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 26 2017 Bayfield Co. Zoning Dept.

ENTERED

Permit #:	17-0189
Date:	6-2-17
Amount Paid:	$210 4-27-17
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: Scott + Mary Neumann	Mailing Address: 16411 Dysprosium St NW	City/State/Zip: Ramsey MN 55303	Telephone:
Address of Property: 66110 W. Iron Lake Ln	City/State/Zip: Iron River, WI 54847		Cell Phone: Mary 612-532-6357 612-703-4328 Scott
Contractor: Mike Woodford	Contractor Phone: 715-829-3980	Plumber:	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone:	Agent Mailing Address (include City/State/Zip):	Written Authorization Attached ☐ Yes ☐ No

PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# (4-5 digits) 36495	Recorded Deed (i.e. # assigned by Register of Deeds) Document #: 2012 R- 544679

____ 1/4, ____ 1/4	Gov't Lot 1	Lot(s) 1	CSM 1808	Vol & Page 104 332-3	Lot(s) No.	Block(s) No.	Subdivision:

Section 24, Township 47N N, Range 09 W	Town of: Hughes (022)	Lot Size Irregular see survey map	Acreage 3.26

☒ 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: 93' 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
$ 70,000	☐ 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 tank	☐ ____
	☐ 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: 36'	Width: 32'	Height: 26'
Proposed Construction:	Length: 32'	Width: 14'	Height: 22.75'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	☐	Principal Structure (first structure on property)	(X)	
	☐	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)	
☐ ~~Commercial Use~~		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
	☐	Bunkhouse w/ (☐ sanitary, or ☐ sleeping ~~quarters, or ☐ cooking~~ & food prep facilities)	(X)	
	☐	Mobile Home (manufactured date) ____	(X)	
☐ Municipal Use	☒	Addition/Alteration (specify) 3 bedrooms + entryway	(32 10 X 14 14)	1,176
	☐	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 JUN 02 2017 Secretarial Staff

Rec'd for Issuance Secretarial Staff

Accepted not w/ existing structures 10-yr. ~~signature~~ see attached plan for correction zc-m

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): Scott Neumann Mary Neumann Date 4-24-2017
(If there are Multiple Owners listed on the Deed **All** Owners must sign or letter(s) of authorization must accompany this application)

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

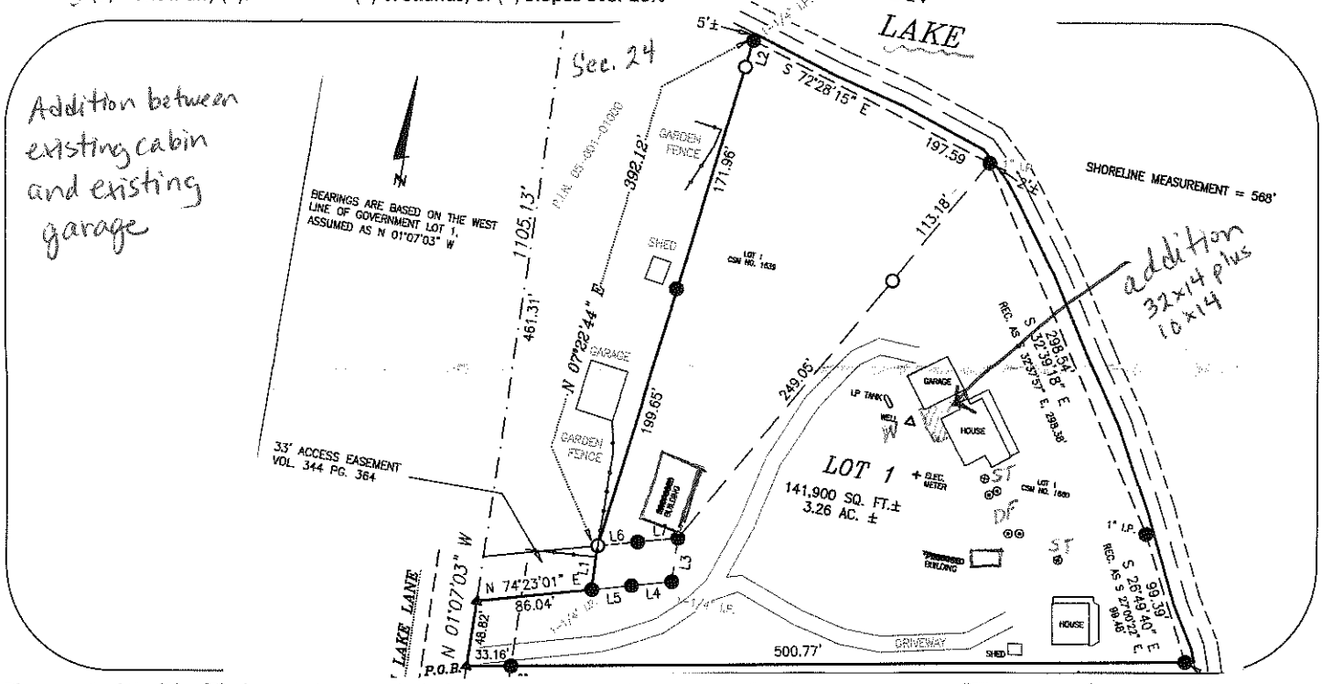
Address to send permit ____

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

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

below: **Draw or Sketch your Property** (regardless of what you are applying for)

- ✓ (1) **Show Location of:** **Proposed Construction** in blue crosshatch
- ✓ (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%**



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)	93 Feet
Setback from the **Established Right-of-Way**	Feet		Setback from the **River, Stream, Creek**	Feet
			Setback from the **Bank or Bluff**	Feet
Setback from the **North** Lot Line	Feet			
Setback from the **South** Lot Line	Feet		Setback from **Wetland**	Feet
Setback from the **West** Lot Line	Feet		**20% Slope Area on property**	☐ Yes ☒ No
Setback from the **East** Lot Line	Feet		Elevation of **Floodplain**	Feet
Setback to **Septic Tank** or **Holding Tank**	Feet		Setback to **Well**	13 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.

12-0422 res addn 12-118S

Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). 2nd residence 08-0431

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: 12-118S	# of bedrooms: 10-3-12	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		
Permit #: 17-0189	Permit Date: 6-2-17		

already effective since 2012 undersized system

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 #: CUP for 2nd residence

Previously Granted by Variance (B.O.A.) ☐ Yes ☒ No Case #: CUP + Mitigation AFFIDAVITS on FILE

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

Inspection Record: deck @ 75' from ottwm exactly. House 83' from ottwm. impervious surface calcs submitted in 2012. Nowhere near 15%

Zoning District (R-1) Lakes Classification (N/A) No lake class

Date of Inspection: 5-9-17 Inspected by: JC Murphy Date of Re-Inspection:

Condition(s): Town, Committee or Board Conditions Attached? ☐ Yes ☐ No – (If No they need to be attached.)
ONLY 3 bedrooms allowed in the structure. IF MORE THAN 3 ROOMS ARE USED FOR SLEEPING PURPOSES, CITATION WILL BE ISSUED + NEW POINTS INSTALLED WITH ATF FEES & PENALTIES

Signature of Inspector: Date of Approval: 6-2-17

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

EXISTING MITIGATION STILL BE COMPLIED WITH.

2 sanitary systems on the property. Both 2 BR.

® October 2016

...n, City, Village, State or Federal
...mits May Also Be Required

LAND USE – **X**
SANITARY – **12-118S** (Flows & Loads)
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY
PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. **17-0189** Issued To: **Scott & Mary Neumann**

Location: - ¼ of - ¼ Section **24** Township **47** N. Range **9** W. Town of **Hughes**

Gov't Lot Lot **1** Block Subdivision CSM# **1808**

For: **Residential Use: [1- Story; Bedroom Addition (32' x 14') = 448 sq. ft.; Entry (10' x 14') = 140 sq. ft.]**
Total Overall = 1,176 sq. ft.

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

Condition(s): Only three (3) bedrooms allowed in the structure. If more than 3 rooms are used for sleeping purposes citation will be issued and new POWTS installed with penalty fees. Existing mitigation shall be complied with.

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.

Jennifer Murphy
Authorized Issuing Official

June 2, 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

ENTERED

Date Stamp (Received)
RECEIVED
MAY 26 2017
Bayfield Co. Zoning Dept.

Permit #:	17-0608
Date:	6-8-17
Amount Paid:	100- 5-26-17
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:	Mailing Address:	City/State/Zip:	Telephone:
Jon Pieper	5460 Windall Rd	Iron River WIS 54847	
Address of Property:	**City/State/Zip:**		**Cell Phone:**
5460 Windall Rd.	Iron River WIS 54847		320-766-0063
Contractor:	**Contractor Phone:**	**Plumber:**	**Plumber Phone:**
N/A			
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)	Tax ID# (4-5 digits)	Recorded Deed (i.e. # assigned by Register of Deeds) Document #: _____ R-_____
		1875	

_____1/4, _____1/4	Gov't Lot	Lot(s)	CSM	Vol & Page	Lot(s) No.	Block(s) No.	Subdivision:
	2			635			

Section 26, Township T47 N, Range R09 W	Town of:	Lot Size 1.280 ~~1.280~~	Acreage
	Hughes		1.514

☐ 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 : 4 RE 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
$ 300	☒ 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: _____	☐ _____
	☐ 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	
	☐ _____	☐ N/A			☐ None	

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length: 24	Width: 2	Height: railing = 3'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
☒ Residential Use	☐	**Principal Structure** (first structure on property)	(X)	
	☐	**Residence** (i.e. cabin, hunting shack, etc.)	(X)	
		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)	
☐ Municipal Use	☒	**Addition/Alteration** (specify) Add Stairs To lake	(X)	
	☐	**Accessory Building** (specify) _____	(2' X 24')	
	☐	**Accessory Building Addition/Alteration** (specify) _____	(X)	
	☐	**Special Use:** (explain) _____	(X)	
	☐	**Conditional Use:** (explain) _____	(X)	
	☐	**Other:** (explain) _____	(X)	

Rec'd for Issuance
JUN 08 2017
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): _____ **Date** 5/26/2017
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ **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

In the 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**	~~400~~ 200 Feet		Setback from the **Lake** (ordinary high-water mark)	4 Feet
Setback from the **Established Right-of-Way**	Feet		Setback from the **River, Stream, Creek**	Feet
			Setback from the **Bank or Bluff**	Feet
Setback from the **North** Lot Line	4 Feet			
Setback from the **South** Lot Line	400 Feet		Setback from **Wetland**	Feet
Setback from the **West** Lot Line	185 Feet		**20% Slope Area on property**	☐ Yes ☐ No
Setback from the **East** Lot Line	45 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.

Issuance Information (County Use Only)	Sanitary Number: 10-1195	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		
Permit #: 17-0208	Permit Date: 6-8-17		

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

Inspection Record:		Zoning District (R-1) Lakes Classification (~~AA~~ AA-2)
Date of Inspection: 6-7-17	Inspected by: JC Murphy	Date of Re-Inspection:

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

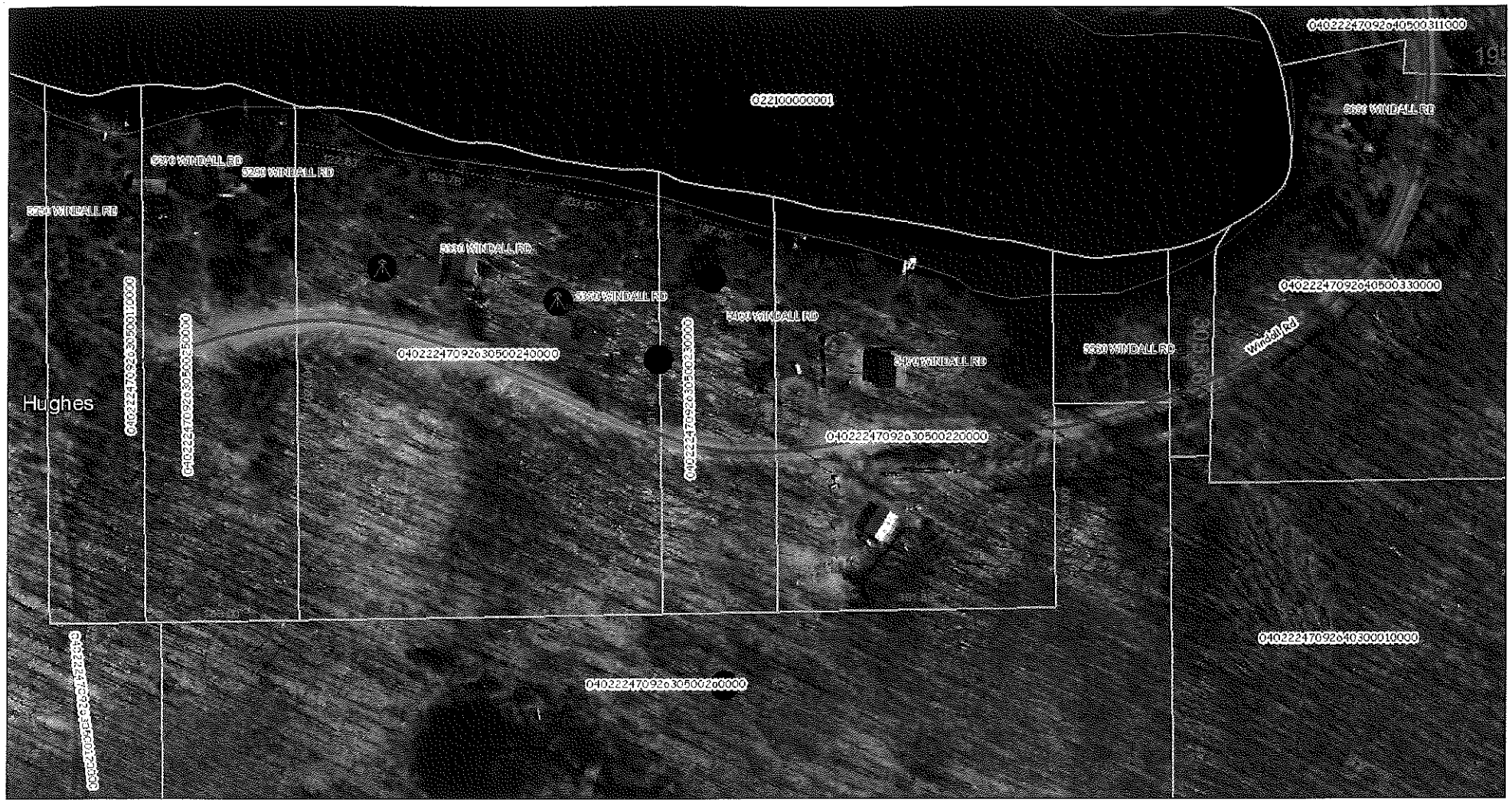
STRUCTURE SHALL BE BUILT USING BEST MANAGEMENT PRACTICES to control EROSION &/OR SEDIMENTATION. STAIRWAY MUST BE PLACED INSIDE VIEWING CORRIDOR AND SHALL BE INCONSPICUOUS FROM THE LAKE.

no lake class

Signature of Inspector:			Date of Approval: 6-7-17
Hold For Sanitary: ☐ _____	Hold For TBA: ☐ _____	Hold For Affidavit: ☐ _____	Hold For Fees: ☐ _____ ☐ _____

© October 2016

Bayfield County Web AppBuilder



May 26, 2017

1:1,486

- Building

Corner Tie Sheets

- Section Corner Monument on File
- Section Corner Monument Referenced on Survey

Survey Maps

- UnRecorded Map
- Recorded Map

Road Type

- CFR
- County
- Federal
- Private
- State
- Town
- Municipal Boundary
- Section Lines
- Approximate Parcel Boundary
- Meander Line
- Tie Line
- Rivers
- Douglas Co Parcels
- Ashland Co Parcel

0 0.0175 0.035 0.07 mi

0 0.0275 0.055 0.11 km

Bayfield County
Bayfield

Web AppBuilder for ArcGIS
Bayfield | Bayfield County |

Town, City, Village, State or Federal Permits 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. **17-0208** Issued To: **Jon & Debra Pieper**

Location: - ¼ of - ¼ Section **26** Township **47** N. Range **9** W. Town of **Hughes**

Par in
Gov't Lot **1** Lot Block Subdivision CSM#

For: **Residential Other: [Stairs to the Lake (2' x 24') = 48 sq. ft.]**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure shall be built using best management practices to control erosion and/or sedimentation. Stairway must be placed inside viewing corridor and shall be inconspicuous from 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.

Jennifer Murphy
Authorized Issuing Official

June 8, 2017
Date