

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
 SEP 21 2017
 Bayfield Co. Zoning Dept.

ENTERED Permit #:
 Date: 10-16-17
 Amount Paid: \$215 9-21-17
 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. 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: Chris & Cynthia McArthur Mailing Address: 4550 Bayfield Rd Hyveland WI 54893 Telephone: 715 462 4100

Address of Property: 0 TRAIL INN RD City/State/Zip: CABLE, WI 54821 Cell Phone: 715 558 2451

Contractor: Daniel Farley CONST TO CONST Contractor Phone: 715 699 4020 Plumber: 715 558 2452

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: 715 699 4020 Agent Mailing Address (include City/State/Zip): CABLE, WI 54821 Written Authorization Attached Yes No

PROJECT LOCATION: Legal Description: (Use Tax Statement) SE 1/4, SE 1/4 Gov't Lot 6 Lot(s) 6 CSM 546 246-188 Lot(s) No. 8539 Block(s) No. 2017 Subdivision: 510054

Section 08, Township 43 N, Range 07 W Town of: CABLE Lot Size 8.0 Acre Acreage 8.0 Acre

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue No

Is Property/Land within 1000 feet of lake, Pond or Flowage If yes---continue No

Distance Structure is from Shoreline: 59 feet

Distance Structure is from Shoreline: 59 feet

Is Property in Floodplain Zone? Yes No

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
\$ <u>15,000</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 checked="" type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story		<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: <u>3RD COND</u>	<input checked="" type="checkbox"/> NONE
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement			<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement			<input type="checkbox"/> Portable (w/service contract)	
		<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
		<input checked="" type="checkbox"/> NONE (DECK)			<input checked="" type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it) Length: 16' Width: 12' Height: 4'

Proposed Construction: Length: 16' Width: 12' Height: 4'

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property)	(<u>16</u> X <u>12</u>)	<u>192'</u>
	Residence (i.e. cabin, hunting shack, etc.)	(<u> </u> X <u> </u>)	
	with Loft	(<u> </u> X <u> </u>)	
	with a Porch	(<u> </u> X <u> </u>)	
	with (2 nd) Porch	(<u> </u> X <u> </u>)	
	with (2 nd) Deck	(<u> </u> X <u> </u>)	
<input type="checkbox"/> Commercial Use	with Attached Garage	(<u> </u> X <u> </u>)	
	Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(<u> </u> X <u> </u>)	
	Mobile Home (manufactured date)	(<u> </u> X <u> </u>)	
	Addition/Alteration (specify) <u>DECK (Under Gable Gables Permit)</u>	(<u>16</u> X <u>12</u>)	<u>192'</u>
	Accessory Building (specify) <u> </u>	(<u> </u> X <u> </u>)	
	Accessory Building Addition/Alteration (specify) <u> </u>	(<u> </u> X <u> </u>)	
<input type="checkbox"/> Municipal Use	Special Use: (explain) <u> </u>	(<u> </u> X <u> </u>)	
	Conditional Use: (explain) <u> </u>	(<u> </u> X <u> </u>)	
	Other: (explain) <u> </u>	(<u> </u> X <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 this information. I (we) am (are) providing this information for the purpose of inspection. I (we) consent to county officials charged with administering county ordinances to have access to the above described property and any reasonable information for the purpose of inspection.

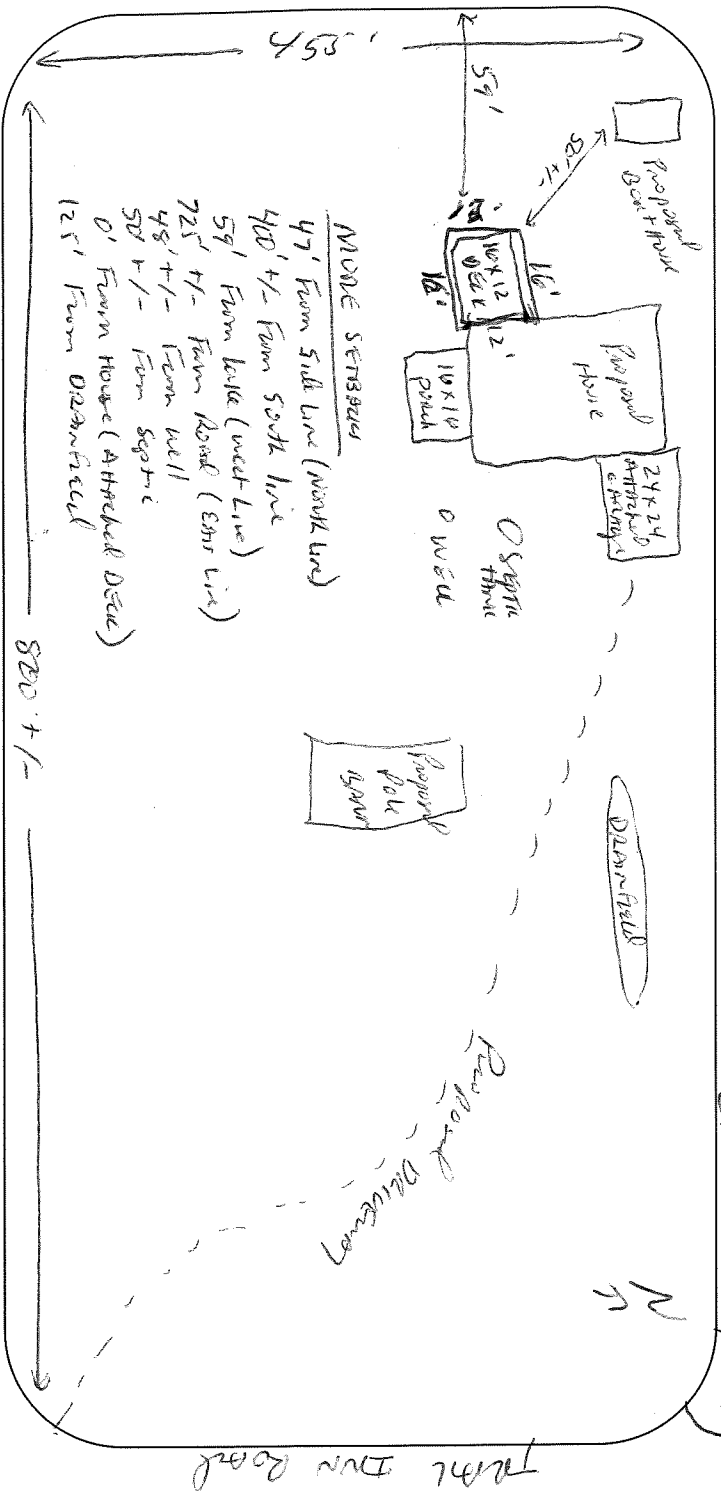
Owner(s): Chris & Cynthia McArthur Date 9-20-17
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

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

Address to send permit Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

9) 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	725' +/- Feet	Setback from the Lake (ordinary high-water mark)	59' Feet
Setback from the Established Right-of-Way	725' +/- Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	47' +/- Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	400' +/- Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	59' +/- Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	725' +/- Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	50' +/- Feet	Setback to Well	48' +/- Feet
Setback to Drain Field	125' +/- Feet		
Setback to Privy (Portable, Composting)	N/A 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: 17-1195 # of bedrooms: 3 Sanitary Date: 10-2-17

Permit Denied (Date): _____ Reason for Denial: _____

Permit #: 17-0419 Permit Date: 10-16-17

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

Is Parcel in Common Ownership Yes (fused/contiguous lots) Yes No

Is Structure Non-Conforming Yes No

Granted by Variance (B.O.A.) Case #: _____ Previously Granted by Variance (B.O.A.) 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: 9/7/17 Inspected by: Atkins Zoning District: (R-1)

Condition(s): Town, Committee or Board Conditions Attached? Yes No (If No they need to be attached.) Lakes Classification: (3) Date of Re-Inspection: _____

Signature of Inspector: Atkins Date of Approval: 10/2/17

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

Condition: Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained.

Village, State or Federal
May Also Be Required

- LAND USE - X
- SANITARY -
- SIGN -
- SPECIAL -
- CONDITIONAL -
- BOA -

BAYFIELD COUNTY

PERMIT

**WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No. **17-0419** Issued To: **Christopher & Cynthia McGrath**

Location: - 1/4 of - 1/4 Section **8** Township **43** N. Range **7** W. Town of **Cable**

Par in					
Gov't Lot	6	Lot	Block	Subdivision	CSM#

For: **Residential Accessory Structure: [1- Story; Deck/Gazebo (16' x 12') = 192 sq. ft.]**
 (Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained.

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.

Tracy Pooler

 Authorized Issuing Official

October 16, 2017

 Date