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 (Receivab)



Date: Permit #: Refund: Amount Paid: B 7-31-1 1-880-I

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 APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANTIENT CONSTRUCTION UNTIL ALL PERMITS PERMI

Section <u>A</u> , Township <u>43</u> N, Range <u>C</u> W	1/4,1/4 Gov't Lot Lot(s)	PROJECT LOCATION Legal Description: (Use Tax Statement)	of Owner(s))		Address of Property: NISTONEWY PT.	Owner's Name:	TYPE OF PERMIT REQUESTED → □ LAND USE □ SANITARY □ PRIVY □ CONDITIONAL USE □ SPECIAL USE
W Namalcagen) CSM Vol & Page Lot(s) No. Block(s) No.	Tax ID# (4-5 digits) 3-501-5	715-754-2126 44870 CNP HUY DUSYES	715-714-218 Plumber:	CHARCINI SASZI	(355) W. Mornowk Chicago, 166	NITARY PRIVY CONDITIONAL USE SPEC
Fot Size Acreage	Mission: Dt	Recorded Deed (i.e. # assigned by Register of Deeds Document #: 770 R- 567	Written Authorization Attached Xyes I No	1	Cell Filloure.	1 (COCO) THE 320	□ B.O

	Creek or Landward side of Floodplain?		If yescontinue>		feet	Floodplain Zone?	Present?
Shoreland →	队s Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	1000 feet of Lake, Pon If yo	Pond or Flowage If yescontinue	Distance Stru	Distance Structure is from Shoreline:	□ Yes	□ Yes
☐ Non-Shoreland						100 March 1970	
Value at Time of Completion *include donated time &	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	pe of ry System operty?	Water
	□ New Construction	☐ 1-Story	☐ Seasonal	<u></u>	☐ Municipal/City	The state of the s	City
	☐ Addition/Alteration	☐ 1-Story + Loft	X Year Round	□ 2	☐ (New) Sanitary Spec	ify Type:	Xwell
18.8°	☐ Conversion	№ 2-Story		≫ 3	X Sanitary (Exists) Specify Type: INDUVC	ify Type: Maure	
	☐ Relocate (existing bldg)	⊗ Basement ■ Company of the last of the			☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	ulted (min 200 gallon)	
	Run a Business on	□ No Basement		□ None	Portable (w/service contract)	ntract)	
	Property	Foundation			☐ Compost Toilet		1
					□ None	The state of the s	
	, market					, , , , , , , , , , , , , , , , , , ,	Î
Existing Structure	Existing Structure: (if permit being applied for is relevant to it)	r is relevant to it)	Length: 1	5	Width: TT	Height:	
Proposed Construction:	ction:		Length:	Ø.	Width:	Height:	

Proposed Construction:

			The state of the s
Proposed Use	Proposed Structure	Dimensions	Square Footage
A	Principal Structure (first structure on property)	(x)	
	Residence (i.e. cabin, hunting shack, etc.)	(×	
	with Loft	(X	
Residential Use	with a Porch	×	
	with (2 nd) Porch	×	
~ Si	with a Deck	×	
	with (2 nd) Deck	×	
Commercial Use	with Attached Garage	X	
7**************************************	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	×	
Hec'd for Issuance□	Mobile Home (manufactured date)	×	
	Addition/Alteration (specify)	9/2 3/1)	
Mincipel ase 1	Accessory Building (specify)	×	
	Accessory Building Addition/Alteration (specify)	×	
Heed or ssuarce		The state of the s	
	Special Use: (explain)	×	
	Conditional Use: (explain)	×	
	Other: (explain)	×	
Secretarial Staff	TAILLING TO OBTAIN A DEBNAT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES	TES	

FAILURE TO UBIAIN A PERMIT OF 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) and a couracy 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 letter(s) of authorization must accompany this application)

Authorized Agent: (If you are 10 W. D.

Address to send permit

signing on behalf of the owner(s) a letter of authorization must accurately the control of the owner(s) a letter of authorization must accurately the control of the owner(s) a letter of authorization must accurately the control of the owner(s) a letter of authorization must accurately the control of the owner(s) a letter of authorization must accurately the control of the owner(s) a letter of authorization must accurately the control of the owner(s) a letter of authorization must accurately the control of the owner(s) a letter of authorization must accurately the control of the owner(s) and the control of the control of the control of the owner(s) and the control of the contr 1277.

Date 6.

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

below: <u>Draw</u> or <u>Sketch</u> your	ow: Draw or Sketch your Property (regardless of what you are applying for)		
(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):	Proposed Construction North (N) on Plot Plan (*) Driveway <u>and</u> (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	Road) (*) Holding Tank (HT) and/or (*) Privy (P)	
	tohe		
	DECK PROSE	Te Cost	, p. — — — — — — — — — — — — — — — — — —
			trate Virginia de la compete
Please complete (1) - (7) above (prior to continuing) (8) Setbacks: (measured to the closest point)	point)	Changes in plans must be approved by the Planning & Zoning Dept.	e p
Description Setback from the Centerline of Platted Road	Measurement 149 Feet	vater mark) \$5	Feet
Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line	GS Feet Seet Feet	ff Yes	Feet Feet No
Setback from the West Lot Line ROAD Setback from the East Lot Line ROAD Setback to Septic Tank or Holding Tank	Feet Feet	on property	Feet Feet
Setback to Driny (Portable, Composting) Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within other previously surveyed corner or marked by a licensed support to the placement or construction of a structure more to	y, Composting) Feet Feet on of a structure within ten (10) feet of the minimum required setback, the boundary line from which the marked by a licensed surveyor at the owner's expense. on of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setbac	the setback must be measured must be visible from one previously surveyed corner to the back, the boundary line from which the setback must be measured must be visible from	to the
(9) Stake or Mark Propose (9) Stake or Mork Propose NOTICE: All Lar	(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST). Drain field (DF), Holding Tank (HT), Pri 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: The local Town, Village, City, State or Federal agencies may also require permits.	rain field (DF), Holding Tank (HT), Privy (P), and Well (W). be if Construction or Use has not begun. lequired To Enforce The Uniform Dwelling Code. sy also require permits.	
Issuance Information (County Use Only) Permit Denied (Date):	Sanitary Number ODO 6 7 Reason for Denial:	# of bedrooms 7 Sanitary Date: 10 20 Ca	.
	Permit Date:		·
Lot	(Deed of Record) KNo Mitigation Required (Fused/Contiguous Lot(s)) KNo Mitigation Attached	⊖ Yes	8.8
ase #:		Variance (B.O.A.) Case #:	
Was Parcel Legally Created Was Proposed Building Site Delineated	Yes ONO Were Property L		λά Nο ON □
Inspection Record:		ng District (R —) s Classification ()
ction:	ected by: Affalla.	Date of Re-inspection:	
Condition(s): Town, Committee or Board Condit Maintain pervious condi Contact UR Faspector G	ions Attached? "Yes XNO-(II No they need to they need to the colors of land en to the consistency of the con	o be attached.) I DEK	
tor: H	HOLD FOR TRAP.	Hold For Fees:	7
	Hold For AffidaVII.		

City, Village, State or Federal May Also Be Required

LAND USE - X
SANITARY - 00062 (10/22/1980)
SIGN SPECIAL CONDITIONAL -

BAYFIELD COUNTY
PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

BOA -Jennifer Kordowski Issued To: 17-0294 No. Namakagon Town of W. Range 6 43 Township Section 1/4 of I ocation: Subdivision Missionary Point CSM# Block Lot Gov't Lot

For: Residential Addition: [1- Story; Deck (16' x 46') = 736 sq. ft.]

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

Condition(s): Maintain pervious condition above and below planned deck. Contact UDC inspector for permits prior to construction.

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

July 31, 2017

Date