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

LAND USE - X
SANITARY - 20-101S
SIGN -
SPECIAL - NA
CONDITIONAL -
BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

No: 09212203-2022 | Tax ID: 35545 | Issued To: B BROWNIE ROCK LLC

Location: ALL OF GOVT LOT 1 LYING EAST OF PUBLIC RD INCLUDING ADJ ABANDONED RR ROW LESS N 230' & LESS S 150' & LESS LOT 1 CSM #1538 IN V.9 P.157 IN DOC 2018R-575904 | Section 21 | Township 49 N. | Range 04 W. | BAYVIEW

Govt Lot 0 | Lot | Block | Subdivision: | CSM# 1538

For: Commercial / Principal Structure / 70L x 30W x 34H, Porch: 24L x 10W x8H, Deck 1: 24L x 10W x1H, Deck 2: 14L x 12W x1H

Condition(s): To meet all setbacks, including eaves and overhangs. Town/State/DNR permits may be required. Must obtain a Uniform Dwelling Code (UDC) permit from locally contracted UDC inspection agency prior to start of construction. CUP issued 16-0410. Dimensions to reflect the blueprints that were provided. Impervious surface calculations indicated 11.4% impervious surface. No storm water management plan required.

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.

Erica Meulemans

Authorized Issuing Official

Mon Oct 17 2022

Date

(Disclaimer): Any future expansions or development requires additional permitting

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

(Disclaimer): Any future expansions or development requires additional permitting

Signed off
10-17-22

	Current Parcel Information	Applicant Parcel Information
Tax ID #	35545	35545
Taxpayer Name	BROWNIE ROCK LLC	B BROWNIE ROCK LLC
Site Address	No Parcel Address Available	78800 BODIN RD
Site City State Zip	No Parcel Address Available	WASHBURN, WI, WI
Section/Township/Range	21/49/04	21/49/4
Abbreviated Legal	ALL OF GOVT LOT 1 LYING EAST	ALL OF GOVT LOT 1 LYING EAST OF PUBLIC RD INCLUDING ADJ ABANDONED RR ROW LESS N 230' & LESS S 150' & LESS LOT 1 CSM #1538 IN V.9 P.157 IN DOC 2018R-575904
Deeded Acres	9.38	9
Taxpayer Address	PO BOX 687 ⚠	78910 Bodin Road
Taxpayer City, State Zip	BAYFIELD, WI 54814 ⚠	Washburn, WI 54891

Rebuild Blue Cabin

70 x 30 - main
24 x 10 porch
24 x 10 Deck
14 x 12 Deck

~~LLC info~~
~~Fees~~
~~Blue Prints~~
~~reconnect~~

B BROWNIE ROCK LLC
78910 Bodin Road ⚠
Washburn, WI 54891 ⚠
715-209-7821
bodinsresort@gmail.com

Scott Bodin
Scott Bodin Construction
715-292-4691

emailed 10-4-22
10-11-22
Con. Use - permitted updates for 4 cabins
16-0410
20-1015

No

Select the proposed type of use for this project

Commercial

Select a description for this project

Principal Structure (Explanation required)

Describe the type of structure you are building or altering (e.g. restaurant, bulk storage tank, tower antenna, office, etc.)

367 characters remaining

Rebuild of the Blue Cabin at Bodin's Resort as part of our ongoing renovation of this

11 Porch(es)

2 Deck(s)

0 Attached Garage(s)

Component Details

Structure	Length (ft)	Width (ft)	Square Footage	Height (ft)	Explanation/Comments
Main Structure	70	30	2100	34	Rebuild of the Blue Cabin at Bodin's Resort as part of our ongoing renovation of this historic resort
Porch	24	10	240	8	Screened/vinyl siding porch looking east towards the lake in front of main structure.
Deck 1	24	10	240	1	Concrete patio facing north off the smaller of the two units.
Deck 2	14	12	168	1	Outdoor concrete patio facing south and east off the main Porch.

Value of Project

400000

Project

New Construction

Number of Stories

2-Stories

What will Structure be plac

Slab

Duration of Use

Year-Round

Number of Bedrooms

4

Is there Sanitary and/or a Sewer System existing on the Property?

Yes

Water Source

Well

Sanitary Type

Holding Tank

Proposed Use

General Information

Will this be the first structure on the property?

- ○ Yes
- ◉ No

Select the proposed type of use for this project

List the number of additiona structure:

1 Porch(es)

2 Deck(s)

0 Attached Garage(s)

Setback	Submitted	Final	Status
North Lot Line	295.28 ft		Not Inspected
South Lot Line	273.07 ft		Not Inspected
East Lot Line	229.16 ft		Not Inspected
West Lot Line	292.59 ft		Not Inspected
Centerline of Platted Road	305.2 ft		Not Inspected
River Stream Creek or Lake	224.53 ft		Not Inspected
Wetland	25 ft +		Not Inspected
Sanitary	0 ft		Not Inspected
Well	0 ft		Not Inspected
Established Right-of-Way	0 ft		Not Inspected
Bank or Bluff	181.58 ft		Not Inspected

Edit

Bayfield County, WI

10/4/2022, 3:05:39 PM

1:2,366

0 0.03 0.06 0.11 mi

0 0.04 0.09 0.18 km

Top of Bluff

10' Contour Lines (not from LiDAR)

Rivers

Lakes

Approximate Parcel Boundary

Road Type

Town

Lake Superior Shoreline Recession Segments

The average annual rate of bluff recession in this reach of shoreline is approximately 0.1 feet.

Flood Plain Boundaries Active Dec 16th, 2011

AE = Base floodplain where base flood elevations are provided.

Lake Superior Proposed Setback Line

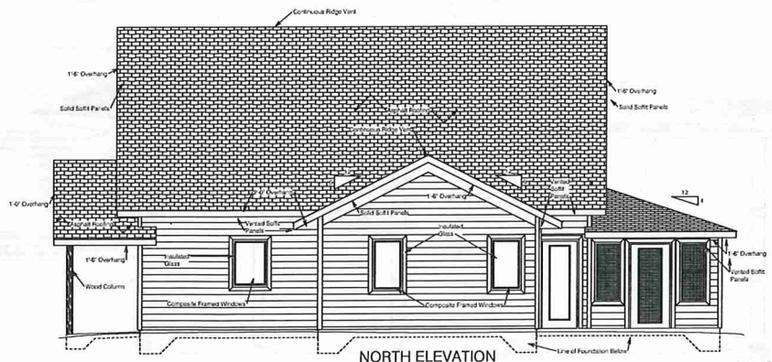
Building Footprint 2015

Building

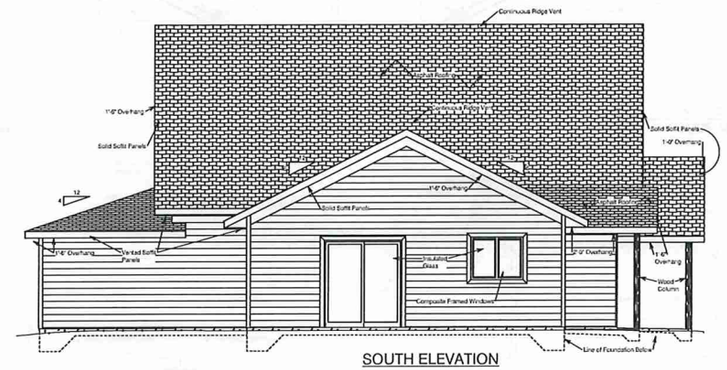
Bayfield County Land Records Department

Bayfield County Zoning Application
https://maps.bayfieldcounty.wi.gov/ZoningWAB/

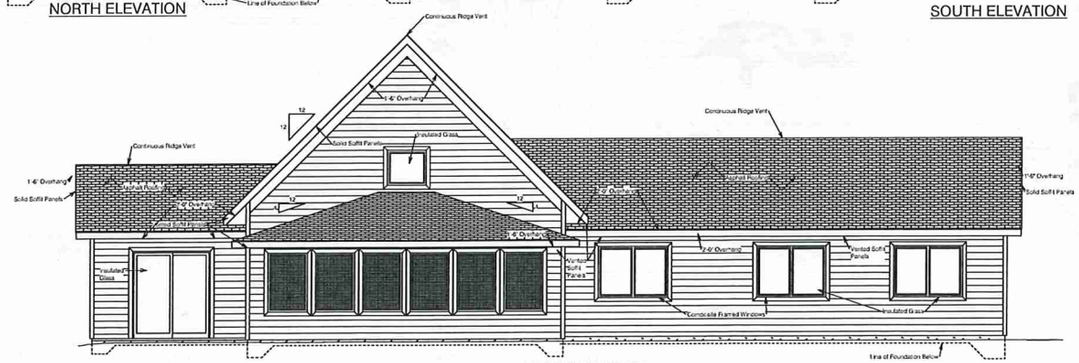
WEST ELEVATION



NORTH ELEVATION



SOUTH ELEVATION



EAST ELEVATION

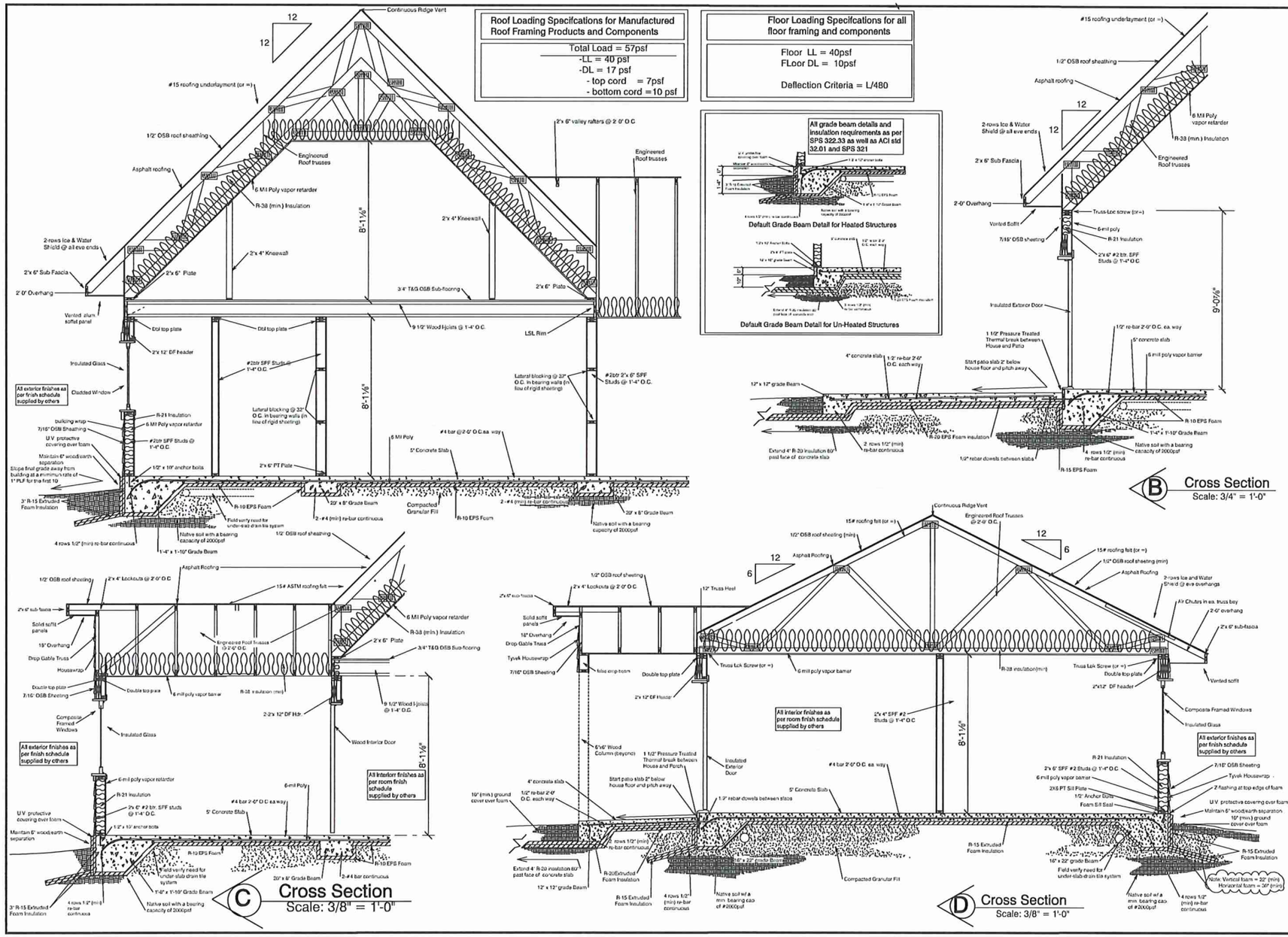
Extreme Measures
Residential Construction Planning
21470 State Hwy 137
Ashland, WI 54806
Office 715-682-5019
Mobile 715-209-3977
WWW.ExtremeMeasuresPlans.com

DESIGNED: Submitted
DRAWN: WRE
APPROVED: WRE

Bodin's Resort
78800 Bodin Rd
Washburn, WI 54891

REVISED:
SCALE: 1/4" = 1'-0"
DRAWING No. 22-08-958
DATE: 08-02-2022

Elevations



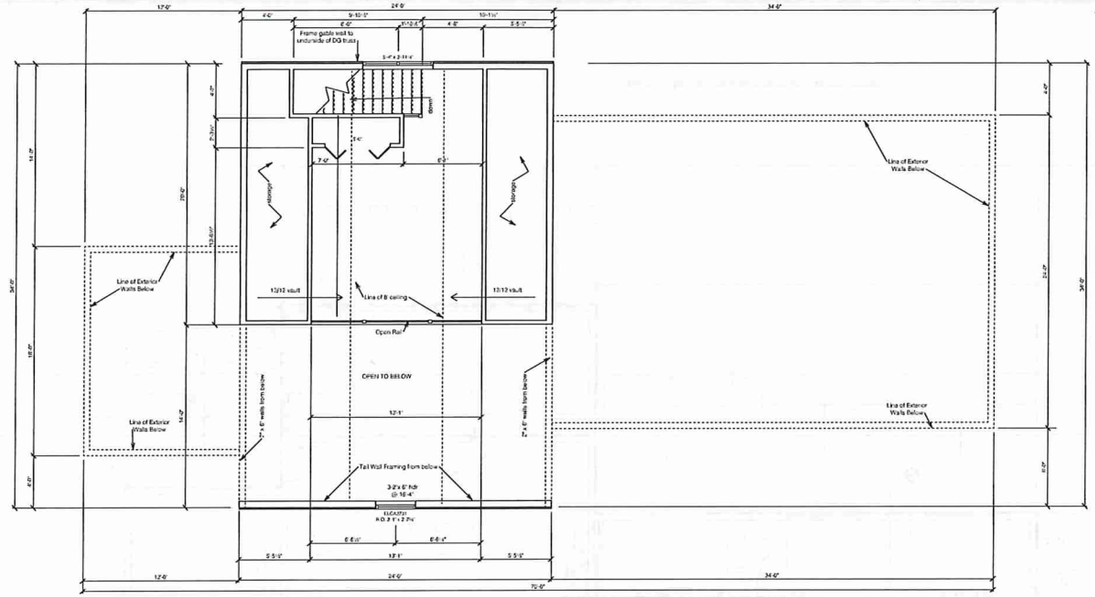
Extreme Measures
Prelim. Plan. Dev.
Residential Construction Planning
21470 State Hwy 117
Ashland, WI 54806
Office 715-682-5019
Mobile 715-209-3977
WWW.ExtremeMeasuresPlans.com

DESIGNED: Submitted
DRAWN: WRE
APPROVED: WRE

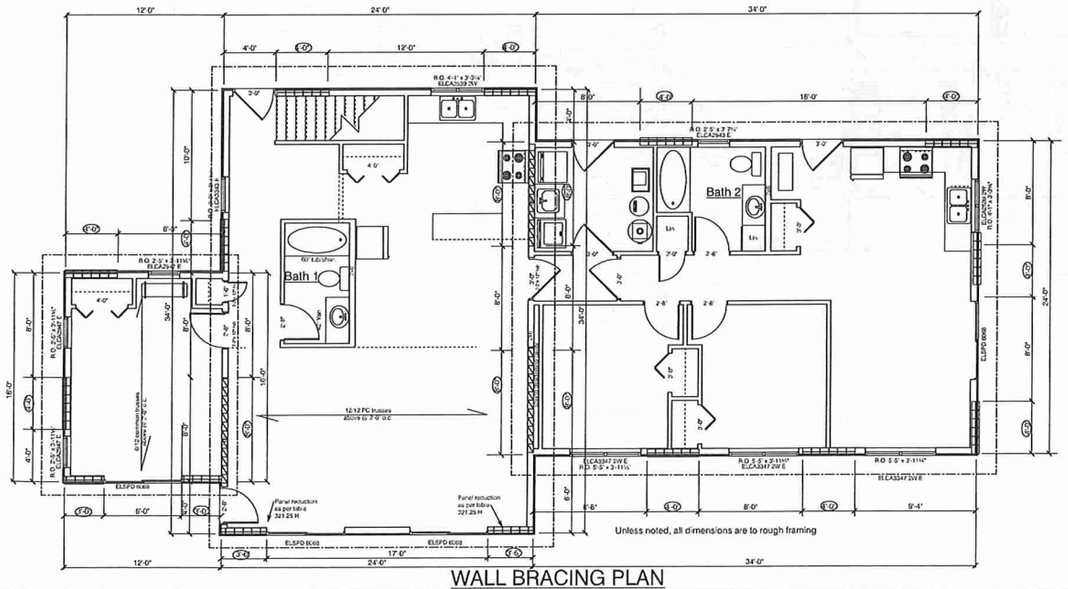
Bodin's Resort
78800 Bodin Rd
Washburn, WI 54891

REVISED:
SCALE: 1/4" = 1'-0"
DRAWING No. 22-08-958
DATE: 08-02-2022

Cross Section



SECOND FLOOR PLAN



WALL BRACING PLAN

KEY

Continuously sheathed Wall

Wood Structural Panel

(or as per table 321.25-H)

Sheathed

(one side)

Continuously sheathed with wood structural panel, 7/16" minimum sheathing (24" stud spacing) or 3/8" wood structural panel (16" stud spacing), on one side of studs. Block all edges of braced wall panel and nail with 8d nails at 6" O.C. at all edges and 12" O.C. at intermediate supports.

Gypsum board with a minimum 1/2" thickness placed on studs a maximum of 16" O.C. and fastened at panel edges, including top and bottom plates, at 7" o.c. with 5d cooler nails or #8 screws as Per Table 321.25-G

Length of Braced Wall Panels Check

Braced wall Line (1)	Lines in Line length in which area (2)	Braced wall Line Length	Story	Wall Panel Method Used Table 321.25-G (3)	Braced Panel within 12'-6"?	Req'd o.c. panel spacing 37' (max) Check Box if OK Fig 321.25-C	Panel Length Check	Panel Length Check	If you don't have req'd panels see table 321.25	Panel Length Check	If you not sure if you meet the requirements check that you meet Fig 321.25-A	Length of Braced Wall Panels Check: Length of Perpendicular Side (ft)	Length of Braces g req'd (ft) As Per Table 321.25-H (1)(2)	Mult. for other than 10' walls As Per Table 321.25-H (1)(2)(3)	Mult. for GB wall to above bcp plate		Required Length of Braced Wall Panels (ft)		Actual Length of Braced Wall Panels (ft)	Check Box if OK (4)
A		1	1	CS	Y							16	3.8	x 0.9	x 0	=	2.52	≤		OK
A		2	1	CS	Y							16	3.8	x 0.9	x 0	=	2.52	≤		OK
A		3	1	CS	Y							12	2.4	x 0.9	x 0	=	2.16	≤		OK
A		4	1	GB	Y							12	2.4	x 0.9	x 0	=	2.16	≤		OK
B		1	1	CS	Y							24	3.66	x 0.95	x 0	=	5.4	≤		OK
B		2	1	CS	Y							34	3.66	x 0.95	x 0	=	5.4	≤		OK
B		3	1	CS/GB	Y							24	4.2	x 0.95	x 0	=	4	≤		OK
B		4	1	GB	Y							24	4.2	x 0.95	x 0	=	4	≤		OK
C		1	1	CS	Y							24	4.2	x 0.9	x 0	=	3.8	≤		OK
C		2	1	CS	Y							24	4.2	x 0.9	x 0	=	3.8	≤		OK
C		3	1	GB	Y							34	3.66	x 0.9	x 0	=	5.1	≤		OK
C		4	1	CS	Y							34	3.66	x 0.9	x 0	=	5.1	≤		OK

(1) Bracing Box
(2) For a gable end wall, where a braced wall panel exceeds 12' in height, the height to width ratio shall not exceed 2:3.1 and comply with Fig 321.25-C
(3) BLM = Intermittent Bracing Method, CBM = Continuous Bracing Method
(4) Braced wall lines must be braced less than 37 apart. Use interior wall lines to reduce spacing
No increase in required length of panels is required for spacing less than or equal to Minimum length for any size of a rectangle will be 32' 0" (37 for intermittent bracing)
(5) For walls other than 10' walls use the following multipliers: 0.9 for 9 feet, 0.95 for 9 feet, 1.15 for 11 feet, 1.3 for 12 feet
(6) For braced wall panels for Gable ends more than 12' from top of wall to ridge height use the following multipliers.
Roof only, 0.7 for 5 feet, 1.3 for 15 feet, or 1.6 for 23 feet
Roof + 1 floor, 0.85 for 5 feet, 1.15 for 15 feet, 1.3 for 23 feet
Roof + 2 floors, 0.9 for 5 feet, or 1.1 for 15 feet

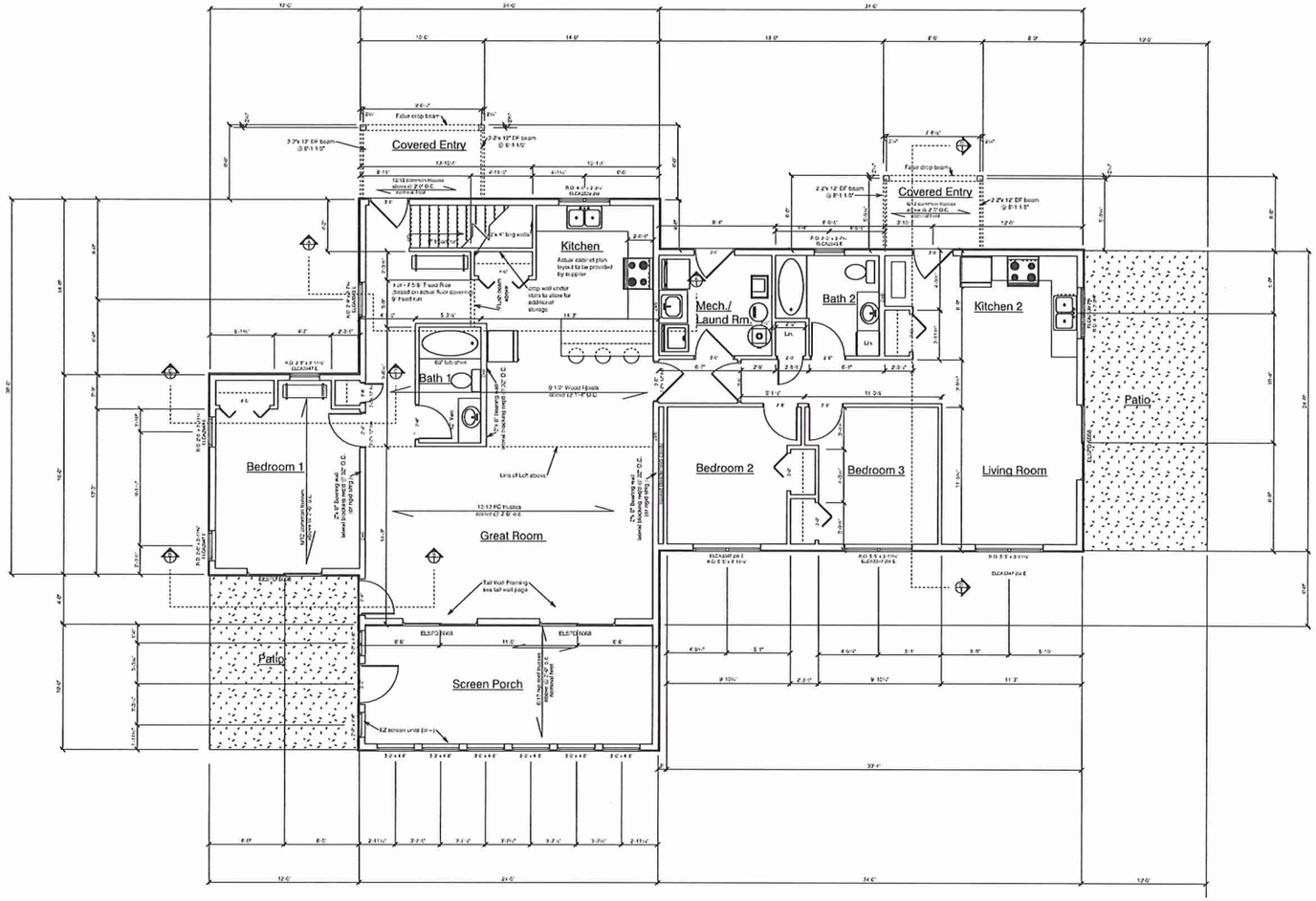
Dream. Plan. Done.
Extreme Measures
Residential Construction Planning
71420 State Hwy 137
Ashland, WI 54806
Office 715-682-5019
Mobile 715-209-3977
WWW.ExtremeMeasuresPlans.com

DESIGNED: Submitted
DRAWN: WRE
APPROVED: WRE

Bodin's Resort
78800 Bodin Rd
Washburn, WI 54891

REVISED:
SCALE: 1/4" = 1'-0"
DRAWING No. 22-08-958
DATE: 08-02-2022

Second Floor & Braced Wall Plan



Unless noted, all dimensions are to rough framing

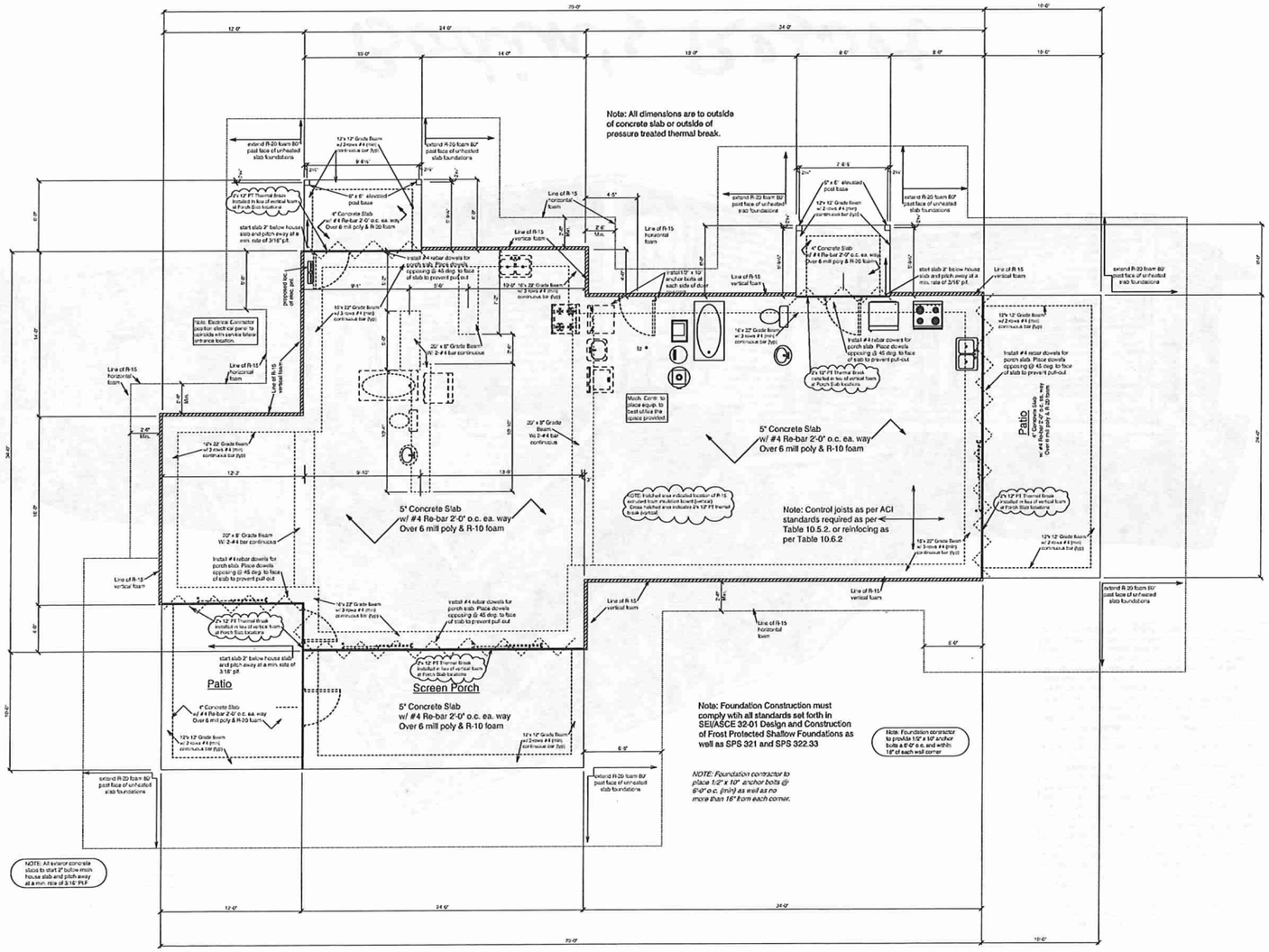
Extreme Measures
Residential Construction Planning
Office 715-682-5019
Mobile 715-209-3977
WWW.ExtremeMeasuresPlans.com

DESIGNED: Submitted
DRAWN: WRE
APPROVED: WRE

Bodin's Resort
78800 Bodin Rd
Washburn, WI 54891

REVISED:
SCALE: 1/4" = 1'-0"
DRAWING No. 22-08-958
DATE: 08-02-2022

Main Floor



Extreme Measures
Residential Construction Planning
Office 715-682-5019
Mobile 715-209-3977
WWW.ExtremeMeasuresPlans.com

DESIGNED: Submitted
DRAWN: WRE
APPROVED: WRE

Bodin's Resort
78800 Bodin Rd
Washburn, WI 54891

REVISED:
SCALE: 1/4" = 1'-0"
DRAWING No. 22-08-958
DATE: 08-02-2022

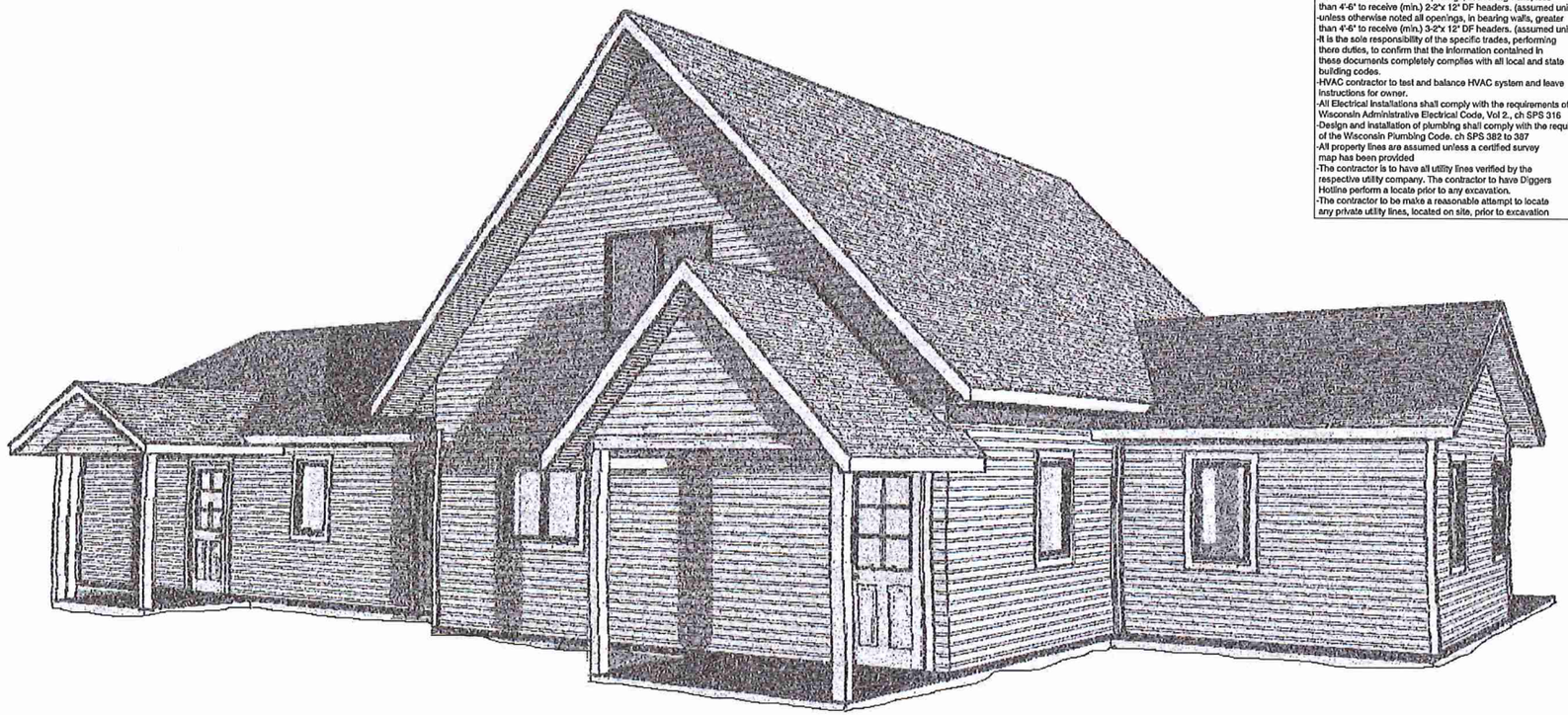
Foundation

This building plan is intended to meet the intent of the Wisconsin Building Code. It is the responsibility of all trades involved to completely verify code compliance. The users of this plan releases the designer from any claims or lawsuits that may arise during the construction or anytime thereafter. Every effort has been made in preparing these plans and checking them for accuracy. The drawings are provided "as is" without warranty of any kind. The drawings may contain omissions or other inaccuracies. The designer assumes no responsibility or liability of these omissions and any incidental, indirect or consequential damages whatsoever arising from the use of these drawings or the information provided therein. These drawings are intended for a qualified and competent trademen capable of determining the details required before, during and after construction.

All persons involved shall verify all details, dimension and notes prior to commencement of work and to report any discrepancies to the designer for further edits.

Roof and Floor system details to be verified and/or specified by the designer/supplier. It is the responsibility of the builder to verify all information provided by manufactured floor and roof systems provider prior to construction. Any alterations specified by roof and floor designers superceed any information provided in these drawings

General Notes:
-All assemblies and components to be installed as per manufacturers specific instructions.
-All dimensions are to rough framing unless otherwise noted.
-All sizing of engineered lumber specified by supplier supercedes sizing designated in these documents.
-All exterior walls to be 2"x 6" and all interior walls to be 2" x 4" unless otherwise noted.
-All exterior walls to receive housewrap. Housewrap is to be taped at all seams.
-All eves and valleys to receive Ice and Water Shield.
-Flash all window and door openings.
-Seal all wall and ceiling penetrations that connect to outside air.
-All guard rails to be min. 36" AFF.
-All baluster spacing to follow the 4" sphere rule.
-Unless otherwise noted, include double trimmer studs on all openings greater than 5'-6" (assuming uniform loading)
-Install increased number of trimmer studs suitable to carry point loads above headered openings. (consult engineered plans)
-unless otherwise noted all openings, in bearing walls, less than 4'-6" to receive (min.) 2-2"x 12" DF headers. (assumed uniform loading
-unless otherwise noted all openings, in bearing walls, greater than 4'-6" to receive (min.) 3-2"x 12" DF headers. (assumed uniform loading)
-It is the sole responsibility of the specific trades, performing there duties, to confirm that the information contained in these documents completely complies with all local and state building codes.
-HVAC contractor to test and balance HVAC system and leave instructions for owner.
-All Electrical installations shall comply with the requirements of Wisconsin Administrative Electrical Code, Vol 2., ch SPS 316
-Design and installation of plumbing shall comply with the requirements of the Wisconsin Plumbing Code. ch SPS 382 to 387
-All property lines are assumed unless a certified survey map has been provided
-The contractor is to have all utility lines verified by the respective utility company. The contractor to have Diggers Hotline perform a locate prior to any excavation.
-The contractor to be make a reasonable attempt to locate any private utility lines, located on site, prior to excavation



Bodin's Resort

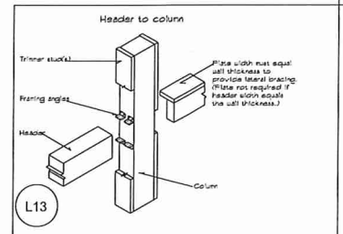
Design. Plan. Done.
Extreme Measures
Residential Construction Planning
31470 State Hwy 137
Ashland, WI 54806
Office 715 682-5019
Mobile 715-209-3977
WWW.ExtremeMeasuresPlans.com

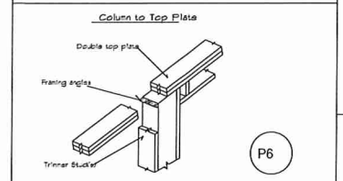
DESIGNED: Submitted
DRAWN: WRE
APPROVED: WRE

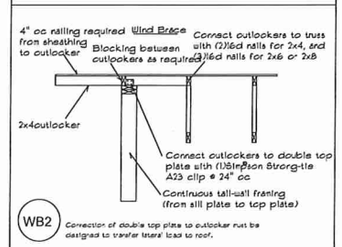
Bodin's Resort
78800 Bodin Rd
Washburn, WI 54891

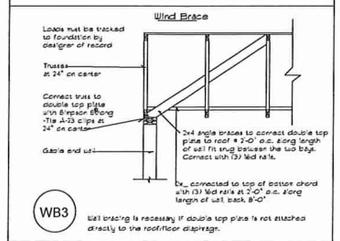
REVISED:
SCALE: As Shown
DRAWING No. 22-08-958
DATE: 08-02-2022

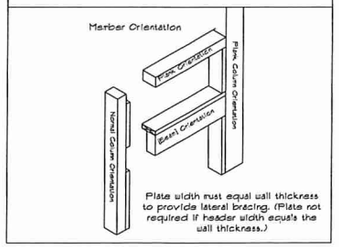
Cover

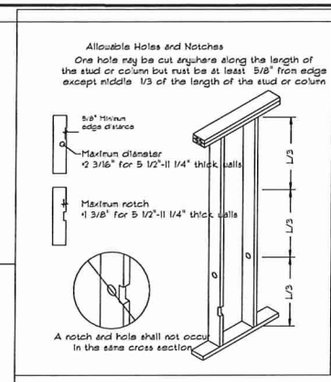


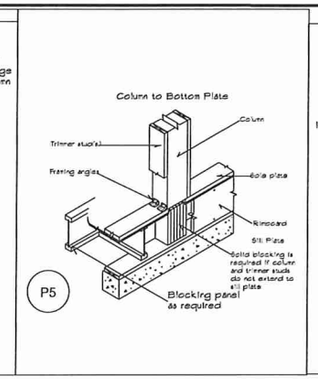


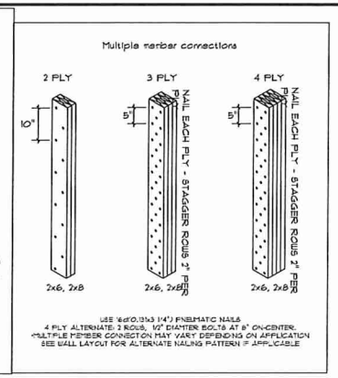






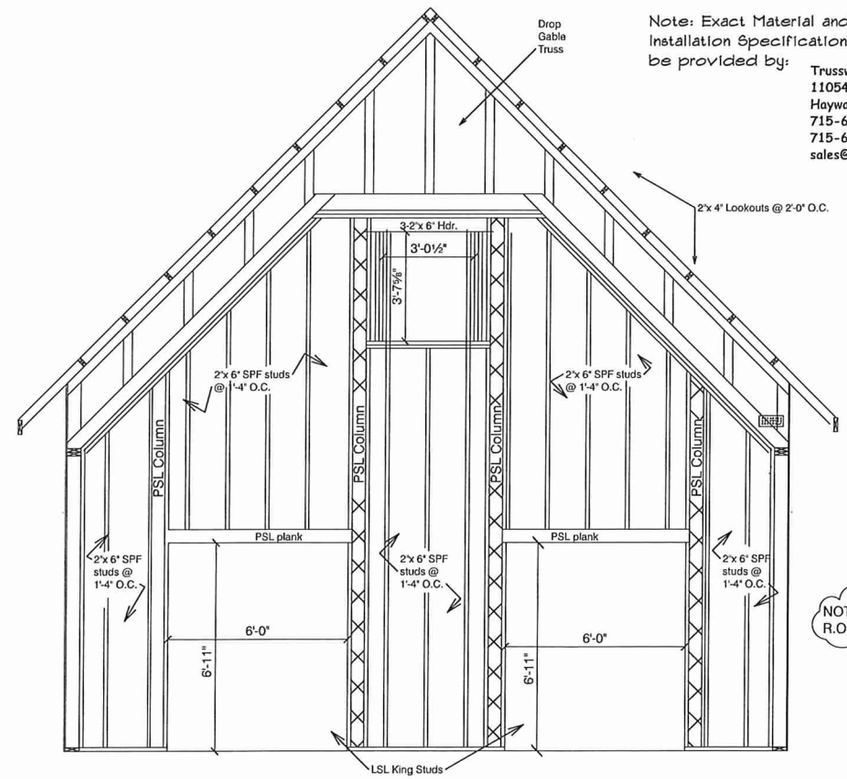






WALL DESIGN ASSUMPTIONS

1) DESIGN APPLICATIONS ARE LIMITED TO VERTICAL LOADS, AND TO LATERAL WIND LOADS THAT ARE PERPENDICULAR TO THE WALL FRAMING ONLY (TALL WALL WAS NOT CHECKED OR DESIGNED AS A SHEAR WALL)
2) DESIGN ASSUMES STRUCTURAL SHEATHING ON ONE SIDE OF THE WALL, OR A COMBINATION OF GYPSUM WALLBOARD AND NON-STRUCTURAL SHEATHING OR SIDING APPLIED TO EACH SIDE OF THE WALL, OR EQUIVALENT
3) BLOCK/BRACE ALL FRAMING VERTICALLY EVERY 8'-0" oc
4) BLOCK DOWN ALL COLUMN/TRIMMER LOADS AT RIMBOARD LOCATIONS
5) TYPICAL STUD FRAMING FOR WALLS WITH FLEXIBLE FINISHES ARE DESIGNED AT L/120 DEFLECTION CRITERIA. THE MATERIAL SUPPORTING WINDOWS IN THESE WALLS ARE DESIGNED AT L/180 DEFLECTION CRITERIA.



Note: Exact Material and Installation Specification to be provided by:

Trussworks, Inc.
11054 N Olson Road
Hayward, WI 54843
715-634-2000 (Phone)
715-634-6828 (Fax)
sales@trussworksinc.com(email)

NOTE: Contractor to verify all R.O.'s prior to framing

Proposed Tall Wall Design

Dream. Plan. Done.
Extreme Measures
Residential Construction Planning
27429 State Hwy 137
Ashland, WI 54806
Office 715-682-5019
Mobile 715-209-3977
WWW.ExtremeMeasuresPlans.com

DESIGNED: Submitted
DRAWN: WRE
APPROVED: WRE

Bodin's Resort
78800 Bodin Rd
Washburn, WI 54891

REVISED:
SCALE: N.T.S.
DRAWING No. 22-08-958
DATE: 08-02-2022

Tall Wall

Good Afternoon,

I am in the process of reviewing the Land Use Application for the Blue Cabin Project and need a few things from you:

1. LLC documentation stating who is authorized to do work on behalf of the LLC. I have attached a template for you to fill out and get notarized.
2. Fees for the project ($1,200)
3. Blueprints for the new cabin
4. Sanitary Reconnect (attached)

Let me know if you have any questions. I believe I should be able to do the on-site inspection tomorrow. If not tomorrow, it will be early next week given that the requested information is provided.

Respectfully,

Erica Meulemans

Assistant Zoning Administrator

Bayfield County Planning & Zoning

117 E Fifth Street

PO Box 58

Washburn, WI 54891

P: 715-373-3517

E: erica.meulemans@bayfieldcounty.wi.gov

--
Bill Bodin
Bodin's Resort
715-209-7821

*2016R-566012

2016R-566012
PATRICIA A OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
11/02/2016 11:27AM
TF EXEMPT #:
RECORDING FEE: 30.00
PAGES: 2

Return to:
Bayfield County Zoning

AFFIDAVIT

On ***October 20, 2016*** the owner was granted by the Bayfield County Planning and Zoning Committee an:

Conditional Use
Classification List: [Multiple Unit Development]
(requested: Maintenance, updates and replacement of structures on existing resort consisting of 4 cabins and 1 full-time residence.)

Property Owner: Bodin's Resort, LLC. (Jeffrey, Bonnie, Beta, Thomas & William Bodin)

Property Description: a 9.38–acre parcel (Tax ID# 35545) described as all of Gov't Lot 1 lying E of Public Rd including adjacent abandoned RR right-of-way, less N 230' & less S 150' & less Lot 1 CSM#1538 in V. 1132 P.25, in Section 21, Township 49 North, Range 4 West, Town of Bayview, Bayfield County, WI.

This use of the property is subject to the following terms and conditions:

- Classification List: Multiple Unit Development
  - **Granted: (Maintenance, updates and replacement of structures on existing resort consisting of 4 cabins and 1 full-time residence)**

Conditions placed by (Planning and Zoning Dept.)

- Land Use Application(s) and Fees are required by ordinance to be obtained prior to any construction.
- Building Permits are required by State Agency.

The purpose of this affidavit is to make the foregoing a matter of public record in the office of the Bayfield County Register of Deeds, *per Bayfield County Planning & Zoning Ordinance, Title 13, Chapter 1, Article C, Section 13-1-41:*

"If a conditional use permit is approved with conditions, an appropriate record shall be made of the land use and structures permitted, and prior to the issuance of the permit the Zoning Department shall record with the Bayfield County Register of Deeds an affidavit prepared by the Zoning Department setting forth the terms and conditions of the permit and a legal description of the property to which they pertain. The recording fee shall be paid by the applicant. The terms and conditions of the permit shall be binding upon and inure to the benefit of all current and future owners of the property to which it pertains unless otherwise expressly provided by the permit, or unless the permit terminates under subsection (d) of this section."

Also, this permit entitles you to the work specifically described in the application and plans, and as limited by any conditions of this permit. No changes in the project or plans may be made without prior approval of the Bayfield County Zoning Committee. The issuance of this permit does not relieve you of your responsibility to obtain a permit or approval required by your township, State of WI, or federal authority (i.e., US Army Corps of Engineers).

Be advised your conditional use permit shall automatically terminate 12 months from its date of issuance if the authorized building activity, land alteration or use has not begun within such time. If your conditional use is discontinued for 36 consecutive months, the permit authorizing it shall automatically terminate, and any future use of the building(s) or property to which the permit pertained shall conform to Ordinance.

Bayfield County Planning & Zoning Dept.	**This instrument was signed before me in the State of Wisconsin, County of Bayfield**
Governmental Official Printed Name and Title: ***Robert D. Schierman, Director***	on this 2nd day of November, 20 16
Signature of Governmental Official: [signature]	Deborah A. Kmetz Notary Public
On this 2nd day of November, 20 16	My commission expires on: 11-27-16

DEBORAH A. KMETZ NOTARY PUBLIC STATE OF WISCONSIN

Receiving approval from the Planning and Zoning Committee at the meeting does not authorize the beginning of construction or land use; you must first obtain land use application/permit card(s) from the Zoning Department.

Drafted by: Bayfield Co Planning & Zoning Dept / (RDS/dak -11/2/16-9:39am)
k/affidavit/2016/#10october/bodinresortllc

Proofed by: RDS

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

RECEIVED
Date Stamp (Received)
NOV 21 2016
Bayfield Co. Zoning Dept

Permit #:	16-0446
Date:	12-6-16
Amount Paid:	$300 11-21-16
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: Bodins Resort L.L.C.	Mailing Address: 78800 Bodin RD	City/State/Zip: Washburn WI 54891	Telephone: 373-2822
Address of Property: 78800 Bodin RD	City/State/Zip:		Cell Phone: 209-3730
Contractor: Scott Bodin Construction	Contractor Phone:	Plumber:	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Jeffery R Bodin	Agent Phone: 715-373-2822	Agent Mailing Address (include City/State/Zip): 78910 Bodin RD	Written Authorization Attached ☐ Yes ☐ No

PROJECT LOCATION	Legal Description: (Use Tax Statement) ZD 35545	PIN: (23 digits) 04- 04-008-2-49-04-21-1-03-001-4100	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:
	1		1538	1132 25+26	1		

Section ____, Township ____ N, Range ____ W	Town of: Bayview	Lot Size	Acreage 9.38

☒ 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: 360 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
$ 100,000 +	☒ 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: Holding Tank	☐ ____
	☐ Relocate (existing bldg)	☐ Basement		☐ ____	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	
	☐ Run a Business on Property	☒ No Basement		☐ None	☐ Portable (w/service contract)	
	☐ ~~Demo Rebuild~~	☐ Foundation			☐ Compost Toilet	
		☐ SLAB concrete			☐ None	

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length: 40	Width: 24	Height: 16'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	☐	Principal Structure (first structure on property)	(24 X 40)	960
	☐	Residence (i.e. cabin, hunting shack, etc.)	(X)	
☒ Residential Use		with Loft	(X)	
	✓	with a Porch	(8 X 24)	192
		with (2nd) Porch	(X)	
	✓	with a Deck	(10 X 10)	100
☐ 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)	
	☐	Addition/Alteration (specify) ____	(X)	
☐ Secretarial Staff	☐	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
DEC 06 2016
Municipal Use

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 ____
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Jeffery R Bodin Date 11/11/16
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

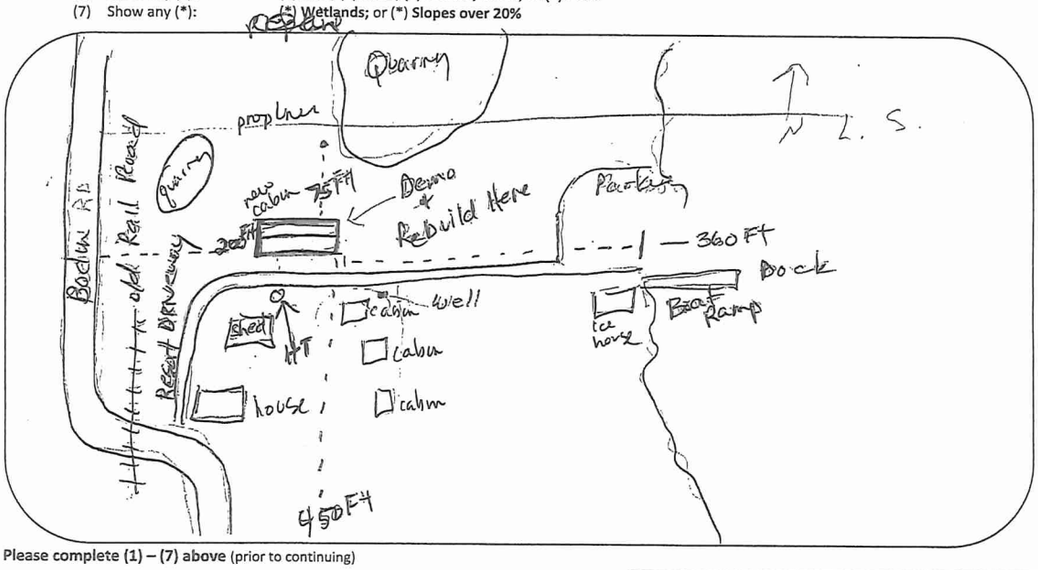
Address to send permit ____

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%**



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**	200	Feet	Setback from the **Lake** (ordinary high-water mark)	360	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	75	Feet			
Setback from the **South** Lot Line	450	Feet	Setback from **Wetland**		Feet
Setback from the **West** Lot Line	200	Feet	**20% Slope Area on property**	☐ Yes	☐ No
Setback from the **East** Lot Line	360	Feet	Elevation of **Floodplain**		Feet
Setback to **Septic Tank** or **Holding Tank**	30	Feet	Setback to **Well**	75	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:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		
Permit #: 16-0446	Permit Date: 12-6-16		

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

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 not for this insp ☐ No

Inspection Record: Existing older cabin razed. New cabin in its place. no net increase in structures - consistent w/ permit.

Zoning District (RRB)
Lakes Classification ( )

Date of Inspection: Inspected by: Jacqueline Murphy Date of Re-Inspection:

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

Signature of Inspector: Date of Approval: 12-2-16

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

© October 2013

sanitary reconnect rec'd 12-1-16

AFFIDAVIT OF AUTHORITY
(Corporation)

PURPOSE. This Affidavit of Authority is used to certify the individual applying for a permit is authorized when the property is owned by a corporate/business entity.

STATE OF WISCONSIN)
) ss.
BAYFIELD COUNTY)

The undersigned affirms and states as follows:

1. Address of Subject Property: 78800 Bodin Road Washburn, WI 54891

2. The Subject Property is owned by: Brownie Rock LLC
(Name of Company)

3. The name(s) of the current President or Managing Member: William Bodin - Manager Bodin's Resort

Beta Bodin, Thomas Bodin, Bonnie Bodin, Jeff Bodin All 20% Limited Partners

4. I certify that the company named in paragraph 2 is valid and in effect on the date signed below. I am the duly appointed agent of the Company named above in paragraph 2, and I have the authority under the terms of said authorization to apply for permits from the Bayfield County Zoning Department concerning the Property described in paragraph 1. I further certify that the information and statements made within this affidavit are true, accurate, and complete to the best of my knowledge.

5. I am authorized by the above-named Company to apply for and bind the Trust to the terms and conditions of any permit that may be issue by the Bayfield County Zoning Department.

6. By signing this affidavit, I attest that I am unaware of any known or unknown person(s) who would contest this application. I agree to indemnify Bayfield County or such person or legal entity suffering a damage resulting from any illegalities of the application for permit.

Dated: 10/12/2022

William Bodin
William Bodin
Print Name

Subscribed and sworn to before me this 12 day of OCTOBER, 2022

Brenda Dagsgard
Notary Public, Bayfield County, Wisconsin
My commission: 12-17-2025

NOTARY PUBLIC
BRENDA DAGSGARD
STATE OF WISCONSIN

PROCESSING INFORMATION

INITIAL PROCESSING. Once the department receives your affidavit, the department will review it for completeness. If the information is not complete, the department may reject your affidavit and the application.

REQUEST FOR MORE INFORMATION. The department may request that you provide more information or evidence to support your affidavit.

DECISION. The department will review all documents submitted as part of the application for registration and title, this form included, and may approve, deny or request more information.

RECEIVED

OCT 13 2022

Bayfield Co. Planning and Zoning Agency

ENTERED

Bayfield County
Impervious Surface Calculations

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high-water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

Owner / Applicant			
Owner's Name	Brownie Rock LLC		
Site Address	78800 Bodin Road		
City / State Zip	Washburn WI 54891		
Mailing Address	P.O. Box 687		
City / State / Zip	Bayfield, WI 54814		
Phone(s)	715-779-3301	Cell	715-209-7821
Email Address	BodinsresorT@gmail.com		

Accurate Legal Description involved in *this request* (specify ***only*** the property involved with this application)									
PROJECT LOCATION	**Legal Description: (Use Tax Statement)**		**Tax ID #:** 35545		**Lot Size**	**Acreage** 9.38	**Zoning District** R-RB		**Lakes Class**
		¼	¼	**Section** 21	**Township** 49	**Range** 04	**Town of** Bayview		
Gov't Lot	**Lot #**	**CSM #**	**Doc #**		**Vol Page**		**Lot#**	**Blk #**	**Subdivision**

Impervious Surface: An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed, and maintained to be pervious. Impervious surface standards shall apply to the construction, reconstruction, expansion, replacement or relocation of any impervious surface that is or will be located within 300 feet of the ordinary high-water mark of any navigable waterway on any riparian lot or parcel. Nonriparian lot or parcel that is located entirely within 300 feet of the ordinary high−water mark of any navigable waterway.

Calculation of Impervious Surface: Percentage of impervious surface shall be calculated by dividing the surface area of the existing and proposed impervious surfaces on the lot or parcel by the total surface area of that lot or parcel and multiplying by 100. If an outlot lies between the ordinary high-water mark and the developable lot or parcel described in subd. 1. and both are in common ownership, the lot or parcel and the outlot shall be considered one lot or parcel for the purposes of calculating the percentage of impervious surfaces.

Impervious Surface Standard: Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high-water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

Existing Impervious Surfaces: For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

a. Maintenance and repair all impervious surfaces:

b. Replace existing impervious surfaces with similar surfaces within the existing building footprint.

c. Relocate or modify existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance and meets the applicable setback requirements in Section 13-1-32.

Impervious Surface(s)

Impervious Surface Item	Dimension(s)	Square Footage
Existing House Blue	20 x 20'	400'
Existing Garage Pole Barn	36' x 24'	864'
Existing Porch / Covered Porch		
Existing Porch #2 / Covered Porch #2		
Existing Deck	15 x 18'	270'
Existing Deck #2		
Existing Sidewalk(s), Patio(s) + 3 Cabins @ 6500'		26,500
Existing Storage Bldg		
Existing Shed		
Existing Accy: (explain) _____		
Existing Carport		
Existing Boathouse		
Existing Driveway	N/A	
Existing Road (*Name*) _____		
Existing **Other** (explain) _____		
Existing **Other** (explain) _____		670
		28134
Proposed House	60 x 24	1440
Proposed Garage		
Proposed Addition (explain) _____		
Proposed Addition (explain) _____		
Proposed Porch / Covered Porch		
Proposed Porch #2 / Covered Porch #2		
Proposed Deck #1	14 x 12	168'
Proposed Deck #2	24 x 10	240'
Proposed Balcony		
Proposed Sidewalk(s), Patio(s)		
Proposed Storage Bldg		
Proposed Shed		
Proposed Carport		
Proposed Accy: (explain)		
Proposed Boathouse		
Proposed Driveway	250' x 12'	3,000
Proposed Road (Name) _____		
Proposed **Other** (explain) _____		
Proposed **Other** (explain) _____		
Total:		32,312

4848
4178+

a. Total square footage of lot: 408,592.8

b. Total impervious surface area: 32,312

c. Percentage of impervious surface area: 100 x (b)/a = 11.4%

Total square footage of additional impervious surface allowed: @ 15% _____ @ 30% _____

Issuance Information (County Use Only)	Date of Inspection: 10-10-2022
Inspection Record: Existing cabin being replaced	Zoning District ( ) Lakes Classification (1)
Condition(s): New cabin replacement project and driveway will put total impervious surface at 11.4%. No management plan required. New or modified plans will require new calculations	Stormwater Management Plan Required: ☐ Yes ☒ No
Signature of Inspector: Erica Mulemans	Date of Approval: 10-17-2022

u/forms/imperviousurface
© May2012 ®-Sept2016; Jan2021

paid online 10-13

RECEIVED

OCT 13 2022

Bayfield Co. Planning and Zoning Agency

ENTERED 10-15-22

BAYFIELD COUNTY
SANITARY PERMIT APPLICATION

Zoning District _____

Lakes Class _____

I. APPLICATION INFORMATION (Please Print All Information)

Soil Test No:

County Permit No: 0921 2203-2022

Property Owner's Name: Brownie Rock LLC

County: **Bayfield**

Address of Property: 78800 Bodin Road Washburn WI 54891

Property Location: ¼ ¼, S 21 T 49 (N), R 04 E (or) (W)

Property Owner's Mailing Address: P.O. Box 687

Township: Bayview

Gov. Lot #:

City, State: Bayfield, WI | Zip Code: 54814 | Phone Number: 715-779-3301

Lot #	Block #:	CSM #:	CSM Doc #	Subdivision Name
—	—	—	—	Resort

II. TYPE OF BUILDING: (Check One)

- ☐ State Owned
- ☐ Public (Explain the use/purpose _____)
- ☒ 1 or 2 Family Dwelling - No. of Bedrooms 4

Tax ID#: 35545

III. TYPE OF PERMIT: (Check only one box on line A. Check box on line B, if applicable)

A) ☐ New ☐ Replacement ☐ County Private Interceptor

☑ Reconnection ☐ Repair ☐ Revision ** ☐ Transfer of Owner (**List Previous Owner below**)

B) ☒ A Sanitary Permit was previously issued. ***Previous Permit Number***: 20-1015 Date Issued: 4-15-2000

IV. TYPE OF NON-PLUMBING SYSTEM: (Check One) * Replacements need previous permit number and date filled out above

C) ☐ Pit Privy ☐ Vault Privy (Vault size: _____gallons or _____cubic yards)

☐ Portable Privy ☐ Camping Transfer Unit Container ☐ Composting Toilets ☐ Incinerating Toilet

V. ABSORPTION SYSTEM INFORMATION:

1. Gallons Per Day	2. Absorp. Area Required (Sq.Ft.)	3. Absorp. Area Proposed (Sq. Ft.)	4. Loading Rate (Gals. / Day / Sq.Ft.)	5. Perc. Rate (Min. Inch)	6. System Elev.(Feet)	7. Final Grade Elev. (Feet)

VI. TANK INFORMATION:

	Capacity In Gallons: New Tanks	Capacity In Gallons: Existing Tanks	Total Gallons	# of Tanks	Manufacturer's Name	Prefab. Concrete	Site Constructed	Steel	Fiber-glass	Plastic	Exper. App.
Septic Tank or Holding Tank		2000		1	Wieser	X					
Lift Pump Tank / Siphon Chamber											

VII. RESPONSIBILITY STATEMENT:

I the undersigned, assume responsibility for installation of the onsite sewage system shown on the attached plans.

Owner's Name(s): (Print) *If applying for Section C above*

Owner's Signature(s): (No Stamps) William Bodin

Plumber's Name: (Print) If applying for Section A or B) above: Mike Wroblewski

Plumber's Signature: (No Stamps)

MP/MPRSW No: 1288503

Plumber's Address: (Street, City State, Zip Code): 1210 5th Ave W. Washburn WI 54891

Home Phone:

Business Phone: 920-252-2528

VIII. COUNTY / DEPARTMENT USE ONLY

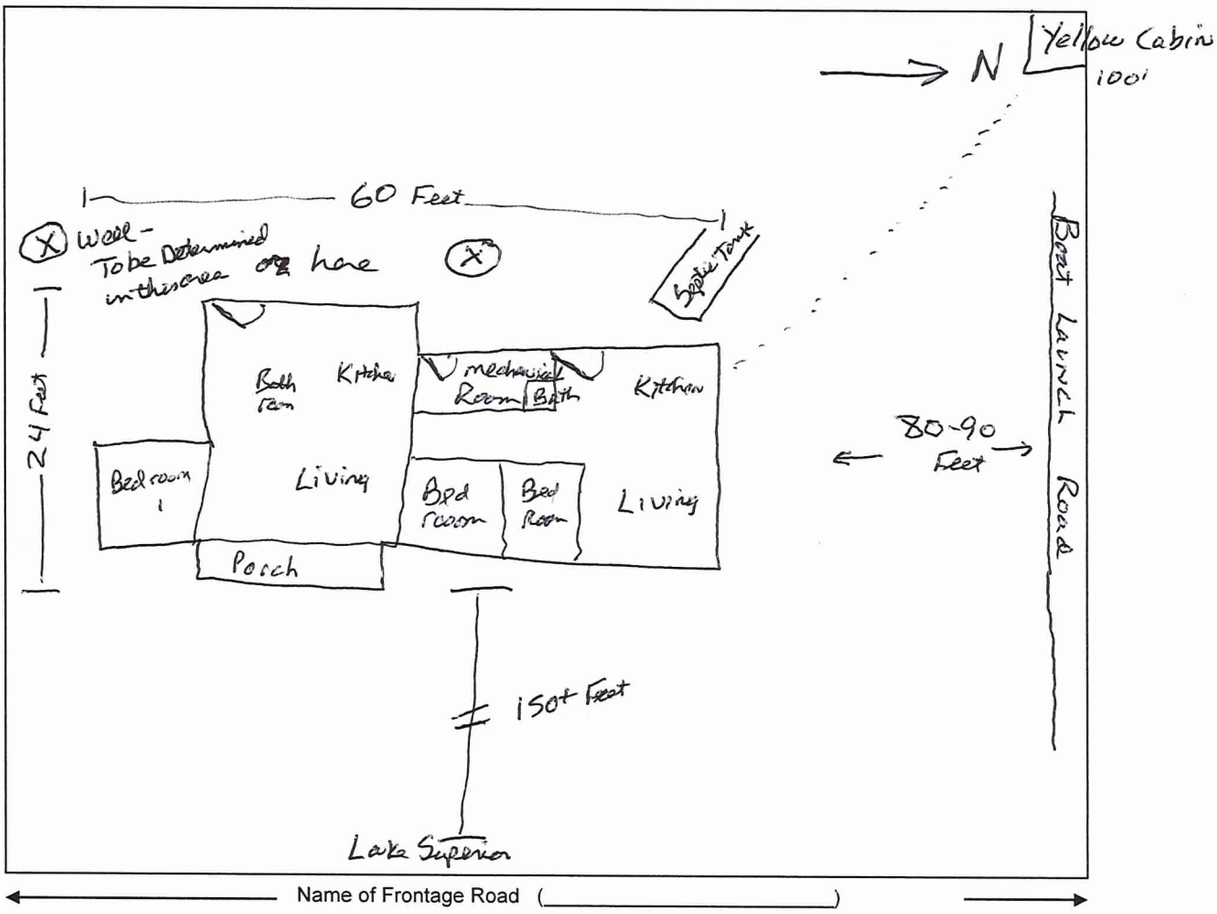
☒ Approved	☐ Disapproved ☐ Owner Given Initial Adverse Determination	Sanitary Permit/Transfer Fee: Paid	Date Issued: 10-18 2022	Issuing Agent's Signature / Date: Erica Mulumars

IX. CONDITIONS OF APPROVAL / REASONS FOR DISAPPROVAL:

must be completed by master plumber

Plot Plan on reverse side

Lot Line



1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location and size of the building.
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-7 (a-o) COMPLETELY

a. Building to all lot lines
b Building to centerline of road
c. Building to lake, river, stream or pond
d. Septic / holding tank to closest lot line
e. Septic/holding tank to building
f. Septic / holding tank to well
g. Septic / holding tank to lake, river, stream or pond
h. Privy to closest lot line
i. Privy to building
j. Privy to lake, river, stream or pond
k. Drain field to closest lot line
l. Drain field to building
m. Drain field to well
n. Drain field to lake, river, stream or pond
o. Well to building

Submit To: Bayfield County Zoning Department, PO Box 58, Washburn, WI 54891

Proofed by: ____

Town Of Bayview, Bayfield County
2019 Notice of Changed Assessment
This is not a Tax Bill

Under state law (Sec. 70.365, Wis. Stats.), your property assessment for the current year is listed below.

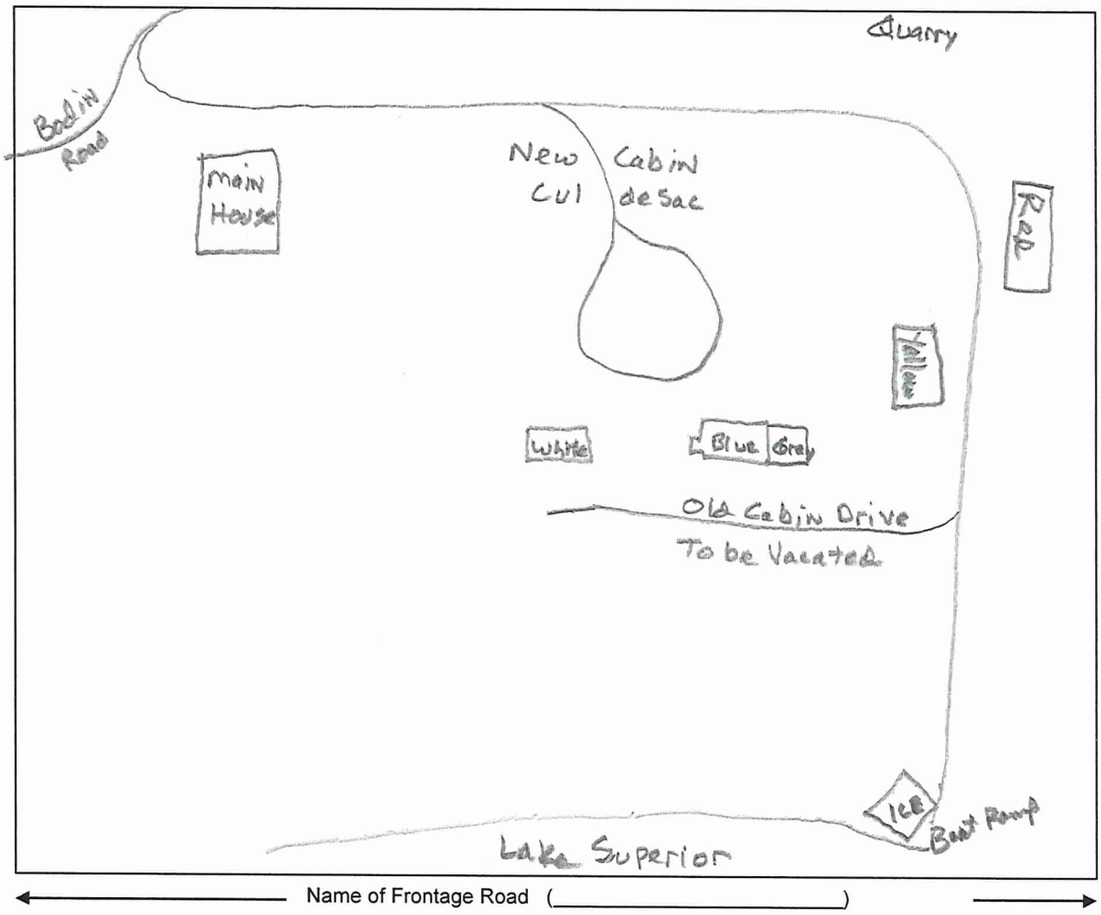
roperty owner

BROWNIE ROCK LLC
PO BOX 687
BAYFIELD WI 54814

Parcel information

Tax ID:	35545
Pin:	04-008-2-49-04-21-1 05-001-41000
Address:	78800 BODIN RD
Legal Desc:	S 21/T 49/R 04W ALL OF GOVT LOT 1 LYING EAST OF PUBLIC RD INCLUDING ADJ ABANDONED RR ROW LESS N 230' & LESS S 150' & LESS LOT 1 CSM #1538 IN V.9 P.157 IN DOC 2018R-575904

Lot Line



1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location and size of the building.
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-7 (a-o) COMPLETELY

a. Building to all lot lines
b Building to centerline of road
c. Building to lake, river, stream or pond
d. Septic / holding tank to closest lot line
e. Septic/holding tank to building
f. Septic / holding tank to well
g. Septic / holding tank to lake, river, stream or pond
h. Privy to closest lot line
i. Privy to building
j. Privy to lake, river, stream or pond
k. Drain field to closest lot line
l. Drain field to building
m. Drain field to well
n. Drain field to lake, river, stream or pond
o. Well to building

Submit To: Bayfield County Zoning Department, PO Box 58, Washburn, WI 54891

Proofed by: ____