

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

APPLICATION FOR PERMIT  
 BAYFIELD COUNTY WISCONSIN  
 Date Submitted (Received)  
 AUG 12 2013  
 Bayfield Co. Zoning Dept.

Permit #:	13-0858	ENTERED
Date:	8-30-13	
Amount Paid:	\$390	
Refund:	81313	

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: Richard Bond Mailing Address: 5831 Schwann Dr. Fitchburg, WI Telephone: 53711

Address of Property: 2317A Garmisch Rd City/State/Zip: Cable, WI 54821 Cell Phone: \_\_\_\_\_

Contractor: Richard Bisobing Contractor Phone: 798-3653 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: Legal Description: (Use Tax Statement) 1/4, 1/4 PIN: (23 digits) 04 034-3-43-06-23-200-654-1800 Recorded Document: (i.e. Property Ownership) Volume 1064 Page(s) 851

Section 23, Township 43 N, Range 6 W Town of: Namakagon Subdivision: Garmisch USA Caddo Acreage 1.691

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?  If yes---continue  If yes---continue

Is Property/Land within 1000 feet of Lake, Pond or Flowage  If yes---continue  If yes---continue

Distance Structure is from Shoreline: \_\_\_\_\_ feet  
 Distance Structure is from Shoreline: 300+ 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>130,000</u>	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input 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 checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Ceuv</u>	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input checked="" type="checkbox"/> Foundation	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
		<input type="checkbox"/> Foundation	<input checked="" type="checkbox"/> <u>Truck Under</u>	<input type="checkbox"/> None	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> None

Existing Structure: (if permit being applied for, is relevant to it) Length: 30 Width: 58 Height: 181

Proposed Construction: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

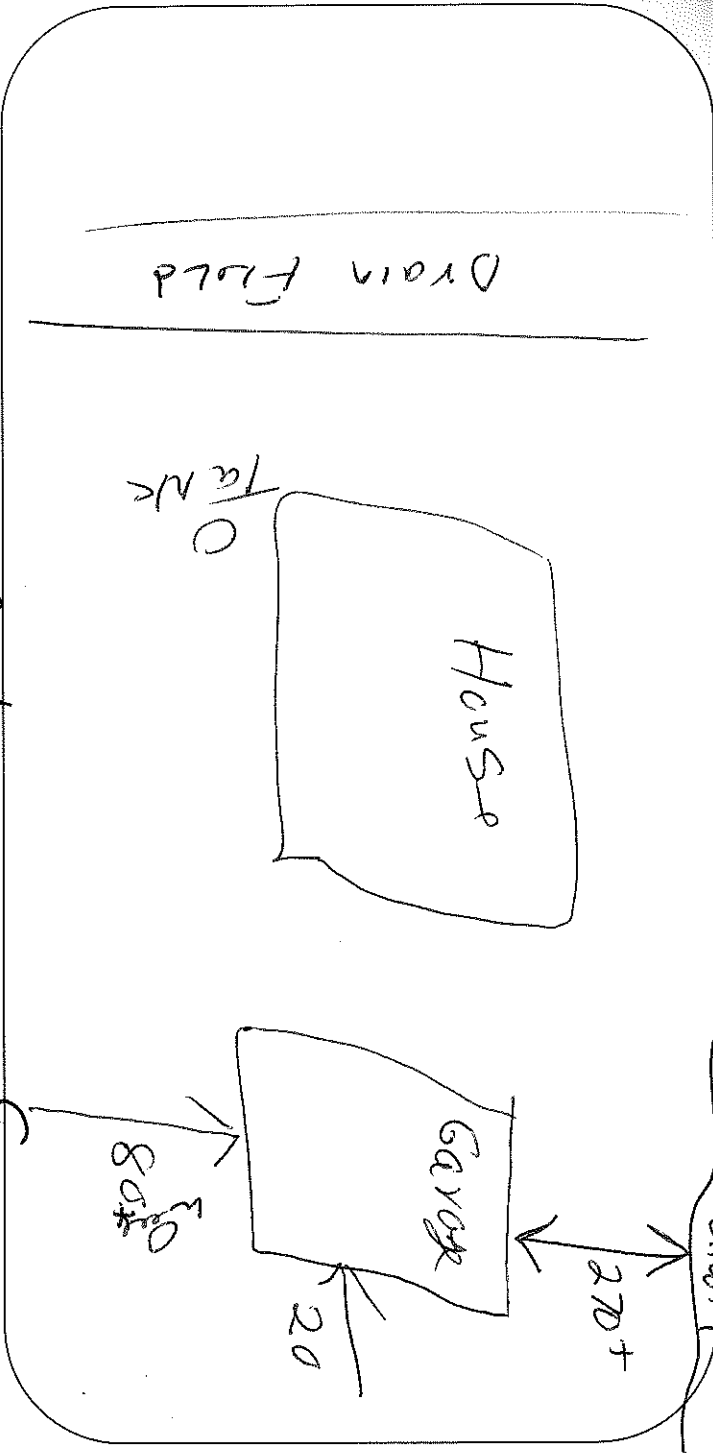
Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	( ) X ( )	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	( ) X ( )	
	<input type="checkbox"/> with Loft	( ) X ( )	
	<input type="checkbox"/> with a Porch	( ) X ( )	
	<input type="checkbox"/> with a Deck	( ) X ( )	
	<input type="checkbox"/> with (2 <sup>nd</sup> ) Deck	( ) X ( )	
	<input type="checkbox"/> with Attached Garage	( ) X ( )	
	<input type="checkbox"/> Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities)	( ) X ( )	
	<input type="checkbox"/> Mobile Home (manufactured date) _____	( ) X ( )	
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Addition/Alteration (specify) _____	( ) X ( )	
	<input checked="" type="checkbox"/> Accessory Building (specify) <u>gavagz (Truck Under)</u>	( <u>30 x 58</u> )	<u>1740</u>
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	( ) X ( )	
Rec'd for Issuance	Special Use: (explain) _____	( ) X ( )	
<u>AUG 19 2013</u>	Conditional Use: (explain) _____	( ) X ( )	
<u>Secretariat Staff</u>	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 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 letter(s) of authorization must accompany this application)  
 Authorized Agent: Richard Bisobing Date 8-8-13  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)  
 Address to send permit Bisobing Builders, 42420 Woodcrest Dr, Cable, WI 54821 Attach   
 APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE 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)

(8) Setbacks: (measured to the closest point) *Road 300'* → Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	80+	Setback from the Lake (ordinary high-water mark)	270+
Setback from the Established Right-of-Way	70+	Setback from the River, Stream, Creek	N/A
Setback from the North Lot Line	N/A	Setback from the Bank or Bluff	N/A
Setback from the South Lot Line	494	Setback from Wetland	230+
Setback from the West Lot Line	N/A	Setback from 20% Slope Area	N/A
Setback from the East Lot Line	80+	Elevation of Floodplain	N/A
Setback to Septic Tank or Holding Tank	50+	Setback to Well	70+
Setback to Drain Field	60+		
Setback to Privy (Portable, Composting)	N/A		

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 #: *13-03526* Permit Date: *8-20-13*

Is Parcel a Sub-Standard lot  Yes  No

Is Parcel in Common Ownership  Yes (Deed of Record) \_\_\_\_\_  No

Is Structure Non-Conforming  Yes (Fused/Contiguous Lot(s)) \_\_\_\_\_  No

Granted by Variance (B.O.A.)  Yes  No Case #: \_\_\_\_\_ Previously Granted by Variance (B.O.A.)  Yes  No Case #: \_\_\_\_\_

Was Parcel Legally Created  Yes  No

Was Proposed Building Site Delineated  Yes  No

Were Property Lines Represented by Owner Was Property Surveyed  Yes  No

Inspection Record: *Well staked. Metatall setbacks.*

Date of inspection: *8-16-13* Inspected by: *MM Furtak*

Condition(s) Town, Committee or Board Conditions Attached?  Yes  No (If No they need to be attached.)

*May not be used for human habitation. No water under pressure in structure.*

Signature of Inspector: *Michael Furtak* Date of *8/16/13*

Hold For Sanitary:  \_\_\_\_\_ Hold For TBA:  \_\_\_\_\_ Hold For Affidavit:  \_\_\_\_\_ Hold For Fees:  \_\_\_\_\_

SUBMIT: COMPLETED APPLICATION, TAX 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  
 AUG 21 2013  
 Bayfield Co. Zoning Dept  
 HOWARD TILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

ENTERED  
 Permit #: 13-0065  
 Date: 8-23-13  
 Amount Paid: \$475  
 Refund: 8-21-13

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: Joseph & Jean Falls Mailing Address: 435 N Shepard St Kellogg, MN Telephone: 651 764-1245

Address of Property: Todd & Maria Hubbard City/State/Zip: Cable, WI 55821 Call Phone: \_\_\_\_\_

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): \_\_\_\_\_

PROJECT LOCATION: Legal Description: (Use Tax Statement) 1/4, 1/4 Gov't Lot 2 Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision: \_\_\_\_\_

Section 20, Township 43 N, Range 60 W Town of: Nama Kagan Lot Size \_\_\_\_\_ Acreage 1.0

Distance Structure is from Shoreline: \_\_\_\_\_ feet Is Property in Floodplain Zone?  Yes  No

Distance Structure is from Shoreline: \_\_\_\_\_ feet Are Wetlands Present?  Yes  No

Recorded Document: (i.e. Property Ownership) Volume 999 Page(s) 63

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?  If yes--continue  If yes--continue

Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes--continue

Value at Time of Completion \$14,000 Project (what are you applying for)  New Construction  Addition/Alteration  Conversion  Relocate (existing bldg)  Run a Business on Property

# of Stories and/or basement:  1-Story  2-Story  3  Foundation

Use:  Seasonal  Year Round  1  2  3  Sanitary (Exists) Specify Type: CONV  Privy (Pit) or  Vaulted (min 200 gallon)  Portable (w/service contract)  Compost Toilet  None

What Type of Sewer/Sanitary System Is on the property?  Municipal/City  (New) Sanitary Specify Type: \_\_\_\_\_  Sanitary (Exists) Specify Type: CONV  Privy (Pit) or  Vaulted (min 200 gallon)  Portable (w/service contract)  Compost Toilet  None

Water:  City  Well

Existing Structure: (if permit being applied for is relevant to it) Length: 30' Width: 30' Height: \_\_\_\_\_

Proposed Construction: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Proposed Use:  Residential Use  Commercial Use  Municipal 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

Bunhouse w/  sanitary,  sleeping quarters,  cooking & food prep facilities)  Mobile Home (manufactured date) \_\_\_\_\_  Addition/Alteration (specify) garage  Accessory Building (specify) \_\_\_\_\_  Accessory Building Addition/Alteration (specify) \_\_\_\_\_

Rec'd for Issuance: AUG 23 2013 Special User: (explain) \_\_\_\_\_ Conditional User: (explain) \_\_\_\_\_ Other: (explain) \_\_\_\_\_

Secretarial Staff: \_\_\_\_\_

Dimensions: \_\_\_\_\_ Square Footage: \_\_\_\_\_

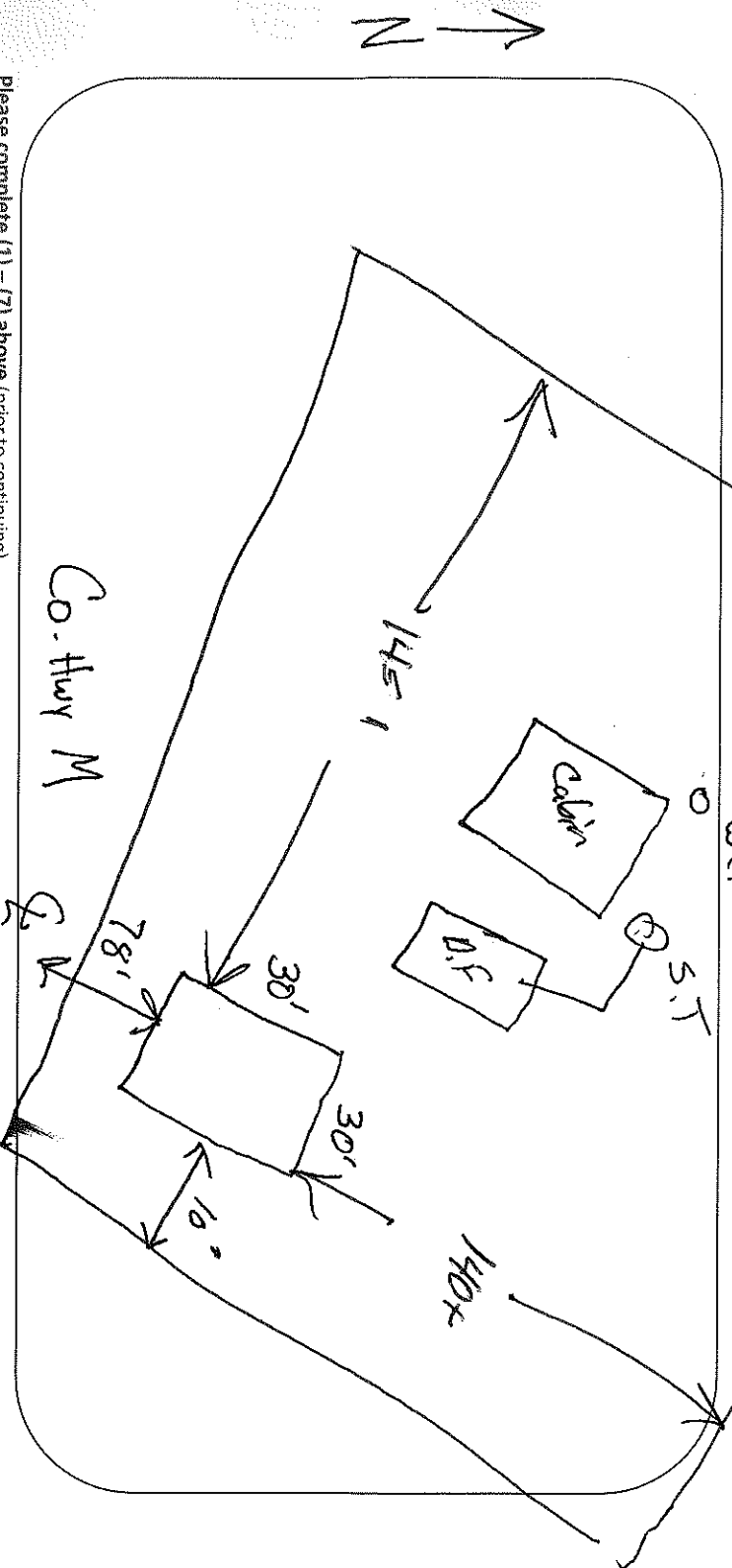
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
 I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge 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 and information being provided for the purpose of inspection.

Owner(s): Todd Hubbard & Maria Hubbard Date: 8-9-13  
 (If there are Multiple Owners listed on the Deed All Owners must sign w/ 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 \_\_\_\_\_  
 Address to send permit: same as above Copy of Tax Statement \_\_\_\_\_  
 If you recently purchased the property send your Recorded Deed \_\_\_\_\_

Look 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)

(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	78 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	50 Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	140'± Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	N/A Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	145 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	10 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	70'± Feet	Setback to Well	70'± Feet
Setback to Drain Field	30'± Feet		
Setback to Privy (Portable, Composting)	30'± Feet		
	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 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 # <u>13-03267</u>		Permit Date: <u>8-23-13</u>				
<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 type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/contiguous Lot(s)) <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <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 checked="" type="checkbox"/> No <input type="checkbox"/> No	<input type="checkbox"/> Affidavit Required <input type="checkbox"/> Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input type="checkbox"/> No
Granted by Variance (B.O.A.)		Case #:	Previously Granted by Variance (B.O.A.)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner		
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Was Property Surveyed		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record:		Well Staked. Meets all setbacks. May not be used for human habitation. No water under pressure in structure.				
Date of Inspection: <u>8-9-13</u>		Inspected by: <u>M. Furtak</u>				
Condition(s) Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (if No they need to be attached.) <u>May not be used for human habitation. No water under pressure in structure.</u>		Zoning District: <u>(R-1)</u> Lakes Classification: <u>(NA)</u>				
Date of Re-Inspection:		Date of Re-Inspection:				
Signature of Inspector: <u>Michael Furtak</u>		Date of print: <u>8-23-13</u>				
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		
				Hold For Fees: <input type="checkbox"/>		