125

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) RECEIVED OCT 15 2013 Bayfield Co. Zoning Dept.

Permit #:	13-0388 ENTERED
Date:	10-25-13
Amount Paid:	$125 10-15-13
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:	Mailing Address:	City/State/Zip:	Telephone:
BARBARA ELFSTRAND	865 Johnson Pkwy	St Paul, MN 55106	651-771-9528
Address of Property:	**City/State/Zip:**		**Cell Phone:**
Oriental falls Rd	Oriental, WS I		952 923 8557
Contractor:	**Contractor Phone:**	**Plumber:**	**Plumber Phone:**
self			
Authorized Agent: (Person Signing Application on behalf of Owner(s))	**Agent Phone:**	**Agent Mailing Address** (include City/State/Zip):	**Written Authorization Attached** ☐ Yes ☐ No
N/A			

PROJECT LOCATION	Legal Description: (Use Tax Statement)	PIN: (23 digits) 04-036-2-49-05-03-2-000-20000	Recorded Document: (i.e. Property Ownership) Volume _____ Page(s) _____

_____1/4, _____1/4	Gov't Lot	Lot(s)	CSM	Vol & Page	Lot(s) No.	Block(s) No.	Subdivision:

Section _____, Township _____ N, Range _____ W	Town of: Oriental	Lot Size 350 x 1400 ft	Acreage 10.4

☒ Shoreland →	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline: +/- 1,500 FT feet	Is Property in Floodplain Zone? ☐ Yes ☒ No	Are Wetlands Present? ☐ Yes ☒ No
	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline: _____ feet		
☐ Non-Shoreland				

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
$ 35,000	☒ New Construction	☐ 1-Story	☐ Seasonal	☒ 1	☐ Municipal/City	☐ City
	☐ Addition/Alteration	☒ 1-Story + Loft	☒ Year Round	☒ 2	☒ (New) Sanitary Specify Type: PRIVY	☒ Well
	☐ Conversion	☐ 2-Story	☐ _____	☐ 3	☐ Sanitary (Exists) Specify Type: _____	☐ _____
	☐ Relocate (existing bldg)	☐ Basement		☐ _____	☒ Privy (Pit) or ☐ Vaulted (min 200 gallon)	
	☐ Run a Business on Property	☐ No Basement		☐ None	☐ Portable (w/service contract)	
		☐ Foundation			☐ Compost Toilet	
	☐ _____	☐ _____			☐ None	

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length: 16	Width: 32	Height: 14

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	☐	**Principal Structure** (first structure on property)	(X)	
	☒	**Residence** (i.e. cabin, hunting shack, etc.)	(16 X 32)	512
		with Loft	(X)	
☒ Residential Use		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(8 X 32)	256
		with (2nd) Deck) WRAP AROUND	(8 X 20)	160
☐ Commercial Use		with Attached Garage	(X)	
	☐	**Bunkhouse** w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	(X)	
	☐	**Mobile Home** (manufactured date) _____	(X)	
	☐	**Addition/Alteration** (specify) _____	(X)	
☐ Municipal Use	☐	**Accessory Building** (specify) _____	(X)	
	☐	**Accessory Building Addition/Alteration** (specify) _____	(X)	
	☐	**Special Use:** (explain) _____	(X)	
	☐	**Conditional Use:** (explain) _____	(X)	
	☐	**Other:** (explain) _____	(X)	

Rec'd for Issuance OCT 25 2013 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): [signature] Date 10/5/13
(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 _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

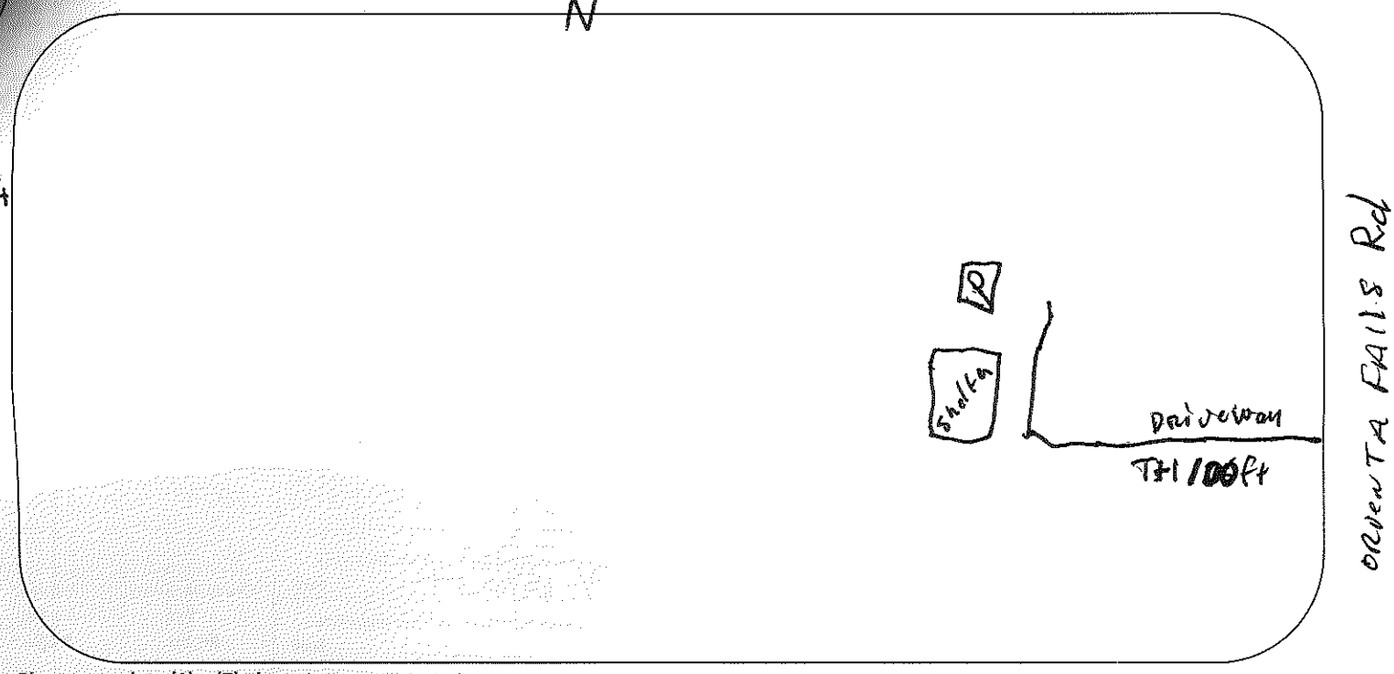
Address to send permit _____

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

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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: N/A 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**	100+	Feet	Setback from the **Lake** (ordinary high-water mark)		Feet
Setback from the **Established Right-of-Way**		Feet	Setback from the **River, Stream, Creek**	1500	Feet
			Setback from the **Bank or Bluff**	1450	Feet
Setback from the **North** Lot Line	200	Feet			
Setback from the **South** Lot Line	100	Feet	Setback from **Wetland**		Feet
Setback from the **West** Lot Line	1250	Feet	Setback from **20% Slope Area**		Feet
Setback from the **East** Lot Line	100	Feet	Elevation of **Floodplain**		Feet
Setback to **Septic Tank** or **Holding Tank**		Feet	Setback to **Well**		Feet
Setback to **Drain Field**	150	Feet			
Setback to **Privy** (Portable, Composting)	150	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: vault. privy non-plumbing approved with this permit. | # of bedrooms: | Sanitary Date:

Permit Denied (Date): | Reason for Denial:

Permit #: 13-0385 | Permit Date: 10-25-13

Is Parcel a Sub-Standard Lot	☐ Yes (Deed of Record) _____	☒ No	Mitigation Required	☐ Yes ☒ No	Affidavit Required	☐ Yes ☒ No
Is Parcel in Common Ownership	☐ Yes (Fused/Contiguous Lot(s))	☒ No	Mitigation Attached	☐ Yes ☒ No	Affidavit Attached	☐ Yes ☒ No
Is Structure Non-Conforming	☐ Yes _____	☒ No				

Granted by Variance (B.O.A.) ☐ Yes ☒ No Case #: N/A | Previously Granted by Variance (B.O.A.) ☐ Yes ☒ No Case #: N/A

Was Parcel Legally Created ☒ Yes ☐ No _____ | Were Property Lines Represented by Owner ☐ Yes _____ ☒ No
Was Proposed Building Site Delineated ☒ Yes ☐ No gravel pad | Was Property Surveyed ☐ Yes _____ ☒ No

Inspection Record: placement of structure appears to be code compliant based on owner's representation | Zoning District (R-2) | Lakes Classification (3)

Date of Inspection: 10-24-13 | Inspected by: J. Croonborg · Murphy | Date of Re-Inspection: N/A

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

DWELLING SHALL NOT BE SERVED BY PRESSURIZED WATER & SHALL NOT CONTAIN INDOOR PLUMBING W/O BEING SERVED BY APPROVED PRIVATE ONSITE WASTEWATER TREATMENT SYSTEM. UDC PERMIT & INSPECTIONS REQUIRED.

Signature of Inspector: | Date of Approval: 10-25-13

Hold For Sanitary: ☐ _____ | Hold For TBA: ☐ _____ | Hold For Affidavit: ☐ _____ | Hold For Fees: ☐ _____ | ☐ _____

©©January 2012