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

RECEIVED
Date Stamp (Received)
MAR 12 2018
Bayfield Co. Zoning Dept.

ENTERED

Permit #:	18-0065
Date:	3-27-18
Amount Paid:	$250 3-12-18
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:
JOHN D. MOTIL	959 SPYGLASS HILL	WATERFORD, WI. 53185	262 534-5014
Address of Property:	**City/State/Zip:**		Cell Phone:
63485 CO. HY E	MASON, WI. 54686		414 403-1394
Contractor:	Contractor Phone:	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#	Recorded Document: (i.e. Property Ownership)
		12418	469 233

NE 1/4, SE 1/4	Gov't Lot	Lot(s)	CSM	Vol & Page	Lot(s) No.	Block(s) No.	Subdivision:

Section 1, Township 46 N, Range 7 W	Town of: DELTA	Lot Size	Acreage

☐ 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	Foundation	# of bedrooms in structure	What Type of Sewer/Sanitary System Is on the property?	Type of Water on property
$ 70,000	☒ New Construction	☒ 1-Story	☐ Basement	☐ 1	☐ Municipal/City	☐ City
	☐ Addition/Alteration	☐ 1-Story + Loft	☒ Foundation	☐ 2	☐ (New) Sanitary Specify Type: TANK	☒ Well
	☐ Conversion	☐ 2-Story	☒ Footings	☒ 3	☒ Sanitary (Exists) Specify Type: ____	☐ ____
	☐ Relocate (existing bldg)	☐ ____		☐ ____	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	
	☐ Run a Business on Property		Use	☐ None	☐ Portable (w/service contract)	
			☐ Year Round		☐ 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
☒ Residential Use	☒	Principal Structure (first structure on property)	(16 x 80)	1,280
	☐	Residence (i.e. cabin, hunting shack, etc.)	(x)	
		with Loft	(x)	
	X	with a Porch	(6 x 10)	60
		with (2nd) Porch	(x)	
	X	with a Deck	(10 x 10)	100
		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) 2017	(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
MAR 27 2018
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): J. Motil Date 3-2-18
(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 959 SPYGLASS HILL WATERFORD, WI 53185

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

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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%**

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**	220	Feet	Setback from the **Lake** (ordinary high-water mark)	—	Feet
Setback from the **Established Right-of-Way**	200	Feet	Setback from the **River, Stream, Creek**	—	Feet
			Setback from the **Bank or Bluff**	—	Feet
Setback from the **North** Lot Line	200	Feet			
Setback from the **South** Lot Line	1000	Feet	Setback from **Wetland**	—	Feet
Setback from the **West** Lot Line	1000	Feet	**20% Slope Area on the property**	☐ Yes	☒ No
Setback from the **East** Lot Line	200	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: 367284	# of bedrooms: 3	Sanitary Date: 7/7/00
Permit Denied (Date):	Reason for Denial:		
Permit #: 18-0065	Permit Date: 3-27-18		

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 _____ ☒ No

Inspection Record:		Zoning District (A-1) Lakes Classification (-)
Date of Inspection: 3/14/18	Inspected by: A Paler	Date of Re-Inspection:

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

Condition: May not be used for human habitation unless all applicable zoning/sanitary & UDC codes are fully met.

Signature of Inspector: A Paler	Date of Approval: 3/26/18

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

®®August 2017

Bayfield County Web AppBuilder

March 2, 2018

- Buildings
- Building Outline
- Building Footprint
- All Roads
- County
- Town
- Municipal Boundary
- Section Lines
- Override 1
- Meander Lines

1:783

0 0.01 0.01 0.03 mi

0 0.01 0.03 0.06 km

Bayfield County

Web AppBuilder for ArcGIS
Bayfield County |

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

LAND USE – **X**
SANITARY – **367284 (Reconnect)**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. **18-0065** Issued To: **John Motil**

Location: **NE** ¼ of **SE** ¼ Section **1** Township **46** N. Range **7** W. Town of **Delta**

Gov't Lot Lot Block Subdivision CSM#

For: **Residential Use: [1- Story; Mobile Home (16' x 80') = 1,280 sq. ft.; Porch (6' x 10') = 60 sq. ft.; Deck (10' x 10') = 100 sq. ft.] Total Overall = 1,440 sq. ft.**

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

Condition(s): May not be used for human habitation unless all applicable zoning, sanitary, and UDC codes are fully met. Protect tank from vehicle traffic.

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.

Tracy Pooler

Authorized Issuing Official

March 27, 2018

Date