

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

SUBMIT: COMPLETED APPLICATION, FAX

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN
 DATE RECEIVED
 NOV 03 2016
 Bayfield Co. Zoning Dept.

ENTERED Permit #: 16-0424
 Date: 11-15-16
 Amount Paid: \$75 1-3-16
 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.

TYPE OF PERMIT REQUESTED: LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: Robert + Marka Lohri Mailing Address: 7160 Airport Rd Iron River WI 54847 Telephone: 715-372-5677

Address of Property: 7160 Airport Rd. City/State/Zip: Iron River, WI 54847 Contractor Phone: Plumber: Cell Phone: 715-892-7616

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: 20 1/4, NW 1/4 Legal Description: (Use Tax Statement) 038-2-48-09-25-203-000-10000 PIN: (23 digits) 04-1877200 Vol & Page 1877200 Lot(s) No. Block(s) No. Subdivision: Recorded Document: (i.e. Property Ownership) 8277 Volume 8277 Page(s) 220

Section 25, Township 48 N, Range 09 W Town of: Boide Lot Size 80 Acreage 80

Shoreland Non-Shoreland

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

Is Property/Land within 1000 feet of Lake, Pond or Flowage → Distance Structure is from Shoreline: feet No Yes

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
<u>12,400</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 type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	Specify Type: <u>HT</u>
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists)	Specify Type: <u>HT</u>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> 3	<input type="checkbox"/> Privy (Pit) or <u> </u> Vaulted (min 200 gallon)	<input type="checkbox"/> <u> </u>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> <u> </u>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> <u> </u>
	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> Foundation	<input type="checkbox"/> <u> </u>	<input type="checkbox"/> None	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> <u> </u>

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

Proposed Construction: Length: Width: Height:

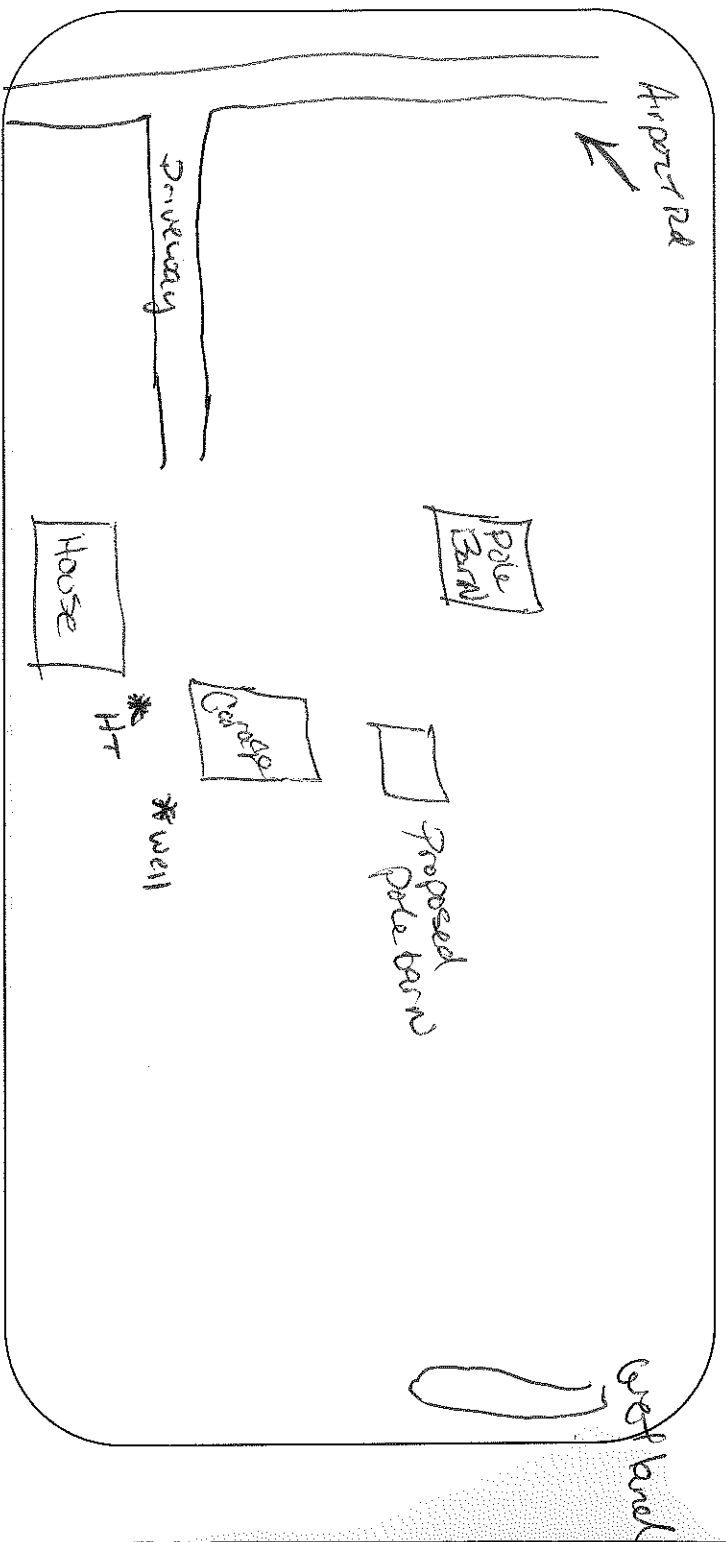
Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	(<u> </u>) (<u> </u>)	<u> </u>
	Residence (i.e. cabin, hunting shack, etc.)	(<u> </u>) (<u> </u>)	<u> </u>
	with Loft	(<u> </u>) (<u> </u>)	<u> </u>
	with a Porch	(<u> </u>) (<u> </u>)	<u> </u>
	with (2 nd) Porch	(<u> </u>) (<u> </u>)	<u> </u>
	with a Deck	(<u> </u>) (<u> </u>)	<u> </u>
	with (2 nd) Deck	(<u> </u>) (<u> </u>)	<u> </u>
<input type="checkbox"/> Commercial Use	Bunhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(<u> </u>) (<u> </u>)	<u> </u>
	Mobile Home (manufactured date) <u> </u>	(<u> </u>) (<u> </u>)	<u> </u>
<input type="checkbox"/> Municipal Use	Addition/Alteration (specify) <u> </u>	(<u> </u>) (<u> </u>)	<u> </u>
	Accessory Building (specify) <u>Pole BARN</u>	(<u>84</u>) (<u>48</u>)	<u>1152</u>
	Accessory Building Addition/Alteration (specify) <u> </u>	(<u> </u>) (<u> </u>)	<u> </u>
	Special Use: (explain) <u> </u>	(<u> </u>) (<u> </u>)	<u> </u>
	Conditional Use: (explain) <u> </u>	(<u> </u>) (<u> </u>)	<u> </u>
	Other: (explain) <u> </u>	(<u> </u>) (<u> </u>)	<u> </u>

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 the 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): Robert & Marka Date 10-31-16
Marka Lohri
 Authorized Agent: Date
 Address to send permit:
 Attach
 Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

in the box 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)

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	700 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	670 Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	700 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	690 Feet	Setback from Wetland	420 Feet
Setback from the West Lot Line	545 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	2083 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	210 Feet	Setback to Well	190 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.

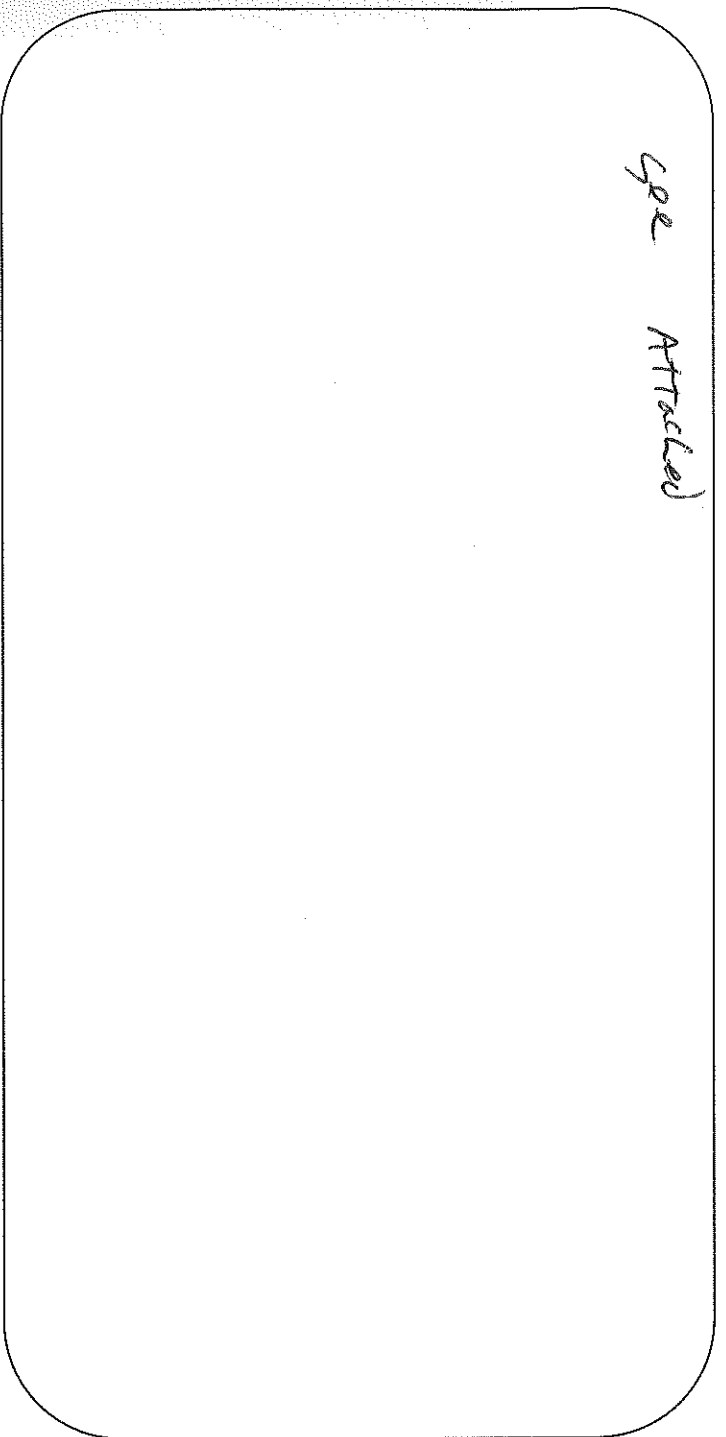
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:				
Permit Denied (Date):		Reason for Denial:						
Permit #: 16-5124	Permit Date: 11-15-16							
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Inspection Record:								
Date of Inspection: 1-9-16	Inspected by: Deborah Wuyts	Zoning District	NR-1)					
Condition(s): Town, Committee of Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - (if No they need to be attached.)		Lakes Classification (NA)	NA)					
<p><i>Buildings either not BE USED FOR COMMERCIAL PURPOSES, HUMAN HABITATION OR SLEEPING PURPOSES.</i></p>								
Signature of Inspector:		Date of Approval:						
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>					

in the box 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%

see Attached



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	195 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	Over 320 Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	Over 520 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	Over 520 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	175 Feet	Elevation of Floodplain	0576 Feet
Setback to Septic Tank or Holding Tank	50 Feet	Setback to Well	25 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 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) Sanitary Number: _____ # of bedrooms: _____ Sanitary Date: _____
 Permit Denied (Date): _____ Reason for Denial: _____
 Permit #: *16-0495* Permit Date: *1-15-16*

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

Was Parcel Legally Created Yes No Were Property Lines Represented by Owner Was Property Surveyed Yes No
 Was Proposed Building Site Delineated Yes No

Inspection Record: _____

Date of Inspection: *11-9-16* Inspected by: *James B. Murphy*
 Condition(s): Town, Committee or Board Conditions Attached? Yes No *If No they need to be attached*
Building shall not be used for human habitation or sleeping purposes unless otherwise permit issued

Zoning District: *R-10* Date of Re-Inspection: _____
 Lakes Classification: _____

Signature of Inspector: _____ Date of Approval: *11-9-16*

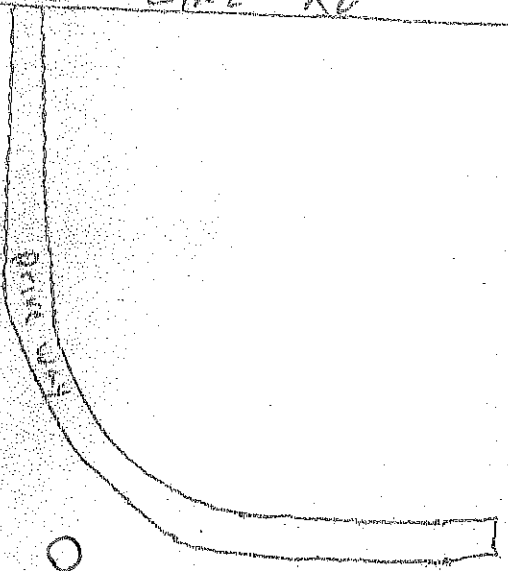
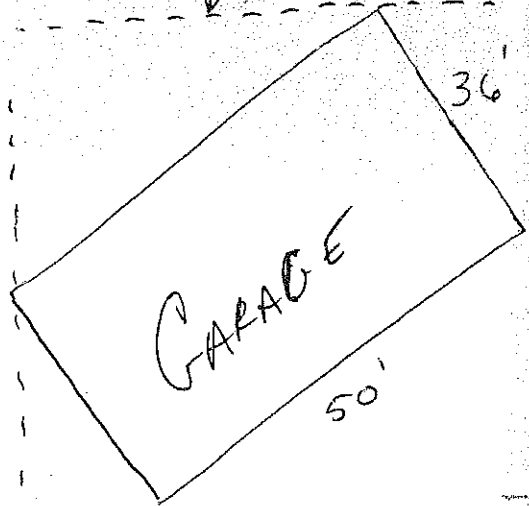
Hold For Sanitary: Hold For TBA: Hold For Affidavit: Hold For Fees:

North

RANGE LINE RD

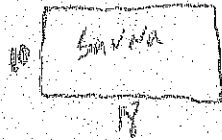
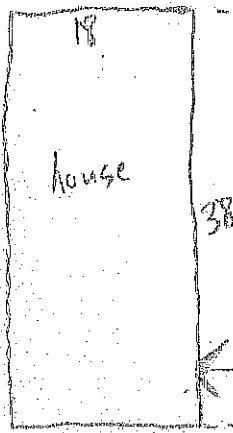
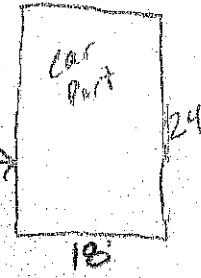
145' to center of RD.

from center of ROAD



160'

* septic (holding) tank



* well

North Boundary is 500 FEET

Over

44'

30 Acres to West Boundary

to other (cont.)
Property line

447'