

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
 JUL 21 2014
 Bayfield Co. Zoning Dept.

ENTERED
 Permit #: 14-0313
 Date: 9-18-13
 Amount Paid: \$350.00 Land Use Special A
 8-19-14
 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: **KAYLIE LUKAS** Mailing Address: **PO Box 294 Bayfield, WI 54814** Telephone: **715-512-1120**

Address of Property: **26160 MAWIKWE RD** City/State/Zip: **Bayfield, WI 54814** Call Phone: **608-317-7047**

Contractor: _____ Contractor Phone: _____ Plumber: _____ Plumber Phone: _____

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) **115 3/4, 245 7/8 1/4 S1/4 SE** PIN: (23 digits) **04-006-2-51-05-17-4** 23-000-30000
 Gov't Lot _____ Lot(s) _____ CSM _____ Vol & Page _____ Lot(s) No. _____ Block(s) No. _____ Subdivision: _____ Volume **115** Page(s) **345**
 Section **17**, Township **51** N, Range **05** W Town of: **Bayfield** Lot Size **19.800** Acreage **19.800**

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: **200** feet Is Property in Floodplain Zone? Yes No

Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue Distance Structure is from Shoreline: _____ feet 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 |
|--|--|---|--|---------------------------------------|---|--------------------------------|
| \$ 500 | <input checked="" type="checkbox"/> New Construction | <input checked="" type="checkbox"/> 1-Story | <input checked="" type="checkbox"/> Seasonal | <input checked="" 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 type="checkbox"/> (New) Sanitary | <input 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 bldg) | <input 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"/> _____ | <input type="checkbox"/> Portable (w/service contract) | <input type="checkbox"/> None |
| | <input type="checkbox"/> _____ | <input type="checkbox"/> Foundation | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input checked="" type="checkbox"/> Compost Toilet | <input type="checkbox"/> None |

Existing Structure: (if permit being applied for is relevant to it) Length: **20** Width: **20** Height: **10**

Proposed Construction: Length: **20** Width: **20** Height: **10**

| Proposed Use | Proposed Structure | Dimensions | Square Footage |
|---|--|---------------------------|----------------|
| <input checked="" type="checkbox"/> Residential Use | <input checked="" type="checkbox"/> Principal Structure (first structure on property) Deck w/ Fence | (20 X 20) | 400 |
| | <input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) | (_____ X _____) | _____ |
| | <input type="checkbox"/> with Loft | (_____ X _____) | _____ |
| | <input type="checkbox"/> with a Porch | (_____ X _____) | _____ |
| | <input type="checkbox"/> with (2 nd) Porch | (_____ X _____) | _____ |
| | <input type="checkbox"/> with a Deck | (_____ X _____) | _____ |
| | <input type="checkbox"/> with (2 nd) Deck | (_____ X _____) | _____ |
| <input type="checkbox"/> Commercial Use | <input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, <input type="checkbox"/> or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities) | (_____ X _____) | _____ |
| | <input type="checkbox"/> Mobile Home (manufactured date) _____ | (_____ X _____) | _____ |
| | <input type="checkbox"/> Addition/Alteration (specify) _____ | (_____ X _____) | _____ |
| | <input type="checkbox"/> Accessory Building (specify) _____ | (_____ X _____) | _____ |
| | <input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____ | (_____ X _____) | _____ |
| | <input type="checkbox"/> Other: (explain) _____ | (_____ X _____) | _____ |

RECOMMENDED USES: **SEP 11 2014**

REC'D for Issuance **AUG 22 2014**

Secretarial Staff

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

Owners: **Kaylie Lukas, Michael Pinter** Date **7/21/14**

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ Date _____

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit **PO Box 294 Cornucopia, WI** Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

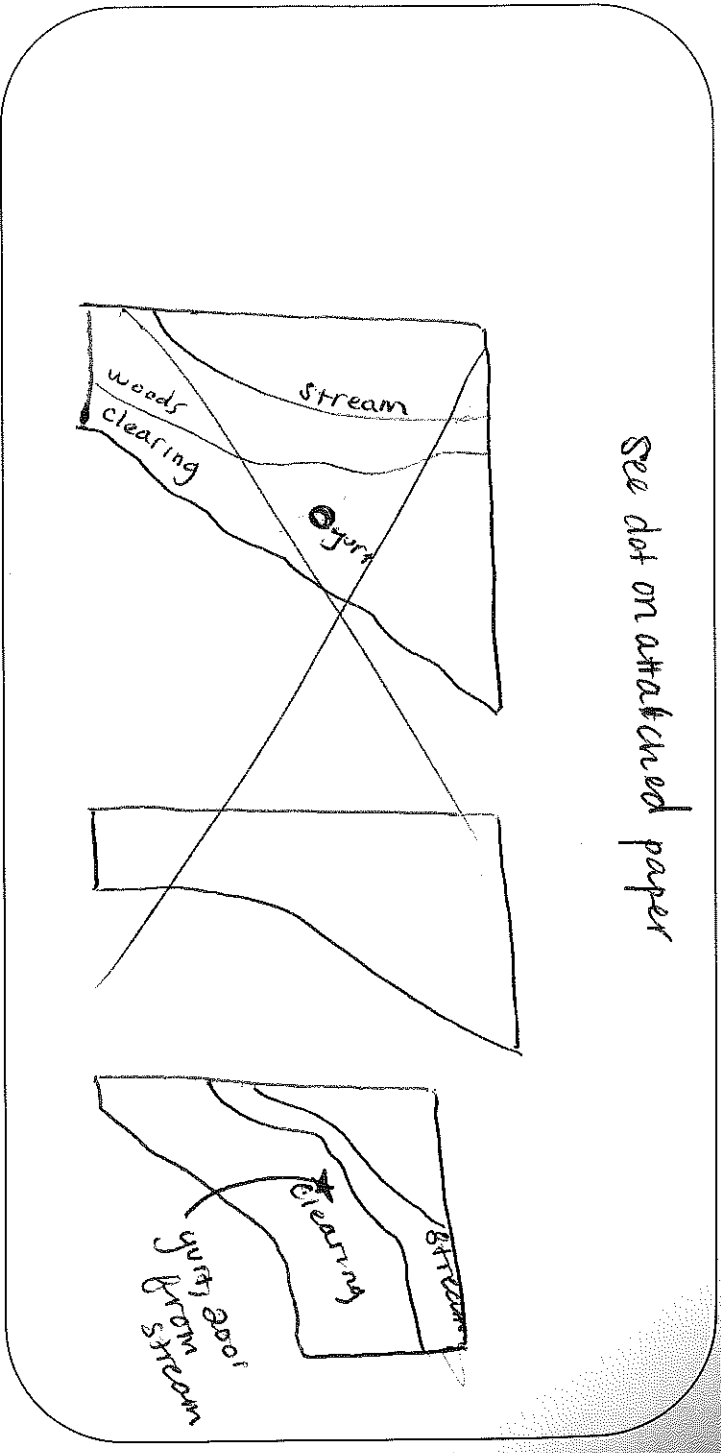
APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

NEEDS RUNY AFFIDAVIT? **DIMENSIONS OF DECK?**

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%

See dot on attached paper



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 | 400 Feet | Setback from the Lake (ordinary high-water mark) | N/A Feet |
| Setback from the Established Right-of-Way | | Setback from the River, Stream, Creek | 15' +/- Feet |
| Setback from the North Lot Line | 4-650 Feet | Setback from the Bank or Bluff | |
| Setback from the South Lot Line | 4-300 Feet | Setback from Wetland | |
| Setback from the West Lot Line | 4-350 Feet | Setback from 20% Slope Area | |
| Setback from the East Lot Line | 4-250 Feet | Elevation of Floodplain | N/A Feet |
| Setback to Septic Tank or Holding Tank | | Setback to Well | N/A Feet |
| Setback to Drain Field | | | |
| Setback to Privy (Portable Composting) | 1 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: _____ Reason for Denial: Composting Toilet Sanitary Date: _____

Permit #: 14-0313 Permit Date: 9-12-14

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

Is Parcel in Common Ownership Yes (Fused/Contiguous Lot(s)) 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

Was Proposed Building Site Delineated Yes No

Were Property Lines Represented by Owner Was Property Surveyed Yes No

Inspection Record: IPAD connection on site allowed for easy

Date of Inspection: 8-5-14 Inspected by: J. C. ...

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

Building not approved for indoor plumbing fixtures served by water under pressure unless state sanitary code compliant points installed. Uniform Dwelling Code permit may be required.

Signature of Inspector: _____ Date of Re-Inspection: _____

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

2008 Dec on Property did not contact BATHFEN TOWN UDCL is spider, ATTORNEY FOR NAVIGABILITY DETERMINATION - NAVIGABLE BY DEFALT AND VIEWER.

The screenshot displays the Bayfield County Zoning map interface. At the top left, the title "Bayfield County Zoning" is shown with a small tree icon and coordinates "X: 782472.44, Y: 968416.09". Below this is a toolbar with icons for home, back, forward, and help. The main map area shows a topographic map with parcel boundaries and several measurement lines. A vertical line is labeled "Length: 656.89 ft". A horizontal line is labeled "Length: 355.42 ft". A diagonal line is labeled "Length: 337.43 ft". Other smaller measurements include "Length: 153.55 ft" and "Length: 253.95 ft". A scale bar at the bottom left indicates "500 ft".

On the right side, there are three panels:

- Parcel Search:** Includes a dropdown menu for "Search Layer" set to "By Last Name", a search box containing "lukas", and "Search" and "Clear" buttons.
- Table of Contents:** A small panel with a globe icon.
- Draw/Measure:** A panel with various drawing tools (point, line, polygon, etc.), a "Text" input field, a "Color" selector, and a "Size" dropdown set to "2".

At the bottom center, a "Current Theme Zoning" dropdown menu is visible. The map also shows "STATE HWY 12" and "MCCUTCHEON RD" in the lower right quadrant.