$75.00

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

ENTERED

Date Stamp (Received) RECEIVED JUL 20 2015 Bayfield Co. Zoning Dept.

Permit #:	15-0285
Date:	7-31-15
Amount Paid:	$75 7-31-15
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 ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER ____

Owner's Name: Arnold Carver	Mailing Address: 35010 Co Rd J	City/State/Zip: Bayfield WI 54814	Telephone: 715-779-3687
Address of Property: 82850 St Hwy 13	City/State/Zip:		Cell Phone: 715-209-5544
Contractor: Steffenson Carpentry	Contractor Phone: 715-209-1[illegible]	Plumber:	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Jim Steffenson	Agent Phone:	Agent Mailing Address (include City/State/Zip): 32460 State Park Road Bayfield, WI 54814	Written Authorization Attached ☐ Yes ☐ No

PROJECT LOCATION	Legal Description: (Use Tax Statement)	PIN: (23 digits) 04-008-2-50-04-34-2 00					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: Thompsons Sec 34
Section 34, Township 50 N, Range 04 W				Town of: Bayview			Lot Size / Acreage 1.93

☒ 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: 100 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	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
$ 1500	☐ New Construction	☒ 1-Story	☒ Seasonal	☐ 1	☐ Municipal/City	☐ City
	☒ Addition/Alteration	☐ 1-Story + Loft	☐ Year Round	☒ 2	☐ (New) Sanitary Specify Type: ____	☒ Well
	☐ Conversion	☐ 2-Story	☐ ____	☐ 3	☒ Sanitary (Exists) Specify Type: Conv	☐ ____
	☐ 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:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	☒	Principal Structure (first structure on property)	(4' X 4')	16'
	☐	Residence (i.e. cabin, hunting shack, etc.)	(X)	
☒ Residential Use		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
		with (2nd) Deck	(X)	
☐ 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) ENTRANCE ROOF	(X)	
☐ Municipal Use	☐	Accessory Building (specify) ____	(X)	
	☐	Accessory Building Addition/Alteration (specify) ____	(X)	
	☐	Special Use: (explain) ____	(X)	
	☐	Conditional Use: (explain) ____	(X)	
	☐	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 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): Arnold R Carver Date 7/20/15
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Jim Steffenson Date 7/20/15
(If you are signing on behalf of the owner(s), a letter of authorization must accompany this application)

Address to send permit 35010 Co Rd J - Bayfield WI 54814

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

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

box 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%**

See Attached –

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**	Feet		Setback from the **Lake** (ordinary high-water mark)	100 Feet
Setback from the **Established Right-of-Way**	332.54 Feet		Setback from the **River, Stream, Creek**	Feet
			Setback from the **Bank or Bluff**	35 Feet
Setback from the **North** Lot Line	43.41 Feet			
Setback from the **South** Lot Line	114.18 Feet		Setback from **Wetland**	Feet
Setback from the **West** Lot Line	275.68 Feet		**20% Slope Area on property**	☒ Yes ☐ No
Setback from the **East** Lot Line	105.78 Feet		Elevation of **Floodplain**	Feet
Setback to **Septic Tank** or **Holding Tank**	Feet		Setback to **Well**	Feet
Setback to **Drain Field**	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 Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

no riser terminating above grade

Issuance Information (County Use Only)	Sanitary Number: 55539	# of bedrooms: 3	Sanitary Date: 1972
Permit Denied (Date):	Reason for Denial:		
Permit #: 15-0285	Permit Date: 7-31-15		

Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	☐ Yes (Deed of Record) ☒ No ☐ Yes (Fused/Contiguous Lot(s)) ☒ No ☐ Yes ☒ No	Mitigation Required Mitigation Attached	☐ Yes ☒ No ☐ Yes ☒ No	Affidavit Required Affidavit Attached	☐ Yes ☒ No ☐ Yes ☒ No
Granted by Variance (B.O.A.) ☒ Yes ☒ No Case #: 130 Jan 3, 1974		Previously Granted by Variance (B.O.A.) ☒ Yes ☐ No Case #: 30 Jan 3 1974 no longer too close to line.			
Was Parcel Legally Created Was Proposed Building Site Delineated	☒ Yes ☐ No ☒ Yes ☐ No	Were Property Lines Represented by Owner Was Property Surveyed	☐ Yes ☒ No ☐ Yes ☒ No		
Inspection Record: AREA OF DRAINFIELD LOOKS TO BE IN POOR CONDITION. NO EVIDENCE OF ADD'NS +250 sq' IN LIFETIME OF HOME.			Zoning District (RRB Lakes Classification (1 - Superior		
Date of Inspection: 7-23-15	Inspected by: JCM		Date of Re-Inspection:		

Condition(s): Town, Committee or Board Conditions Attached? ☐ Yes ☐ No – (If No they need to be attached.)
THERE SHALL BE NO GRADING IN EXCESS OF 200 sq' WITHOUT A SHORELAND GRADING PERMIT.

Signature of Inspector:				Date of Approval:
Hold For Sanitary: ☐	Hold For TBA: ☐	Hold For Affidavit: ☐	Hold For Fees: ☐	☐

® October 2013

© Copyright 2008 ESRI. All rights reserved. Printed on Mon Jul 20 2015 09:34:22 AM.

JUL
Bayfield Co. Zoning