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 MAY 01 2017 Bayfield Co. Zoning Dept.

ENTERED

Permit #:	17-0116
Date:	5-8-17
Amount Paid:	$100 5-8-17
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: John S. & Lisa A. Geissler	Mailing Address: 5141 Country Rd	City/State/Zip: Hermantown MN 55810	Telephone: N/A
Address of Property: 62275 Delta Lake Rd.	City/State/Zip: Iron River, WI 54847		Cell Phone: 218-393-1475
Contractor: Silver Maple Constr. LLC Scott Nielsen	Contractor Phone: 715-292-1112	Plumber: N/A	Plumber Phone: N/A
Authorized Agent: (Person Signing Application on behalf of Owner(s)) N/A	Agent Phone: N/A	Agent Mailing Address (include City/State/Zip): N/A	Written Authorization Attached ☐ Yes ☒ No

PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# (4-5 digits) 12563	Recorded Deed (i.e. # assigned by Register of Deeds) Document #: 2016 R-563191

____1/4, ____1/4	Gov't Lot	Lot(s) 5	CSM 000741	Vol & Page V.5 P.136	Lot(s) No.	Block(s) No.	Subdivision:

Section 07, Township 46 N, Range 07 W	Town of: Delta	Lot Size 150' x 551'	Acreage 1.710

☒ 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: ____ feet	Is Property in Floodplain Zone? N/A ☐ 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: 15' to base of new stairs 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
$ [redacted]	☐ 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: Septic	☐ ____
$ 6000.00	☐ 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	
	☒ Stairs to Lake	☐ ____			☐ None	

Existing Structure: (if permit being applied for is relevant) N/A	Length:	Width:	Height:
Proposed Construction: Stairs to Lake	Length: 40' +/-	Width: 4'	Height: N/A

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	☐	Principal Structure (first structure on property)	(X)	
	☐	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
☒ Residential Use		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) ____	(X)	
☐ Municipal Use	☐	Accessory Building (specify) ____	(X)	
	☐	Accessory Building Addition/Alteration (specify) ____	(X)	
	☐	Special Use: (explain) ____	(X)	
	☐	Conditional Use: (explain) ____	(X)	
	☒	Other: (explain) Stairs to Lake	(4' X 40+/)	200 sf See plan

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): John S. Geissler Lisa A. Geissler Date 4/27/2017
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

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

Address to send permit 5141 Country Rd Hermantown, MN 55810

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

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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 Site plan

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	
Easement							
Setback from the **Centerline of** ~~Platted~~ **Road**	522	N/A	Feet	Setback from the **Lake** (ordinary high-water mark)		15' to	Feet
Setback from the **Established Right-of-Way**		N/A	Feet	Setback from the **River, Stream, Creek**	NA	Base of	Feet
				Setback from the **Bank or Bluff**		Stairs	Feet
Setback from the **North** Lot Line	85	N/A	Feet				
Setback from the **South** Lot Line	60	N/A	Feet	Setback from **Wetland**		N/A	Feet
Setback from the **West** Lot Line	Lake	N/A	Feet	**20% Slope Area on property**		☒ Yes	☐ No
Setback from the **East** Lot Line	560		Feet	Elevation of **Floodplain**		N/A	Feet
Setback to **Septic Tank** or **Holding Tank**	75	N/A	Feet	Setback to **Well**	75'	N/A	Feet
Setback to **Drain Field**	85	N/A	Feet				
Setback to **Privy** (Portable, Composting)	NA	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 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: 298198	# of bedrooms: 2	Sanitary Date: 6/22/98
Permit Denied (Date):	Reason for Denial:		
Permit #: 17-0116	Permit Date: 5-8-17		

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 #: NA	Previously Granted by Variance (B.O.A.) ☐ Yes ☑ No Case #: NA
Was Parcel Legally Created ☑ Yes ☐ No Was Proposed Building Site Delineated ☑ Yes ☐ No	Were Property Lines Represented by Owner ☑ Yes ☐ No Was Property Surveyed ☑ Yes CSM 741 ☐ No

Inspection Record: Stairway location marked with old stairs to be replaced. Location is on a steep slope and stairs are necessary. ok to issue L.U. permit

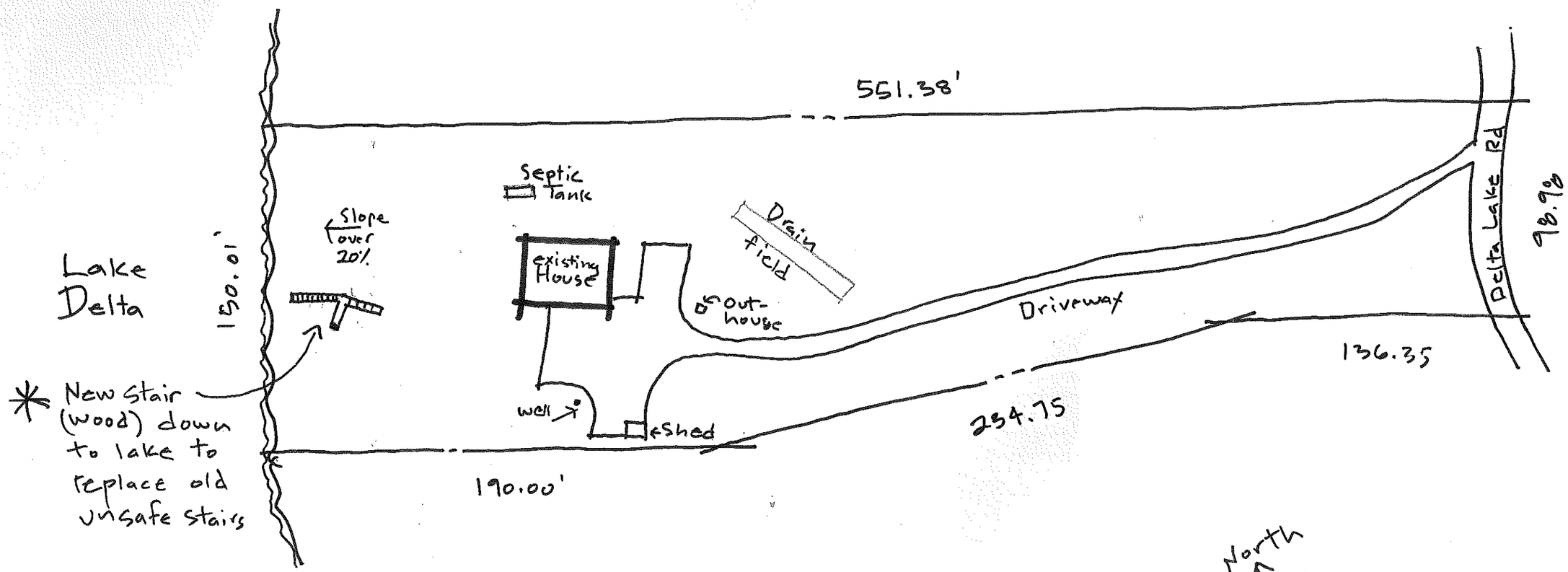
Zoning District (RRB)
Lakes Classification (2)

Date of Inspection: 5/5/2017 | Inspected by: Robert Schierman | Date of Re-Inspection:

Condition(s): Town, Committee or Board Conditions Attached? ☐ Yes ☐ No – (If No they need to be attached.) Must use Best Management Practices and Minimize ground disturbing activity to ensure stability of Bank. Erosion Control practices must be employed to prevent soil movement and sedimentation of the lake.

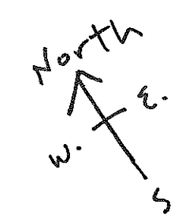
Signature of Inspector: | Date of Approval: 5/5/2017

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



Site Plan

1" = 50' ±



John S. & Lisa A. Geissler
62275 Delta Lake Rd.
Tax I.D. # 12563

...y, Village, State or Federal
...mits May Also Be Required

LAND USE – X
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY
PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. **17-0116** Issued To: **John & Lisa Geissler**

Location: - ¼ of - ¼ Section **7** Township **46** N. Range **7** W. Town of **Delta**

Gov't Lot Lot **5** Block Subdivision CSM# **741**

For: **Residential Accessory Structure: [Stairs to the Lake (4' x 40') = 200 sq. ft.]**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must use best management practices and minimize ground disturbing activity to ensure stability of bank. Erosion control practices must be employed to prevent soil movement and sedimentation of the lake.

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.

Rob Schierman
Authorized Issuing Official

May 8, 2017
Date

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 APR 17 2017 Bayfield Co. Zoning Dept.

ENTERED

Permit #:	17-0129
Date:	5-11-17
Amount Paid:	$165 4-18-17
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: AARON GUSICI	Mailing Address: 2405 CAMPBELL DR	City/State/Zip: ASHLAND WI 54806	Telephone: 715 209 1094
Address of Property: TBD Co Hwy H	City/State/Zip: DELTA WI 54856		Cell Phone: 7152091094
Contractor: AARON GUSICI CONSTRUCTION	Contractor Phone: 715 209 1094	Plumber: GREG BROWN	Plumber Phone: 715 209 0161
Authorized Agent: (Person Signing Application on behalf of Owner(s)) N/A	Agent Phone: 715 209 1094	Agent Mailing Address (include City/State/Zip): 2405 CAMPBELL DR	Written Authorization Attached ☐ Yes ☒ No

PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# (4-5 digits)	Recorded Deed (i.e. # assigned by Register of Deeds)
		34155	Document #: 2016 R-563942

SW 1/4, NW 1/4	Gov't Lot	Lot(s) 19/20	CSM	Vol & Page	Lot(s) No. 19/20	Block(s) No.	Subdivision: DEER TRAIL LODGE (Lot)

Section 7, Township 46 N, Range 7 W	Town of: DELTA	Lot Size	Acreage 7

☐ 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: ____ 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
$ 25,000.00	☒ New Construction	☒ 1-Story	☒ Seasonal	☐ 1	☐ Municipal/City	☐ City
	☐ Addition/Alteration	☐ 1-Story + Loft	☐ Year Round	☒ 2	☒ (New) Sanitary Specify Type: CONVENT.	☒ 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: 60'	Width: 28'	Height: 14'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	☐	Principal Structure (first structure on property)	(X)	
	☒	Residence (i.e. cabin, hunting shack, etc.)	(20 X 28)	560
☒ 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	(40 X 28)	1120
	☐	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)	

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 4-11-17

(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)

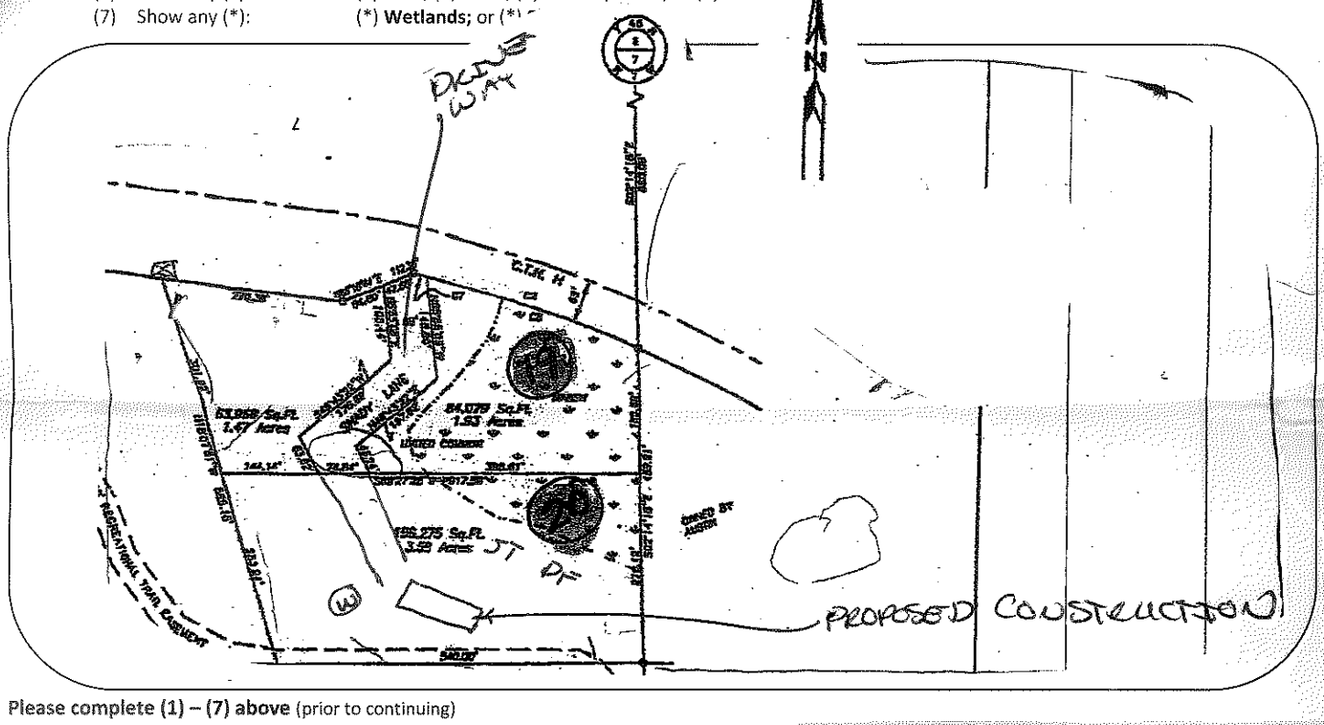
Address to send permit 2405 CAMPBELL DR ASHLAND WI 54806

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: 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 (*)



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**	450' +	Feet	Setback from the **Lake** (ordinary high-water mark)	NA	Feet
Setback from the **Established Right-of-Way**	400' +	Feet	Setback from the **River, Stream, Creek**	NA	Feet
			Setback from the **Bank or Bluff**	NA	Feet
Setback from the **North** Lot Line	300' +	Feet			
Setback from the **South** Lot Line	140' +	Feet	Setback from **Wetland**	NA	Feet
Setback from the **West** Lot Line	30' +	Feet	**20% Slope Area on property**	☐ Yes	☒ No
Setback from the **East** Lot Line	400' +	Feet	Elevation of **Floodplain**		Feet
Setback to **Septic Tank or Holding Tank**	30' +	Feet	Setback to **Well**	20' +	Feet
Setback to **Drain Field**	30' +	Feet			
Setback to **Privy** (Portable, Composting)	NA	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:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		
Permit #: 17-0132	Permit Date: 5-11-17		

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

Was Parcel Legally Created	☒ Yes ☐ No	Were Property Lines Represented by Owner	☐ Yes survey ☒ No
Was Proposed Building Site Delineated	☐ Yes ☐ No	Was Property Surveyed	☒ Yes ☐ No

Inspection Record: Project location Well staked. Location as identified By Applicant appears to be a Code Compliant Location. OK to issue LU. permit

Zoning District (RRB)
Lakes Classification (–)

Date of Inspection: 4/27/2017 Inspected by: Robert Schierman Date of Re-Inspection: –

Condition(s): Town, Committee or Board Conditions Attached? ☐ Yes ☐ No – (If No they need to be attached.)
Must secure Uniform Dwelling Code (UDC) permit from UDC inspector responsible for the Town of Delta.

Signature of Inspector: [signature] Date of Approval: 4/27/17

Hold For Sanitary: ☒ ____ Hold For TBA: ☐ ____ Hold For Affidavit: ☐ ____ Hold For Fees: ☐ ____ ☐ ____

4/27/17 Start Mileage 2639

City, Village, State or Federal
Permits May Also Be Required

LAND USE – X
SANITARY – 17-13S
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY
PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. **17-0132** Issued To: **Aaron Guski**

Location: - ¼ of - ¼ Section **7** Township **46** N. Range **7** W. Town of **Delta**

Gov't Lot Lot **19 & 20** Block Subdivision **Deer Trial Lodge** CSM#

For: **Residential Use: [1- Story; Residence (20' x 28') = 560 sq. ft.; Attached Garage (40' x 28') = 1,120 sq. ft.]**
Total Overall = 1,680 sq. ft.

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

Condition(s): Must secure uniform dwelling code (UDC) permit from UDC inspector responsible for the Town of Delta.

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.

Rob Schierman
Authorized Issuing Official

May 11, 2017
Date