

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

APPLICANT: JDS Pin. Shukla  
 APPLICATION FOR PERMIT  
 BAYFIELD COUNTY, WISCONSIN  
 RECEIVED  
 Date Stamp (received) APR 11 2017  
 Bayfield Co. Zoning Dept.

ENTERED  
 Permit #: 17-08820  
 Date: 7-10-17  
 Amount Paid: \$185 \$108 \$178  
4-11-17  
 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: Kent & Elaine Adams Mailing Address: 4405 Wad Rd City/State/Zip: Cable, WI 54821 Telephone: (612)  
44094 Perry Lake Rd City/State/Zip: Cable, WI 54821 Cell Phone: 812-4548  
 Contractor: self Contractor Phone: Plumber: Plumber Phone: 812-4548

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: 817-3034 Agent Mailing Address (include City/State/Zip): 6173 Iron Lake Rd / Even River WI 54847 Written Authorization Attached  Yes  No  
Mike Fortak (715) PIN: (23 digits) 04-013-2-43-07-08-405-00-5000 Recorded Document (i.e. Property Ownership) Volume 946 Page(s) 4

PROJECT LOCATION: 1/4, part of 10 Gov't Lot: 10 Lot(s): 10 GSM: 7 Vol & Page: 7 Lot(s) No.: 10 Block(s) No.: 709 Subdivision: Tax ID 8551  
8, Township 43 N, Range 7 W Town of: Cable Lot Size: 7.0 Acreage

Shoreland  Non-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: 75 feet  
 Is Property/Land within 1000 feet of Lake, Pond or Flowage Yes--continue Distance Structure is from Shoreline: 75 feet

Is Property in Floodplain Zone?  Yes  No Are Wetlands Present?  Yes  No

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>\$28,000</u>	<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"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary Specify Type: <u>_____</u> <input type="checkbox"/> Sanitary (Exists) Specify Type: <u>_____</u> <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: 24' Width: 15'  
 Proposed Construction: Length: 24' Width: 15'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2 <sup>nd</sup> ) Porch with a Deck with (2 <sup>nd</sup> ) Deck with Attached Garage	<u>24'</u> <u>Circle Building</u> <u>_____</u> <u>_____</u> <u>_____</u> <u>_____</u> <u>_____</u> <u>_____</u>	<u>452</u> <u>_____</u> <u>_____</u> <u>_____</u> <u>353</u> <u>_____</u> <u>_____</u>
<input type="checkbox"/> Commercial Use	Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities)	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Municipal Use	Mobile Home (manufactured date) _____ Addition/Alteration (specify) _____ Accessory Building (specify) _____ Accessory Building Addition/Alteration (specify) _____	<u>_____</u> <u>_____</u> <u>_____</u> <u>_____</u>	<u>_____</u> <u>_____</u> <u>_____</u> <u>_____</u>
Paid for insurance	Special Use: (explain) <u>Class A Short-Term Rental</u>	<u>_____</u>	<u>_____</u>
Secretarial Staff	Conditional Use: (explain) _____ 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 submitted 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 provide authorization must accompany this application)  
 Authorized Agent: Mike Fortak - Mike Fortak Date: 3-21-17  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)  
 Address to send permit: PO Box 95, Cable, WI 54821 Attach  Copy of Tax Statement

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 attachment

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	130 Feet	Setback from the Lake (ordinary high-water mark)	75 Feet
Setback from the Established Right-of-Way	105 Feet	Setback from the River, Stream, Creek	75 Feet
Setback from the North Lot Line	804 Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	604 Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	1007 Feet	20% Slope Area on property	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Setback from the East Lot Line	Lake	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	NA Feet	Setback to Well	NA Feet
Setback to Drain Field	NA Feet		
Setback to Privy (Portable, Composting)	NA Feet		

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 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.

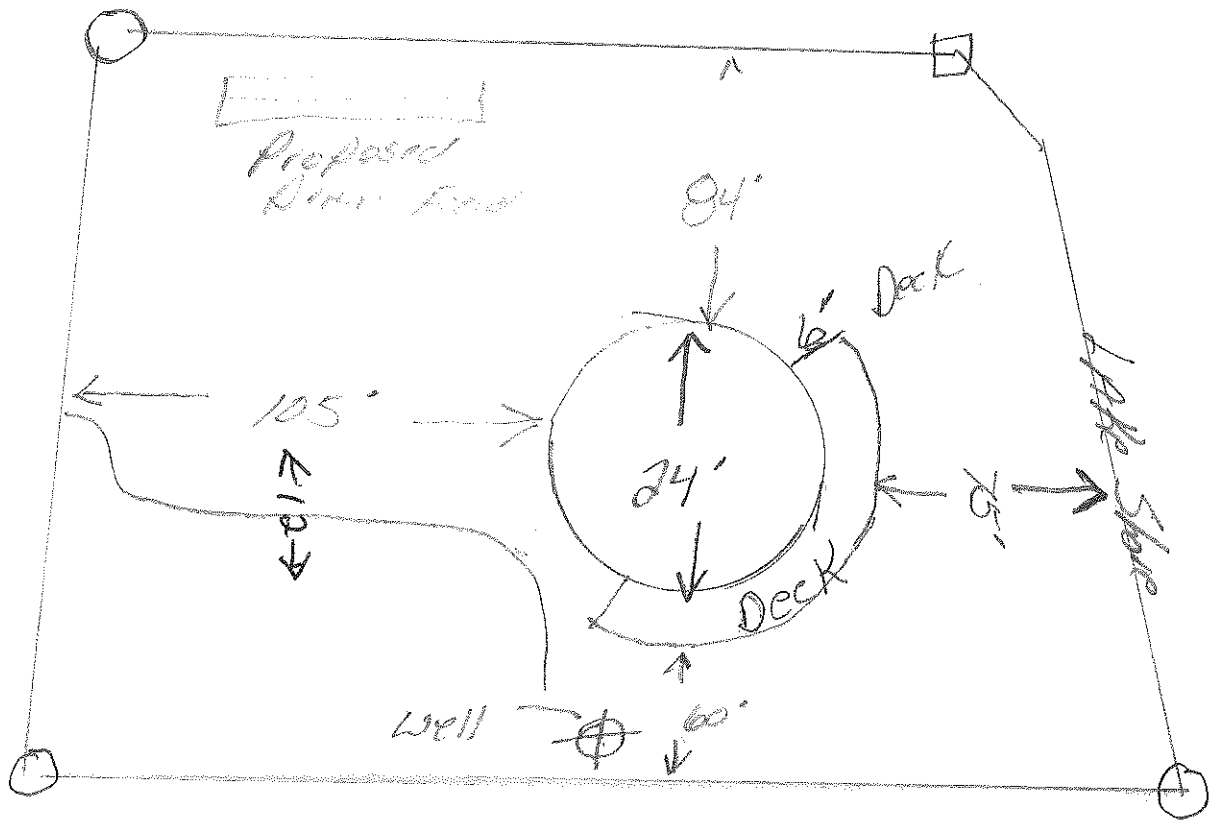
For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

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 #: 17-00826	Permit Date: 7-10-17					
<input type="checkbox"/> Is Parcel a Sub-Standard Lot <input type="checkbox"/> Is Parcel In Common Ownership <input type="checkbox"/> Is Structure Non-Conforming	<input checked="" type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> No	<input checked="" type="checkbox"/> No <input type="checkbox"/> No	<input type="checkbox"/> Mitigation Required <input type="checkbox"/> Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Affidavit Required <input type="checkbox"/> Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Granted by Variance (B.O.A.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Case #:	<input type="checkbox"/> Previously Granted by Variance (B.O.A.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Case #:			
<input checked="" type="checkbox"/> Was Parcel Legally Created <input type="checkbox"/> Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Were Property Lines Represented by Owner <input checked="" type="checkbox"/> Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Inspection Record: NOT STAYED Cleared area assumed to be building site. Property lines stated & fit used & many lines on map were found to differ from actual.	Date of Inspection: 4-24-17	Inspected by: G. Taylor / Robert Schumann	Zoning District: (R1)	Lakes Classification: (U)	Date of Re-Inspection:	Date of Approval: 5/2/2017
Conditions: Town, Committee or Board Conditions Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if No they need to be attached) Must comply with town res. show Must Contact Local Uniform Dwelling Code Inspection agency and secure VDC permits as required. Must maintain 75' setback to Perry Lake.						
Signature of inspector: <i>[Signature]</i>						
Hold For Sanitary: <input checked="" type="checkbox"/> 5/2/2017 hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>				

West Adams Pl 612-812-4548

Address - 44094 Perry Lake Rd



Perry Lake

Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – X  
SANITARY – 17-58S  
SIGN –  
SPECIAL – Class A  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **17-0256** Issued To: **Kent & Elaine Adams / Mike Furtak, Agent**

Location: -  $\frac{1}{4}$  of -  $\frac{1}{4}$  Section **8** Township **43** N. Range **7** W. Town of **Cable**

Par in

Gov't Lot **10** Lot Block Subdivision CSM#

For: **Residential Use: [ 1- Story; Yurt (Irregular) = 452 sq. ft.; Deck (Irregular) = 353 sq. ft. ]**

(Disclaimer): Any future expansions or development would require additional permitting.

**Condition(s):** Must comply with Towns restrictions. Must contact local UDC inspection agency and secure UDC permit as required. Must maintain 75' setback to Perry Lake. Town's Conditions: Approved because it is in compliance with the Town of Cable Lake Use Plan. 1] Contingent upon compliance with driveway ordinance, 2] Bayfield County Health regulations, 3] UDC inspections, 4] No RV or tents to be placed in the yard, 5] supply a 24 hour emergency contact, 6] to follow room tax bylaws.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Rob Schierman**

Authorized Issuing Official

**July 10, 2017**

Date