

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County Planning and Zoning Dept.
 PO Box 58 Washburn, WI 54891
 (715) 373-6138

ATTN
 APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN
 Stamp (Received)
 NOV 17 2015

Bayfield Co. Zoning Dept.

Permit #:	15-0466
Date:	10-3-15
Amount Paid:	\$150
Refund:	10-3-15

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.

TYPE OF PERMIT REQUESTED → LAND USE SANITARY PRIVATE CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: **Jack Martinson** Mailing Address: **66530 Bayhead Rd Ashland WI 54806** Telephone: _____
 Address of Property: **24760 FR 245** City/State/Zip: **Ashland WI 54806** Cell Phone: **715-292-1641**
 Contractor: **SELF** 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: **SE 1/4, SE 1/4** Gov't Lot: _____ Lot(s): _____ CSM: _____ Vol & Page: _____ Lot(s) No.: _____ Block(s) No.: _____ Subdivision: _____
 Legal Description: (Use Tax Statement) **SE 1/4, SE 1/4** PIN: (23 digits) **04-002248062440400010000** Recorded Document: (i.e. Property Ownership) Volume: **1194** Page(s): **352**

Section: **24**, Township: **48 N**, Range: **6 W** Town of: **Barkdale** Lot Size: _____ Acreage: **40**

Shoreland ← Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? Distance Structure is from Shoreline: _____ feet Is Property in Floodplain Zone? Yes No
 Is Property/Land within 1000 feet of Lake, Pond or Flowage Distance Structure is from Shoreline: _____ feet Are Wetlands Present? Yes No
 Non-Shoreland If yes---continue → If yes---continue →

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What TYPE of Sewer/Sanitary System Is on the property?	Water
\$ 5000	New Construction	<input checked="" type="checkbox"/> 1-Story	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"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	Shed	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: ST	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement		<input checked="" type="checkbox"/> None	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> Foundation		<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant to it) Length: _____ Width: **24** Height: _____
 Proposed Construction: Length: **12** Width: **24** Height: **8**

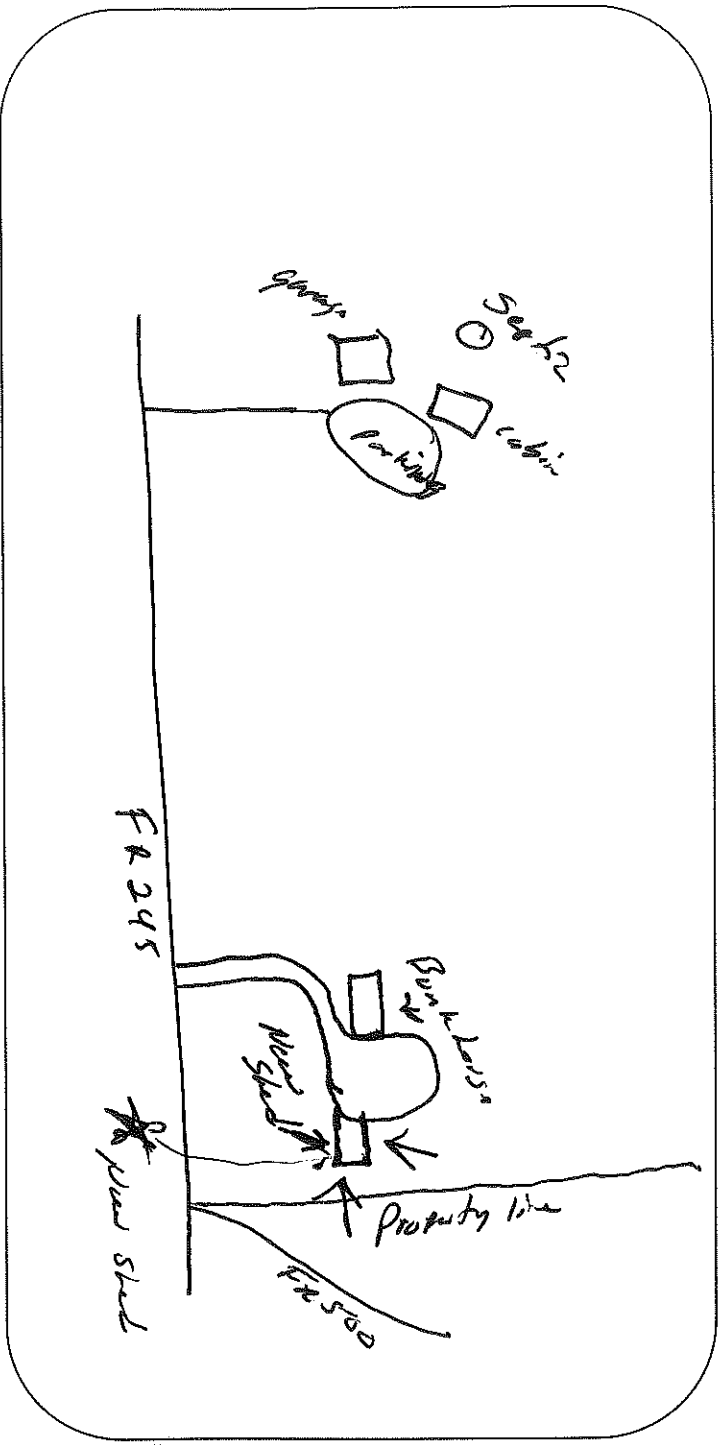
Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	(X)	
	Residence (i.e. cabin, hunting shack, etc.)	(X)	
	with Loft	(X)	
	with a Porch	(X)	
	with (2 nd) Porch	(X)	
	with a Deck	(X)	
	with (2 nd) Deck	(X)	
<input type="checkbox"/> Commercial Use	with Attached Garage	(X)	
	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	Mobile Home (manufactured date) _____	(X)	
<input type="checkbox"/> Municipal Use	Addition/Alteration (specify) _____	(X)	
	Accessory Building (specify) 12 x 24 shed	(12 x 24)	288
	Accessory Building Addition/Alteration (specify) _____	(X)	
Rec'd for Issuance	Special Use: (explain) _____	(X)	
DEC 03 2015	Conditional Use: (explain) _____	(X)	
SECRETARIAL STAFF	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 for any reasonable time for the purpose of inspection.

Owner(s): Jack Martinson Date: 11/16/2015
 (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)
 Attach
 Copy of Tax Statement
 Address to send permit _____ (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 (*): (*) 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)
 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	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	24 miles Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	300 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	1/4 mile Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	45 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Nothing close -> 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 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:	# of Bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: 15-04168	Permit Date: 12-3-15	Paying for Rinkhouse CONV. FOR MAIN HOUSE		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lots)	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	Case #:	Were Property Lines Represented by Owner	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	ATF		
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Inspection Record: Shed present when inspected	ATF			
Inspection Record: Shed present when inspected	ATF			
Date of Inspection: 11-24-15	Inspected by: J Casanova	Case #:	Zoning District: (F-1)	Date of Re-Inspection: N/A
Condition(s) Town, Committee or Board Conditions Attached?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(If No they need to be attached)		
BUILDING SHAN NOT BE USED FOR ANY OTHER INSTALLATION OR SLEEPING PURPOSES. BUILDING MUST BE MINIMUM 30' FROM EXIST PROPERTY LINE.				
Signature of Inspector:		Date of Approval: 11-24-15		
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	