SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

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

APPLICATION FOR PERMIT
BAYFIALD COONEY, WISCONSIN

Date Stamp (Received)

<u>_____</u>

NOV 212016

Date: Permit #:

Amount Paid:

10-19-16 16-0453 三 か 亏

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 Bayfield Co. Zoning Dept.

			-		☐ Municipal Use			BSM I BOW I BOW I BOW				A RESIDENTIA SUBSTITUTE			Proposed Use	Proposed Construction:	Existing Structure:	-	T ***		NO'CH	\$			Value at Time of Completion * include donated time & material	δ Non-Shoreland		CE C		Section	1/4,	PROJECT LOCATION	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor:	NH015 /	Address of Property:	Owner's Name:	TYPE OF PERMIT REQUESTED—▶
								(BB)	-	5		Sance			•	tion:	(if permit bei	- FOIr	Property		Relocate (existing bldg)	☐ Conversion	Addition/Alteration	New Construction	Project		Is Property	Creek or Lan	ls Property	, Township	1/4	Legal Descrip	son Signing Appl	Al lin	In less			QUESTED-
Other: (explain)	Condition	Special Use: (explain)	Accessory	Accessory Building	Addition/	Mobile Ho	Bunkhous						Residence	Principal S			ng applied for	Sheet		ness on	existing bldg)	3	Alteration	truction	A		//Land within	dward side of	//Land within	43	Gov't Lot	らでや パッケル でんかり Legal Description: (Use Tax Statement)	ication on behalf	<u></u>	Ø)	am 5		☐ LAND USE
olain)	Conditional Use: (explain)	e: (explain)	Accessory building Audition/Attendation (specify)	Building Addit	1-	1 01	Bunkhouse w/ (☐ sanitary, or	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)			(if permit being applied for is relevant to it)		☐ Foundation	☐ No Basement		i	- 1	□ 1-Story	# of Stories and/or basement		Fis Property/Land within 1000 feet of Lake, Pond or Flowage	Creek or Landward side of Floodplain? If yes—continue—	300 feet of Rive	N, Range	Lot Lot(s)	ax Statement)	of Owner(s))					
			Joll/Alter	(specify)	lı	red date)	, <u>or</u> □ sle	d Garage	Ç		rch		nting shack	structure	Prop	- Le	Le	-	-	ent					ient s	***************************************	e, Pond or	If yes	r. Stream	W	CSM	Tax 1D# (4-5 digits)	Agent Phone:	Contractor Phone:	Chiche	City/State/Zip:	Mailing Address:	SANITARY PRIVY
			adon (specify)	Marie Committee	N Local		☐ sleeping quarters, or		Aistern William Company		referensemenderefendeleverendelikseterbedendeldt ekstemente		c, etc.)	on property)	Proposed Structure	Length: 70 Fx							Year Round	Seasonal	Use		Pond or Flowage If yescontinue	continue —	nci Intermittent)	Town of:	Vol & Page	digits)		one:	The state of	Zip:	dress:	
				6					- ALLEN AND AND AND AND AND AND AND AND AND AN		baddill belgi i selik makandi papakandi babaga papakandi baga baga baga baga baga baga baga bag				ē	6				□ None	- 1	- 1		—	of bedrooms		Distance Stru		Distance Stru	ble	Lot(s) No.	S	gent Mailing Ac	Plumber:	58782	76	City	CONDITIO
		***************************************	:		уломическом молетте слеми годогом молетте		cooking & food prep facilities)		***************************************		apandaleetteesseeraaleetteesseerateette					Width: 3		□ None	☐ Compost Toilet	☐ Portable	- 1		☐ (New) Sanitary	☐ Municipal/City	%		Distance Structure is from Shoreline : fee		Distance Structure is from Shoreline :		. Block(s) No.		Agent Mailing Address (include City/State/Zip):			10017	City/State/Zip:	1
_) _		-	- 170		,	ties)	_	(_		_				341			Toilet	w/serv	or Vaul			//City	What Type of wer/Sanitary Syste is on the property?		oreline : feet	feet	oreline :	Lot Size	Subdivision:	Recorded Document	y/State/Zip):			Will	12	☐ SPECIAL USE
×	×	×	>	ر الإي	~ ×	×	×	×	×	×	×	×	< ×	×	Dimensions	H	I			ontract)	ulted (min	cify Type:	Specify Type:		What Type of Sewer/Sanitary System Is on the property?		□ Yes	Floodplain Zone?	-		ion:	Deed (i.e. # a					58831	□ в.о.а.
)))		- -	- -		- _	_	_	_	-	_ -	-	-	15	Height:	Height:			***************************************	Ited (min 200 gallon)						6\g`	erty in in Zone?		Acreage C	and the control of th	ssigned by Ru	Written Au Attached	Plumber Phone:	612-810	Cell Phone:	Telephone:	OTHER
			ļ	000	700 2										Square Footage	K F. F	7 1	-	<u></u>	Ll		- '	Well	□ City	Water		Z □ No Yes	Are wettand Present?		Enes.		Recorded Deed (i.e. # assigned by Register of Deed Document #: 1085 R-673	Written Authorization Attached Output Output	ione:	2-454			HER

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES any accompanying information) has been examined by me (us) and to the bast 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 the pur Owner(s): (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) 9

Authorized Agent:

Address to send permit 346

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

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

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te of Approval	Date						Conso	Z Constant	Signature of Inspector:	Signatur
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						hasp	Numa	かか	h No	0
			ached.)	No (If No they need to be attached.)		ached? □ Yes □	Board Conditions Attached?	ommittee or	Condition(s): Town, C	Conditio
on:	Date of				0	Inspected by:		12-7-11	Date of Inspection:	Date of I
Zoning District (り)) Lakes Classification (~))	Zoning Lakes C								Inspection Record:	Inspection
	+	operty Survey	Was Pr	Was Property Surveyed			J Pres □ No	Was Proposed Building Site Delineated	roposed Built	Was Pr
TOWN:	N	ented by Owr	es Repres	Were Property Lin			Aves	ircel Legally Created	Was Pa	
	Case #:	(B.O.A.)	by Varianc	Previously Granted by Variance				ဋ	Granted by Variance (B.O.A.)	Granted
Required	Affidavit Required Affidavit Attached	\$\$	□ Yes	Mitigation Required Mitigation Attached	Z Z Z Z	ra) uous Lot(s))	es (Fused/Contiguous Lot(s)) es	Is Parcel a Sub-Standard Lot. In res Is Parcel in Common Ownership In Yes Is Structure Non-Conforming In Yes	in Common	ls Parce Is St
				6	\neg	remin bate.	50 KM (100 KM)		1/0-0	700
					nial:	Reason for Denial:			Permit Denied (Date):	Permit [
γ Date:	Sanitary	ooms:	# of bedrooms:		per:	Sanitary Number:	Jse Only)	Issuance Information (County Use Only)	ce Inform	Issuan
ing Code.	for	Enforce The L	if Constru quired To also requi	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use ha Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uni The local Town, Village, City, State or Federal agencies may also require permits.	lling: ALL Mu , State or Fed	Two Family Dwe own, Village, City	II Land Use Perm on Of New One & The local T	NOTICE: A		
nk (HT), Privy (P), and Well (W).		DF), Holding	ain field (I	veyor at the owner's expense. Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding	struction, Se	n(s) of New Con	posed Location	yor at the owner's expens take or Mark Pro	a licensed surve	marked by
the setback must be measured must be visible from of the proposed site of the structure, or must be		dary line from whi rner within 500 fee	ick, the bounc n a known cor	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 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	30) feet from the I	et but less than thirty (verifiable by the Depa	more than ten (10) fee sly surveyed corner, or	onstruction of a structure imer to the other previous	e placement or co	Prior to the
n ane previously surveyed corner to the	nust be visible fram	ast be measured mu	ie setback mu	undary line from which the setback must be	d setback, the bou	the minimum required wheer's expense.	within ten (10) feet of nsed surveyor at the o	Prior to the placement or construction of a structure within ten (10) feet of the minimum required other previously surveyed corner or marked by a licensed surveyor at the owner's expense.	placement or co	Prior to the other previ
					Feet	200	TO STATE OF THE PARTY OF THE PA	Setback to Drain Field Setback to Privy (Portable, Composting)	to Drain Fig	Setback
is Feet				Setback to Well	Feet	300	R.	ank or Holding Tai	to Septic Ta	Setback
			dplain	Elevation of Floo		100		ast Lot Line	from the Ea	Setback
Feet No		AT.	etland on prope	Setback from Wetland 20% Slope Area on property		2000		Setback from the South Lot Line Setback from the West Lot Line	from the So	Setback Setback
Feet		Bluff	e bank or	Setback from the	Feet	15		Setback from the North Lot Line	from the N	Setback
Feet	water mark)	ream, Creek	River, St	Setback from the Lake (ordinary high-wal Setback from the River, Stream, Creek Setback from the Bank or Bluff	Feet	\$200	f-Way	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	from the Es	Setback
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Months and the second of the s			Dascr		\$ *	Magairen	ed to tile close	Description		
pproved by the Planning & Zoning Dept.		Changes in plans must be a	anges in p	Ch.		ing) st point)	(prior to continuing) red to the closest i	(7) above (S: (measu	Please complete (1) (8) Setback	TO BO
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				1 6	Jan Go	Q.	1300	N. S.		
WY (T)	alid/of (/ Fi	S tank (III)		(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	eam/Creek; es over 20%	(*) River; (*) Stu ands; or (*) Slop	(*) Lake; (*) Wetla	Show any (*): Show any (*):	(6) SI (7) SI	
	7	- T (117)	oad)	(Name Frontage R	ntage Road (Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Froi All Existing Structures on All All Existing Structures on		Show Location of: Show / Indicate: Show Location of (*): Show:	(2) (3) (4)	TY CE
•				pplying for)	at you are at	Property (regardless of what you are applying for)	your Property (Draw or Sketch	4 8 g	OF SECTOR VT. LOT