

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
 Date Stamp (Received)
OCT 09 2013
 Bayfield Co. Zoning Dept.

Permit #:	13-0355
Date:	10-11-13
Amount Paid:	\$1000
Envelope #:	10-9-13
Returned:	

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: SCOTT WARREN
Address of Property: 24715 GAMMEL LAKE RD
City/State/Zip: CARLE, WI 54821
Telephone: 2101 BENSIE AVE
Cell Phone: ASHLAND, WI 54806

Contractor: RICK VERHOFF BUILDERS
Contractor Phone: 507-273-8127
Plumber: BLAKEMAN PLUMBERS
Plumber Phone: 682-6050

Authorized Agent: (Person Signing Application on behalf of Owner(s))
Agent Name: RICK VERHOFF
Agent Phone: 507-273-8127
Agent Mailing Address (include City/State/Zip): 2083 STARBURST DR. SW
 ROCHESTER, MN 55902
Written Authorization Attached: Yes No

PROJECT LOCATION: Legal Description: (Use Tax Statement)
 1/4, 1/4
 P.L.N.: (23 digits) 04-034-2-43-06-12-4-00-227
 Recorded Document: (i.e. Property Ownership) 11/3
 Page(s) 305

Section: 12, Township 43 N, Range 6 W
Town of: NAMA KAKAWI
Lot Size: 185 x 240
Acres: 1.1402

Shoreland → Non-Shoreland

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

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

Distance Structure is from Shoreline: _____ feet
 Distance Structure is from Shoreline: 76 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
\$400,000	<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 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 checked="" type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: SEWERTY <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"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it)
 Length: 110 W 94.24
 Width: 45
 Height: 23

Proposed Construction:
 Length: 110 W 94.24
 Width: 45
 Height: 23

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property) <input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2nd) Deck with Attached Garage	(56 X 30) (24 X 16) (15 X 16) (12 X 50) (28 X 42)	1584 384 240 600 1176
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	()	()
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Mobile Home (manufactured date)	()	()
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify)	()	()
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Accessory Building (specify)	()	()
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	()	()
<input type="checkbox"/> Rec'd for ISSUANCE	<input type="checkbox"/> Special Use: (explain)	()	()
<input type="checkbox"/> Rec'd for ISSUANCE	<input type="checkbox"/> Conditional Use: (explain)	()	()
<input type="checkbox"/> Rec'd for ISSUANCE	<input type="checkbox"/> Other: (explain)	()	()

Secretarial Staff
 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 at any reasonable time for the purpose of inspection.

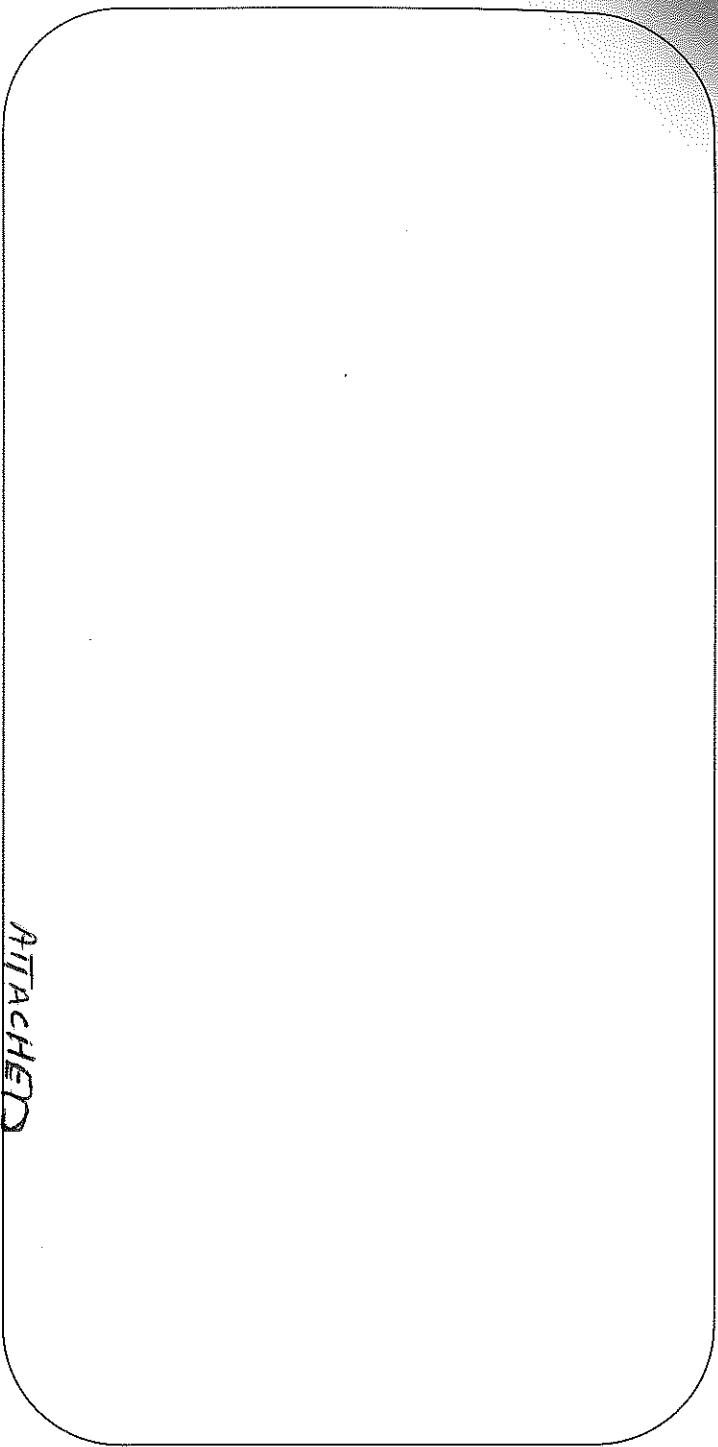
Owner(s): _____ Date: 9/28/13
 (If there are Multiple Owners listed on the Deed, All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ Date: 9/28/13
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: 2083 STARBURST DR. SW ROCHESTER, MN 55902
 Attach Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

- Draw or Sketch your Property** (regardless of what you are applying for)
- Show location of: **Proposed Construction**
 - Show / Indicate: **North (N)** on Plot Plan
 - Show Location of (*): **(*) Driveway and (*) Frontage Road** (Name Frontage Road)
 - Show: **All Existing Structures on your Property**
 - Show any (*): **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
 - Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
 - 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	90 Feet	Setback from the Lake (ordinary high-water mark)	75 Feet
Setback from the Established Right-of-Way	71 Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	71 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	95 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	74 Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	55 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	20 Feet	Setback to Well	30 Feet
Setback to Drain Field	49 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 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: 13-1075 # of bedrooms: 4 Sanitary Date: 9-26-13
 Permit Denied (Date): _____ Reason for Denial: _____
 Permit #: 13-0355 Permit Date: 10-11-13

Is Parcel a Sub-Standard Lot Yes No (Deed of Record) _____ No
 Is Parcel in Common Ownership Yes (Fused/Contiguous Lot(s)) 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: Well staked. Metal set back
 Date of Inspection: 10-10-13 Inspected by: Mr. Fuchs Zoning District: (R-1)
 Condition(s): Town, Committee or Board Conditions Attached? Yes No (If No, they need to be attached.) Date of Re-Inspection: _____

Signature of Inspector: Michael Fuchs
 Hold For Sanitary: _____ Hold For TBA: _____ Hold For Affidavit: _____ Hold For Fees: _____
 A uniform dwelling code (UDC) permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Date of Approval: 10-11-13

County, WI

Aerial Map

