

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

ADD FOR

**ENTERED**  
 Permit #

14-0348

Date Stamp (Received)  
 SEP 17 2014

Bayfield Co. Zoning Dept.

Date: 9-23-14  
 Amount Paid: \$150 9-19-14  
 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.

TYPE OF PERMIT REQUESTED:  LAND USE  SANITARY  PRIVATE  CONDITIONAL USE  SPECIAL USE  B.I.O.A.  OTHER

Owner's Name: **ROBERT J. ERDMANN TRUSTEES OF** Mailing Address: **1470 ALLEN RD** City/State/Zip: **OCO No Mowoc WI 53066** Telephone: \_\_\_\_\_  
 Address of Property: **28705 E. ALTAHONT RD** City/State/Zip: **MASON, WI 54856** Cell Phone: **262-719-5477**  
 Contractor: **OWNER** Contractor Phone: \_\_\_\_\_ Plumber: \_\_\_\_\_ Plumber Phone: \_\_\_\_\_  
 Authorized Agent: (Person Signing Application on behalf of Owner(s)) **OWNER** Agent Phone: \_\_\_\_\_ Agent Mailing Address (include City/State/Zip): \_\_\_\_\_ Written Authorization Attached  Yes  No

PROJECT LOCATION: **Section 27, Township 45 N, Range 05 W** Town of: **LINCOLN**

Legal Description: (Use Tax Statement) **306' of W 1/4 NW 1/4 NE 1/4 + 106' of W 1/2 SW 1/4** PIN: (23 digits) **04-030-2-45-05-27-102-000-0300** Recorded Document: (i.e. Property Ownership) Volume **867** Page(s) **637**

Gov't Lot \_\_\_\_\_ Lot(s) \_\_\_\_\_ CSM \_\_\_\_\_ Vol & Page \_\_\_\_\_ Lot(s) No. \_\_\_\_\_ Block(s) No. \_\_\_\_\_ Subdivision: \_\_\_\_\_

Distance Structure is from Shoreline: **260'** Is Property in Floodplain Zone?  Yes  No  
 Distance Structure is from Shoreline: \_\_\_\_\_ feet  
 Distance Structure is from Shoreline: \_\_\_\_\_ feet

Lot Size **9.09 ACRES + 3,633 sq ft** Acreage **12.12 SEINT**

Shoreland  Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If Yes---continue  **260'**  
 Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue  Distance Structure is from Shoreline: \_\_\_\_\_ feet

Value at Time of Completion <sup>\*Include donated time & material</sup> **\$ 7000.00**

| Project   | # of Stories and/or basement                    | Use  | # of bedrooms                 | What Type of Sewer/Sanitary System Is on the property?                                    | Water                                    |
|---|---|--|-------------------------------|---|--|
| <input type="checkbox"/> New Construction               | <input type="checkbox"/> 1-Story                | <input type="checkbox"/> Seasonal          | <input type="checkbox"/> 1    | <input type="checkbox"/> Municipal/City   | <input type="checkbox"/> City            |
| <input checked="" type="checkbox"/> Addition/Alteration | <input type="checkbox"/> 1-Story + Loft         | <input 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 checked="" type="checkbox"/> GARAGE | <input type="checkbox"/> 3    | <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <b>SEPTIC</b>         | <input type="checkbox"/>                 |
| <input type="checkbox"/> Relocate (existing bldg)       | <input 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 checked="" type="checkbox"/> No Basement | <input type="checkbox"/> None              | <input type="checkbox"/> None | <input type="checkbox"/> Portable (w/service contract)                                    | <input type="checkbox"/>                 |
| <input type="checkbox"/>                                | <input type="checkbox"/> Foundation             | <input type="checkbox"/>                   | <input type="checkbox"/>      | <input type="checkbox"/> Compost Toilet   | <input type="checkbox"/>                 |
| <input type="checkbox"/>                                | <input type="checkbox"/>                        | <input type="checkbox"/>                   | <input type="checkbox"/>      | <input type="checkbox"/> None   | <input type="checkbox"/>                 |

Existing Structure: (if permit being applied for is relevant to it) Length: **40'** Width: **16'** Height: **18'** **ATLc X**  
 Proposed Construction: Length: **38'** Width: **18'** Height: **10'** **ATLc X**

| Proposed Use                        | Proposed Structure   | Dimensions                | Square Footage  |
|-------------------------------------|--|---------------------------|-----------------|
| <input type="checkbox"/>            | Principal Structure (first structure on property)  | ( )                       | ( )             |
| <input type="checkbox"/>            | Residence (i.e. cabin, hunting shack, etc.) with Loft  | ( )                       | ( )             |
| <input checked="" type="checkbox"/> | Residential Use with a Porch with (2 <sup>nd</sup> ) Porch with a Deck with (2 <sup>nd</sup> ) Deck with Attached Garage | ( )                       | ( )             |
| <input type="checkbox"/>            | Commercial Use Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities)               | ( )                       | ( )             |
| <input type="checkbox"/>            | Commercial Use Mobile Home (manufactured date) _____   | ( )                       | ( )             |
| <input type="checkbox"/>            | Commercial Use Addition/Alteration (specify) _____   | ( )                       | ( )             |
| <input type="checkbox"/>            | Commercial Use Accessory Building (specify) _____  | ( )                       | ( )             |
| <input checked="" type="checkbox"/> | Accessory Building Addition/Alteration (specify) <b>GARAGE SHIP/STAKE</b>  | ( <b>34</b> X <b>40</b> ) | <b>1,300 SF</b> |
| <input type="checkbox"/>            | Special Use: (explain) _____   | ( )                       | ( )             |
| <input type="checkbox"/>            | Conditional Use: (explain) _____   | ( )                       | ( )             |
| <input type="checkbox"/>            | Other: (explain) _____   | ( )                       | ( )             |

Rec'd for Issuance **SEP 23 2014**

Secretariat 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): **ROBERT J ERDMANN TRUSTEES** Date: **9-14-14**  
 (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 **1470 ALLEN RD, OCONOMOWOC, WI 53066**  
 (If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Attach  
 Copy of Tax Statement  
 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%

SEE ATTACHED SKETCHES (2)

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 | 70' Feet    | Setback from the Lake (ordinary high-water mark) | — Feet  |
| Setback from the Established Right-of-Way   | Feet        | Setback from the River, Stream, Creek            | 260' Feet   |
| Setback from the North Lot Line             | 45' Feet    | Setback from the Bank or Bluff                   | Feet  |
| Setback from the South Lot Line             | 1243' Feet  | Setback from Wetland                             | Feet  |
| Setback from the West Lot Line              | 200' Feet   | 20% Slope Area on property                       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Setback from the East Lot Line              | 60' Feet    | Elevation of Floodplain                          | Feet  |
| Setback to Septic Tank or Holding Tank      | 195' Feet   | Setback to Well                                  | 55' Feet  |
| Setback to Drain Field                      | 40' Feet    |  |   |
| Setback to Privy (Portable, Composting)     | 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: <u>425053</u>   | # of bedrooms: _____   | Sanitary Date: <u>10-8-03</u>  |
| Permit Denied (Date): _____  | Reason for Denial: _____  | Permit Date: <u>9-23-14</u>  |  |  |
| Is Parcel a Sub-Standard Lot <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record) _____<br>Is Parcel in Common Ownership <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Used/Contiguous Lots) _____<br>Is Structure Non-Conforming <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____   | Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #: _____<br>Was Parcel Legally Created <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____<br>Was Proposed Building Site Delineated <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ | Mitigation Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Mitigation Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #: _____<br>Were Property Lines Represented by Owner <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Was Property Surveyed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Affidavit Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Affidavit Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Inspection Record: <u>Building is larger than previously approved. Noticed on inspection for separate accessory.</u><br>Date of Inspection: <u>8-25-14</u> Inspected by: <u>J. CARROLL JACOBS</u><br>Condition(s) Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached.)<br><u>BUILDING NOT APPROVED FOR HUMAN HABITATION</u> |   | Zoning District: <u>RES-1</u><br>Lakes Classification: <u>3-river</u><br>Date of Re-Inspection: _____  | Signature of Inspector: _____<br>Date of Approval: <u>9-23-14</u>  |  |
| Hold For Sanitary: <input type="checkbox"/> _____<br>Hold For BA: <input type="checkbox"/> _____<br>Hold For Affidavit: <input type="checkbox"/> _____<br>Hold For Fees: <input type="checkbox"/> _____  | Date of Approval: <u>9-23-14</u>  |  |  |  |

E. ALTAMONT ROAD

300'

EXISTING SURVEY MARKER STAKE

EXISTING SURVEY MARKER STAKE

PROPOSED GARAGE

EXISTING GARAGE W/ATF

PERMIT #14-0292

9-14-14

EXISTING SHED

WELL EXISTING  
WOOD SHED EXISTING  
DRAIN FIELD EXISTING

EXISTING SEPTIC TANK

CABIN EXISTING

225'

130'

MARENGO RIVER

1,322' +/-

↑  
N

ROBERT J. ERDMANN  
28705 E. ALTAMONT RD.  
MASON, WI 54856

9.09 ACRES