  
 W = WELL

NOTES  
 • NOT TO SCALE  
 • Well and Septic locations are Proposed. DISTANCE FROM HERE TBD, CONFORMING WITH BUILDING CODES.

**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  
 APR 08 2013  
 Bayfield Co. Zoning Dept

Permit #: 13-004 **ENTERED**  
 Date: 4-12-13  
 Amount Paid: \$75 3-27-13  
 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  PRIVATE  CONDITIONAL USE  SPECIAL USE  B.O.A.  OTHER

Owner's Name: THOMAS WYSETH Mailing Address: 78820 N. OAKWOOD RD. MADISON, WI 53760 Telephone: 608-736-2090

Address of Property: 78510 OUV WOOD ROAD City/State/Zip: PAUL, WI 53260 Cell Phone: 608-736-8468

Contractor: ABOONED BUILDERS, INC. Contractor Phone: \_\_\_\_\_ Plumber: \_\_\_\_\_ Plumber Phone: \_\_\_\_\_

Authorized Agent: (Person Signing Application on behalf of Owner(s)) AL B. FREDRICK Agent Phone: 608-736-8055 Agent Mailing Address (include City/State/Zip): AL B. FREDRICK ST Written Authorization Attached  Yes  No

PROJECT LOCATION: Legal Description: (Use Tax Statement) S3 1/4, A15 1/4 Gov't Lot \_\_\_\_\_ Lot(s) \_\_\_\_\_ CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_ Recorded Document: (i.e. Property Ownership) \_\_\_\_\_ Volume \_\_\_\_\_ Page(s) \_\_\_\_\_

Section 32, Township T8 N, Range 9 W Town of: OUV Lot Size \_\_\_\_\_ Acreage 40

Shoreland →  Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain?  Yes  Continue → Distance Structure is from Shoreline: \_\_\_\_\_ feet

Non-Shoreland  Is Property/Land within 1000 feet of Lake, Pond or Flowage if yes---continue → 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
\$45,000	<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 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 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 checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 74 Width: 36 Height: 20  
 Proposed Construction: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	( X )	
<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( X )	
<input type="checkbox"/>	with Loft	( X )	
<input checked="" type="checkbox"/>	Residential Use with a Porch with (2 <sup>nd</sup> ) Porch with a Deck with (2 <sup>nd</sup> ) Deck with Attached Garage	( X )	
<input type="checkbox"/>	Commercial Use	( X )	
<input type="checkbox"/>	Municipal Use	( X )	
<input type="checkbox"/>	Rec'd for Issuance	( X )	
<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) <u>SHED</u>	( 36 X 36 )	1256
<input type="checkbox"/>	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 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: \_\_\_\_\_  
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

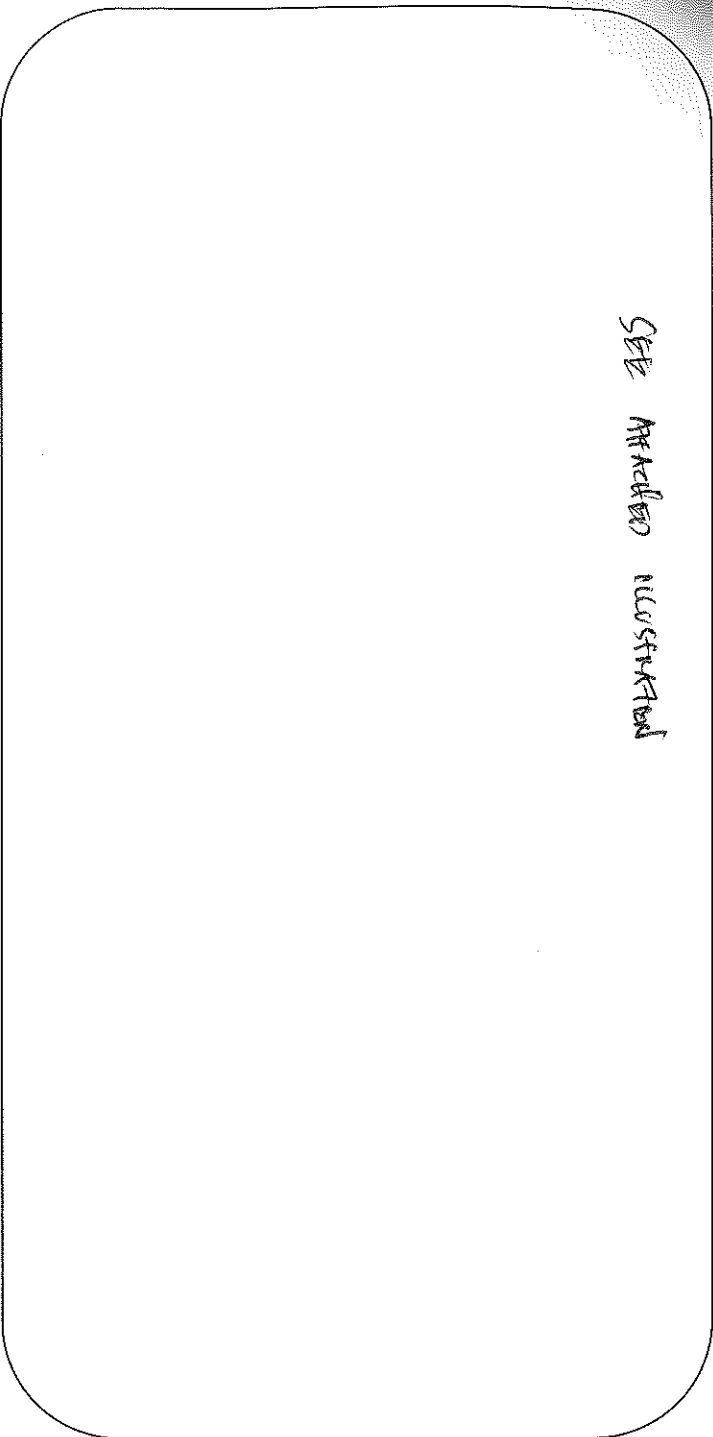
Authorized Agent: AL B. FREDRICK Date: 4/8/13  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 219 E Fredrick St. Ironwood, MI 49938 Attach \_\_\_\_\_  
 If you recently purchased the property send your Recorded Deed

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 (\*): (\*\*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show any (\*): (\*\*) 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%

SEE ATTACHED ILLUSTRATION



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	75'	Setback from the Lake (ordinary high-water mark)	N/A
Setback from the Established Right-of-Way	200' ±	Setback from the River, Stream, Creek	2500' ±
Setback from the North Lot Line	900' ±	Setback from the Bank or Bluff	N/A
Setback from the South Lot Line	260'	Setback from Wetland	N/A
Setback from the West Lot Line	200' ±	Setback from 20% Slope Area	N/A
Setback from the East Lot Line	2000' ±	Elevation of Floodplain	
Setback to Septic Tank or Holding Tank	75'	Setback to Well	150'
Setback to Drain Field	> 10'		
Setback to Privy (Portable, Composting)	N/A		


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.

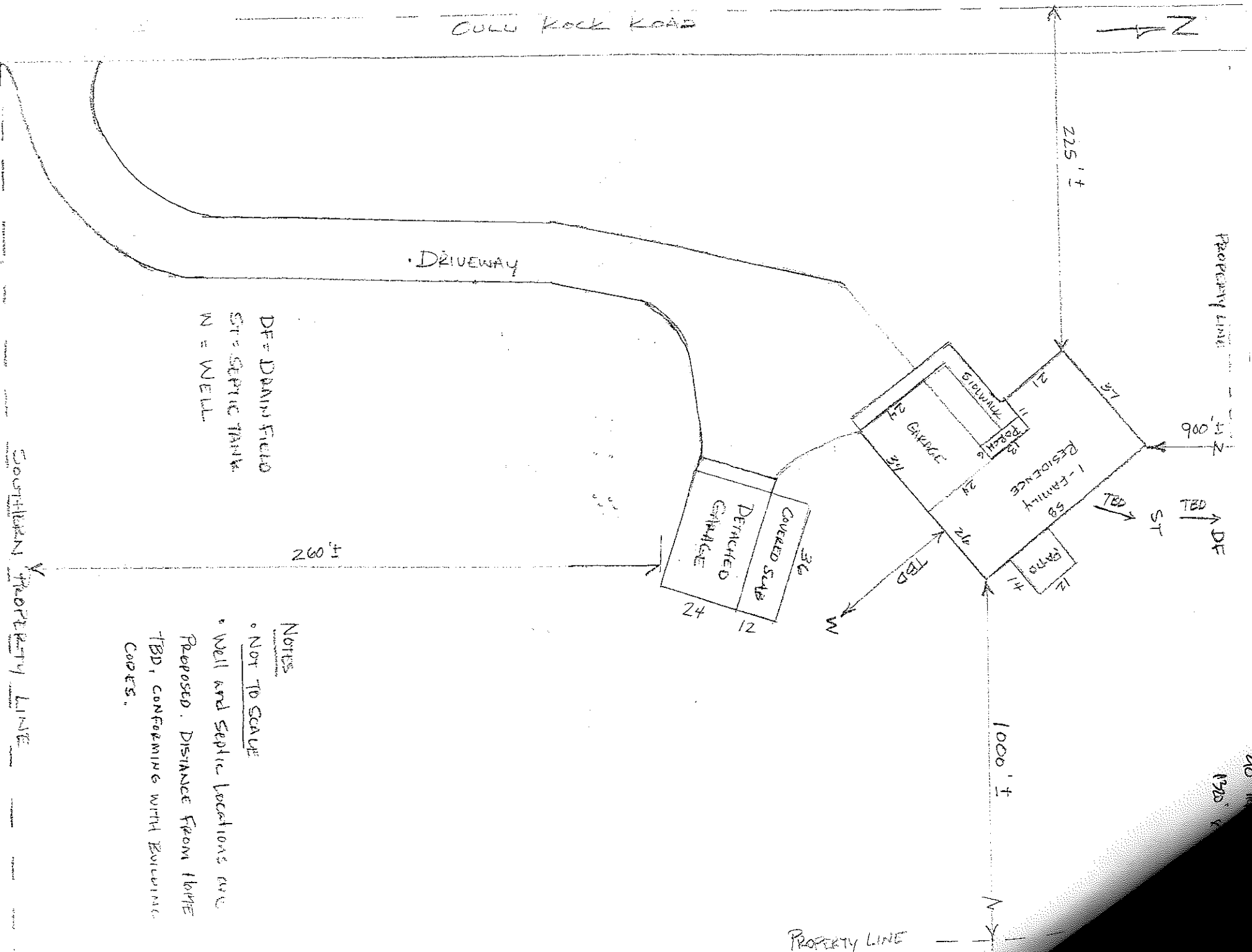
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).

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.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:	# of bedrooms:	Sanitary Date:			
Permit Denied (Date):		Reason for Denial:					
Permit #: <b>13-0040</b>		Permit Date: <b>4-12-13</b>					
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <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 <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <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	Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	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	Inspection Record: <b>PROPOSED SEPTIC TANK LOCATED TO BE INSTALLED BY KEVIN ARTHURS TO MEET ATTACHED CODE REQUIREMENTS &amp; PLAT MAP ON DRAWING</b>					
Date of Inspection: <b>02-03</b>		Inspected by: <b>MC</b>		Zoning District: <b>(B1)</b>			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)		Date of Re-Inspection:					
Signature of Inspector: 		Date of Approval: <b>02-03</b>					
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>				



DF = DRAIN FIELD  
 ST = SEPTIC TANK  
 W = WELL

**NOTES**

- NOT TO SCALE
- Well and Septic locations are REPOSED. DISTANCE FROM HOME TBD, CONFORMING WITH BOULDER CO. CODES.

SOUTHERN PROPERTY LINE

PROPERTY LINE