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

LAND USE - X
SANITARY -
SIGN -
SPECIAL - NA
CONDITIONAL -
BOA -

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

No: 09272201-2022 | Tax ID: 20548 | Issued To: DIANNA DIANNA L TEPPO REV TRUST

Location: PETTINGILLS FIRST ADDITION Section 07 Township 47 N. Range 08 W.
LOT 22-28 BLOCK 4 IN DOC
2021R-590532 1038

Govt Lot 1 | Lot | Block | Subdivision: PETTINGILLS CSM# 1ST ADD TO IRON RIVER

For: Residential / Detached Garage / 24L x 24W x 12H

Condition(s): To meet all setbacks including eaves and overhangs. Not for human habitation. No pressurized water. For personal storage only. Town/State/DNR permits may be 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.

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

Mckenzie Slack

Authorized Issuing Official

Wed Oct 12 2022

Date

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

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)
AUG 31 2021
Bayfield Co. Zoning Dept.

Permit #:	22-0276 ENTERED
Date:	10-5-2022
Amount Paid:	$125.00 online 10-28-22
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. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → [X] LAND USE [ ] SANITARY [ ] PRIVY [ ] CONDITIONAL USE [ ] SPECIAL USE [ ] B.O.A. [ ] OTHER ____

Owner's Name: Mitchell L. Holmes Jr.	Mailing Address: 1507 N 1st St	City/State/Zip: Superior, WI 54880	Telephone: (218) 428-6915
Address of Property: 06172 North Point Dr.	City/State/Zip: Iron River, WI 54847		Cell Phone:
Contractor: Duluth/Superior Concrete Services	Contractor Phone: (218) 428-6915	Plumber:	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Mitchell L. Holmes Jr.	Agent Phone:	Agent Mailing Address (include City/State/Zip):	Written Authorization Attached [ ] Yes [ ] No

PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# 19631						Recorded Document: (Showing Ownership) Trustee's Deed	
____1/4, ____1/4	Gov't Lot	Lot(s)	CSM	Vol & Page	CSM Doc #	Lot(s) # 4	Block #	Subdivision: Allison's Acres	
Section 21, Township 47 N, Range 8 W		Town of: Iron River						Lot Size 181,045.2 sq ft	Acreage 4.17

[X] 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 your Property in Floodplain Zone? [ ] Yes [X] No	Are Wetlands Present? [X] Yes [ ] No
	[X] Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline: 550 feet		
[ ] Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
$ 40,000	[X] New Construction	[ ] 1-Story	[X] Basement	[X] 1	[ ] Municipal/City	[ ] City
	[ ] Addition/Alteration	[X] 1-Story + Loft	[ ] Foundation	[ ] 2	[X] (New) Sanitary Specify Type: 2,500 holding tank	[ ] Well
	[ ] Conversion	[ ] 2-Story	[ ] Slab	[ ] 3	[ ] Sanitary (Exists) Specify Type:	[X] none
	[ ] Relocate (existing bldg)	[ ] ____	[ ] ____	[ ] ____	[ ] Privy (Pit) or [ ] Vaulted (min 200 gallon)	
	[ ] Run a Business on Property		Use	[ ] None	[ ] Portable (w/service contract)	
			[X] Year Round		[ ] Compost Toilet	
	[ ] ____		[ ] ____		[ ] None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 24'	Width: 24'	Height: 20

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	[X]	Principal Structure (first structure on property)	(24 x 24)	576
[X] Residential Use	[ ]	Residence (i.e. cabin, hunting shack, etc.)	(24 x 24)	
		with Loft	(10 x 16)	160
		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 (explain) ____	(x)	
	[ ]	Accessory Building (explain) ____	(x)	
	[ ]	Accessory Building Addition/Alteration (explain) ____	(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 8/5/2021
(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 1507 N 1st St Superior, WI 54880

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

Original Application MUST be submitted

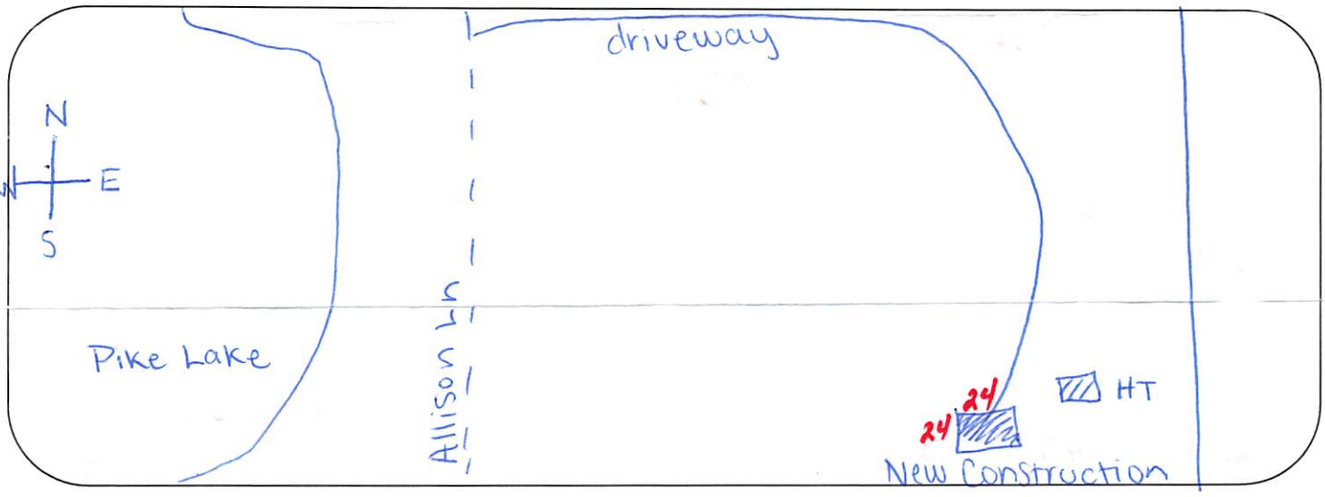
Expired -?
Shoreland - 1000' of Lake Height - Wetlands Loft Size per Owner

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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

Fill Out in Ink – NO PENCIL

(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	Setback Measurements	Description	Setback Measurements
Setback from the **Centerline of Platted Road**	450 Feet	Setback from the **Lake** (ordinary high-water mark)	550 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	250 Feet		
Setback from the **South** Lot Line	• 75 Feet	Setback from **Wetland**	400 — Feet
Setback from the **West** Lot Line	550 Feet	**20% Slope Area on the property**	☐ Yes ☒ No
Setback from the **East** Lot Line	• 75 Feet	Elevation of **Floodplain**	— Feet
Setback to **Septic Tank** or **Holding Tank**	30 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(s):

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.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 22-1125	# of bedrooms: 3	Sanitary Date: 9/12/22
Permit Denied (Date):	Reason for Denial:		
Permit #: 22-0276	Permit Date: 10-5-2022		

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 (R-1) Lakes Classification (3)
Date of Inspection: 9/28/22	Inspected by: [signature]	Date of Re-Inspection: REH

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

Build as proposed
Get Required UDC Inspection

Signature of Inspector: [signature]	Date of Approval: 9/29/22

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

Ruth Hulstrom

From: Ruth Hulstrom
Sent: Tuesday, October 11, 2022 2:31 PM
To: Duluth/Superior Concrete Services, LLC.
Cc: Tracy Pooler
Subject: RE: Residence w/Loft - Tax ID# 19631

Okay. Thanks for the information. The department will update the application accordingly and finalize issuance of the permit.

Thanks,

Ruth Hulstrom, AICP | Director
Planning and Zoning Department
117 E 5th Street, PO Box 58
Washburn, WI 54891
Phone: 715-373-3514
Fax: 715-373-0114
Email: ruth.hulstrom@bayfieldcounty.wi.gov

-----Original Message-----
From: Duluth/Superior Concrete Services, LLC. <duluthsuperiorconcrete@aol.com>
Sent: Tuesday, October 11, 2022 2:26 PM
To: Ruth Hulstrom <ruth.hulstrom@bayfieldcounty.wi.gov>
Subject: Re: Residence w/Loft - Tax ID# 19631

Hi Ruth,

The overall height of the structure is 20'. The loft is a 10'x16', which is 160 sq ft.
Yes we are aware of the wetlands next to Pike lake and the application can be updated. The new structure will be approximately 400' from the wetlands.

Thanks,

Logan Klobucher
Duluth/Superior Concrete Services, LLC.
(715) 813-0304

> On Oct 11, 2022, at 12:14 PM, Ruth Hulstrom <ruth.hulstrom@bayfieldcounty.wi.gov> wrote:
>
> <20221011120628562_AUG 3 12021 ;.pdf>

Ruth Hulstrom

From: Ruth Hulstrom
Sent: Tuesday, October 11, 2022 12:14 PM
To: duluthsuperiorconcrete@aol.com
Cc: Tracy Pooler
Subject: Residence w/Loft - Tax ID# 19631
Attachments: 20221011120628562_AUG 3 12021 ;.pdf; Tax ID 19631.pdf

Mitchell,

Per our phone conversation today, please provide the department with the following information regarding your permit application for a residence w/loft to be placed on Tax ID# 19631, see attached submitted application as a reference.

Typically, if an application is incomplete then it becomes invalid after 12 months, however, since it seems you were waiting on the sanitary application related to this land use application, the department is willing to issue a permit related to the application.

Please provide information regarding the following and verify staff can update the application accordingly:

1) Overall height of structure
2) Dimensions of loft (length, width, and overall square footage)

Note that during the review of this application, staff found that mapped wetlands are indicated, see attached map. Wetlands are indicated near Pike Lake. Can you verify that staff can update this on the application? Additionally, please indicate how far these mapped wetlands are from your proposed structure and verify staff can include this information on the application, see page 2 of application that requests setback from wetland info.

Let me know if you have questions.

Thanks,

Ruth Hulstrom, AICP | Director
Planning and Zoning Department
117 E 5th Street, PO Box 58
Washburn, WI 54891
Phone: 715-373-3514
Fax: 715-373-0114
Email: ruth.hulstrom@bayfieldcounty.wi.gov

above expectations
BAYFIELD
COUNTY

Bayfield County, WI

10/11/2022, 12:07:47 PM

1:783

Wetlands
Rivers
Lakes
Meander Lines
Approximate Parcel Boundary
Section Lines
Government Lot
Municipal Boundary
Survey Maps
UnRecorded Map
Recorded Map
Driveways
Buildings

0 0.01 0.01 0.03 mi
0 0.01 0.03 0.06 km

Bayfield

Bayfield County Land Records Department
https://maps.bayfieldcounty.wi.gov/BayfieldWAB/

Bayfield County, WI

2/28/2022, 3:15:03 PM

1:1,230

0 0.01 0.03 0.06 mi

0 0.02 0.04 0.09 km

Wetlands
Rivers
Approximate Parcel Boundary
Building Footprint 2015
Building

bayfield_gis.SDE.T_Cable
Index
Intermediate

bayfield_gis.SDE.T_Bayview
Index
Intermediate

bayfield_gis.SDE.T_Bayfield
Index
Intermediate

bayfield_gis.SDE.T_Barksdale
Index
Intermediate

bayfield_gis.SDE.Gull_Island
Index
Intermediate

bayfield_gis.SDE.T_Washburn
Index
Intermediate

bayfield_gis.SDE.T_Tripp
Index
Intermediate

bayfield_gis.SDE.Raspberry_Island
Index
Intermediate

bayfield_gis.SDE.T_Port_Wing
Index
Intermediate

bayfield_gis.SDE.T_Oulu
Index
Intermediate

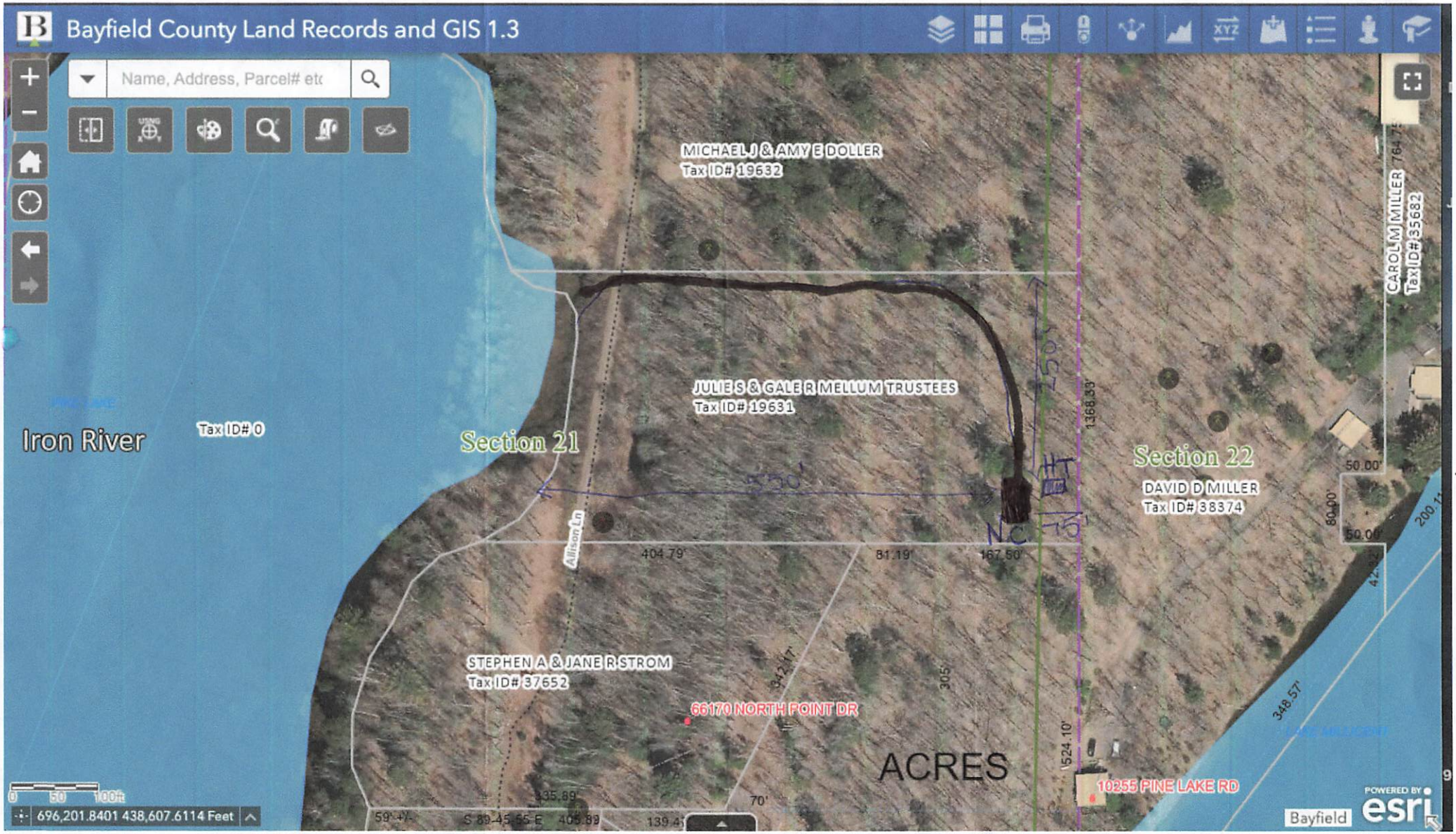
bayfield_gis.SDE.T_Namakagon
Index
Intermediate

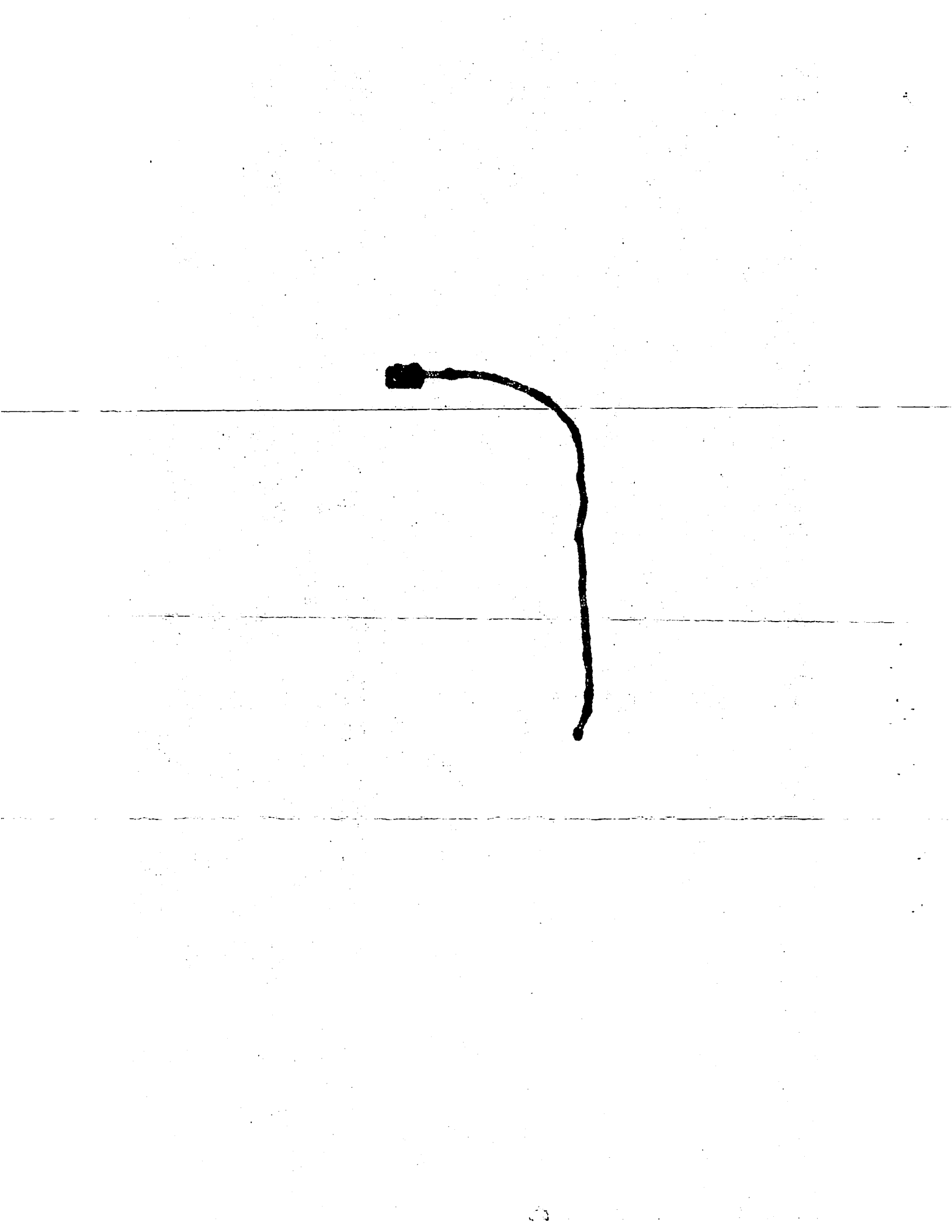
bayfield_gis.SDE.T_Lincoln
Index
Intermediate

bayfield_gis.SDE.T_Kelly
Index
Intermediate

Bayfield County, Bayfield, Bayfield County Land Records Department

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


Bayfield County Land Records and GIS 1.3
Name, Address, Parcel# etc
MICHAEL J & AMY E DOLLER
Tax ID# 19632
JULIE S & GALE R MELLUM TRUSTEES
Tax ID# 19631
Iron River
Tax ID# 0
Section 21
Section 22
DAVID D MILLER
Tax ID# 38374
CAROL M MILLER
Tax ID# 35682
Allison Ln
404.79'
81.19'
167.50'
1368.33'
STEPHEN A & JANE R STROM
Tax ID# 37652
66170 NORTH POINT DR
ACRES
10255 PINE LAKE RD
348.57'
524.10'
696,201.8401 438,607.6114 Feet
Bayfield
POWERED BY esri



DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2021R-589676

07/09/2021 02:52PM
TF EXEMPT #:
RECORDING FEE: $30.00
TRANSFER FEE: $93.00

PAGES: 1

State Bar of Wisconsin Form 7-2003
TRUSTEE'S DEED

Document Number | Document Name

THIS DEED, made between JULIE S. MELLUM AND GALE R. MELLUM as Trustees of THE MELLUM LIVING TRUST U/A DATED FEBRUARY 4, 2020 (whether one or more), and MITCHELL HOLMES ("Grantee," whether one or more). Grantor conveys to Grantee, without warranty, the following described real estate, together with the rents, profits, fixtures and other appurtenant interests, in BAYFIELD County, State of Wisconsin ("Property") (if more space is needed, please attach addendum):

Parcel 1: Lot Four (4) of the Bayfield County Plat Allison's Acres, Town of Iron River, Bayfield County, Wisconsin.

Parcel 2: Together with and subject to the 66' access easement for ingress and egress over and across the existing Private Road, Allison Lane as depicted on CSM No. 2012, CSM No. 2014 and the Plat of Allison's Acres.

Recording Area

Name and Return Address
15569-21

Mitchell Holmes
1507 N 1st Street
Superior, WI 54880

04-024-2-47-08-21-4 00-327-40000
Parcel Identification Number (PIN)

Dated July 8, 2021.

Julie S. Mellum (SEAL) Gale R. Mellum (SEAL)
* JULIE S. MELLUM, TRUSTEE * GALE R. MELLUM, TRUSTEE

(SEAL) (SEAL)
* *

AUTHENTICATION

Signature(s) _____

authenticated on _____.

*

TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, authorized by Wis. Stat. § 706.06)

THIS INSTRUMENT DRAFTED BY:
ATTORNEY MAX T. LINDSEY, SB#1112865
ANICH, WICKMAN & LINDSEY, S.C., ASHLAND, WI

ACKNOWLEDGMENT

STATE OF Minnesota)
) ss.
Hennepin COUNTY)

Personally came before me on July 8, 2021, the above-named JULIE S. MELLUM AND GALE R. MELLUM to me known to be the person(s) who executed the foregoing instrument and acknowledged the same.

* Wendy J Welsh
Notary Public, State of Minnesota
My Commission (is permanent) (expires: 1/31/25)

(Signatures may be authenticated or acknowledged. Both are not necessary.)
NOTE: THIS IS A STANDARD FORM. ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.

© 2003 STATE BAR OF WISCONSIN

* Type name below signatures.

WENDY J WELSH
Notary Public
Minnesota
My Commission Expires

State Bar of Wisconsin Form 7-2003
TRUSTEE'S DEED

Document Number | Document Name

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04-024-2-47-08-21-4 00-327-40000
Parcel Identification Number (PIN)

Dated July 8, 2021.

Julie S. Mellum (SEAL) Gale R. Mellum (SEAL)
* JULIE S. MELLUM, TRUSTEE * GALE R. MELLUM, TRUSTEE

(SEAL) (SEAL)
* *

AUTHENTICATION

Signature(s) _____

authenticated on _____.

*

TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, authorized by Wis. Stat. § 706.06)

THIS INSTRUMENT DRAFTED BY:
ATTORNEY MAX T. LINDSEY, SB#1112865
ANICH, WICKMAN & LINDSEY, S.C., ASHLAND, WI

ACKNOWLEDGMENT

STATE OF Minnesota)
) ss.
Hennepin COUNTY)

Personally came before me on July 8, 2021, the above-named JULIE S. MELLUM AND GALE R. MELLUM to me known to be the person(s) who executed the foregoing instrument and acknowledged the same.

* Wendy J Welsh
Notary Public, State of Minnesota
My Commission (is permanent) (expires: 1/31/25)

(Signatures may be authenticated or acknowledged. Both are not necessary.)
NOTE: THIS IS A STANDARD FORM. ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.

© 2003 STATE BAR OF WISCONSIN

* Type name below signatures.

WENDY J WELSH
Notary Public
Minnesota
My Commission Expires

Tracy Pooler

From: Duluth/Superior Concrete Services, LLC. <duluthsuperiorconcrete@aol.com>
Sent: Friday, September 23, 2022 11:22 AM
To: Tracy Pooler
Subject: Fwd: LAND USE PERMITS Payment Confirmation

Just in case this was still needed.

Thanks,

Logan Klobucher
Duluth/Superior Concrete Services, LLC.
(715) 813-0304

Begin forwarded message:

From: no-reply@allpaid.com
Subject: LAND USE PERMITS Payment Confirmation
Date: October 27, 2021 at 2:22:27 PM CDT
To: duluthsuperiorconcrete@aol.com

AllPaid
7820 Innovation Boulevard Suite 250
Indianapolis, IN 46278

24 Hour Customer Service #: 888-604-7888

LAND USE PERMITS Payment Confirmation

PLC: a002nu

BAYFIELD COUNTY PLANNING AND ZONING
117 EAST FIFTH STREET
WASHBURN, WI 54891
FOR: LAND USE PERMITS

DATE: 10/27/21

ACH 10-28-21

TRANSACTION INFORMATION

Property Owner:	MITCHELL L HOLMES
Tax ID#:	19631

APD TRANSACTION REFERENCE #:	TX_3844066
TRANSACTION REFERENCE #:	33112616
TRANSACTION DATE/TIME:	10/27/2021 15:22:02 EDT

BILLING INFORMATION

NAME:	MITCHELL L HOLMES
ADDRESS:	1507 N 1ST ST
CITY, STATE ZIP:	SUPERIOR, WI 54880
PHONE #:	218-428-6915
CARD #:	xxxx-xxxx-xxxx-9128

PAYMENT INFORMATION

APPROVAL #:	857894
PAYMENT AMOUNT:	$125.00
SERVICE FEE:	$4.38
TOTAL AMOUNT:	$129.38

Real Estate Bayfield County Property Listing

Today's Date: 9/23/2022

Property Status: Current

Created On: 3/15/2006 1:15:34 PM

Description

Updated: 7/21/2021

Tax ID:	19631
PIN:	04-024-2-47-08-21-4 00-327-40000
Legacy PIN:	024105803004
Map ID:	
Municipality:	(024) TOWN OF IRON RIVER
STR:	S21 T47N R08W
Description:	ALLISON'S ACRES LOT 4 IN DOC 2021R-589676 TOG W EASE
Recorded Acres:	4.170
Calculated Acres:	4.257
Lottery Claims:	0
First Dollar:	No
Zoning:	(R-1) Residential-1
ESN:	118

Tax Districts

Updated: 3/15/2006

1	STATE
04	COUNTY
024	TOWN OF IRON RIVER
163297	SCHL-MAPLE
001700	TECHNICAL COLLEGE

Recorded Documents

Updated: 3/15/2006

TRUSTEES DEED
Date Recorded: 7/9/2021 — 2021R-589676

QUIT CLAIM DEED
Date Recorded: 6/17/2020 — 2020R-582664

CONVERSION
Date Recorded: — 493189 172-2;523-189

PLAT
Date Recorded: 7/27/2004 — 2004R-493189

Ownership

Updated: 7/21/2021

MITCHELL HOLMES — SUPERIOR WI

Billing Address:
MITCHELL HOLMES
1507 N 1ST ST
SUPERIOR WI 54880

Mailing Address:
MITCHELL HOLMES
1507 N 1ST ST
SUPERIOR WI 54880

Site Address

* indicates Private Road

66172 NORTH POINT DR — IRON RIVER 54847

Property Assessment

Updated: 9/12/2012

2022 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	4.170	37,700	0

2-Year Comparison	2021	2022	Change
Land:	37,700	37,700	0.0%
Improved:	0	0	0.0%
Total:	37,700	37,700	0.0%

Property History

N/A

22-112 S

3 Bed
9/12/22

Plat not correct?

Town, City, Village, State or Federal Permits May Also Be Required
SHORELAND / WETLANDS
LAND USE – **X**
SANITARY – **22-112S**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. **22-0276** Tax ID: **19631** Issued To: **Mitchell Holmes**

Location: ¼ of ¼ Section **21** Township **47** N. Range **8** W. Town of **Iron River**

Gov't Lot Lot **4** Block Subdivision **Allison's Acres** CSM#

Residential Structure in R-1 zoning district
For: **[1-Story with Loft]; Residence on a Basement (24' x 24); Loft (10' x 16') at a Height of 20'**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): **Build as Proposed. Meet and maintain setbacks including eaves & overhangs. Personal residence only. Town/State/DNR permits may be required. A Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

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, AZA
Authorized Issuing Official

October 12, 2022
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 2022 Bayfield Co Planning and Zoning Agency

RECEIVED SEP 09 2022 Bayfield Co Planning and Zoning Agency

Permit #:	22-0284
Date:	10-12-2022
Amount Paid:	2,850 - 100 - 10-12-22
Refund:	

ENTERED 9-13

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.

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → ☑ LAND USE ☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER _____

Owner's Name: CTD LLC	Mailing Address: 28190 St Hwy 137	City/State/Zip: Ashland/WI/54806	Telephone: / Cell Phone:
Address of Property: 9838 Teepee	City/State/Zip: Iron River WI 54847		
Contractor: Dykstra Construction Inc.	Contractor Phone: 715-682-9599	Plumber: Greg Brown	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Tim Dykstra	Agent Phone: 715-682-9599	Agent Mailing Address (include City/State/Zip): 50181 St. Hwy. 13 Ashland WI 54806	Written Authorization Attached ☑ Yes ☐ No

PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# 34995	Recorded Document: (Showing Ownership) Tax Deed

_____1/4, _____1/4	Gov't Lot	Lot(s)	CSM 1563	Vol & Page V.9. P.208	CSM Doc # 1563	Lot(s) No. 2526	Block(s) No.	Subdivision:

Section 33, Township 47 N, Range 08 W	Town of: Iron River	Lot Size 1 Acre	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: 126' 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	Total # of bedrooms in structure	What Type of Sewer/Sanitary System Is on the property?	Type of Water on property
$950,000	☑ New Construction	☑ 1-Story	☑ Basement	☐ 1	☐ Municipal/City	☐ City
	☐ Addition/Alteration	☐ 1-Story + Loft	☐ Foundation	☐ 2	☐ (New) Sanitary Specify Type: _____	☑ Well
	☐ Conversion	☐ 2-Story	☐ _____	☑ 3	☒ Sanitary (Exists) Specify Type: Conv.	☐ _____
	☐ 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	
	☐ _____		☑ Seasonal		☐ None 08-1955	

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length: 82'	Width: 42'	Height: 26' 1½"

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	☐	Principal Structure (first structure on property)	(X)	
☑ Residential Use	☑	Residence (i.e. cabin, hunting shack, etc.)	(32 x 60)	1688
		with Loft	(X)	
		with a Porch	(18 x 18)	324
		with (2nd) Porch	(6' x 8')	48
		with a Deck	(60 x 8)	480
		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) _____	(X)	
	☐	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 _____
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: T Dykstra Date 9/8/22
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 50181 St Hwy 13 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

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

Fill Out in Ink – **NO PENCIL**

(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 Map

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)	126	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	126	Feet			
Setback from the **South** Lot Line	60	Feet	Setback from **Wetland**		Feet
Setback from the **West** Lot Line	68	Feet	**20% Slope Area on the property**	☐ Yes	☒ No
Setback from the **East** Lot Line	11'4"	Feet	Elevation of **Floodplain**		Feet
Setback to **Septic Tank** or **Holding Tank**	15	Feet	Setback to **Well**	6	Feet
Setback to **Drain Field**	30	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.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 08-195S	# of bedrooms: 3	Sanitary Date: 12/1/2008
Permit Denied (Date):	Reason for Denial:		
Permit #: 22-0284	Permit Date: 10-12-2022		

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: Proposed Staked. Checked existing rain garden to be maintained McKenzie sent message that it line was verified

Zoning District (R1)
Lakes Classification (1)

Date of Inspection: 9/27/22 | Inspected by: MS | Date of Re-Inspection:

Condition(s): Town, Committee or Board Conditions Attached? ☐ Yes ☐ No – (If No they need to be attached.)
To meet all setbacks including eaves and overhangs. To be constructed per plan. Adhere to treated impervious surface plan. Town/State/DNR permits may be required

Signature of Inspector: [signature] | Date of Approval: 10/10/22

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

Bayfield County, WI

9/8/2022, 11:52:56 AM

1:500

Rivers
Lakes
Tie Lines
Meander Lines

Approximate Parcel Boundary
Section Lines
Municipal Boundary

Survey Maps
UnRecorded Map
Recorded Map

Building Footprint 2009-2015
Existing
New

Driveways
Buildings

0 0.01 0.01 0.02 mi
0 0.01 0.01 0.03 km

Bayfield

Bayfield County Land Records Department
https://maps.bayfieldcounty.wi.gov/BayfieldWAB/

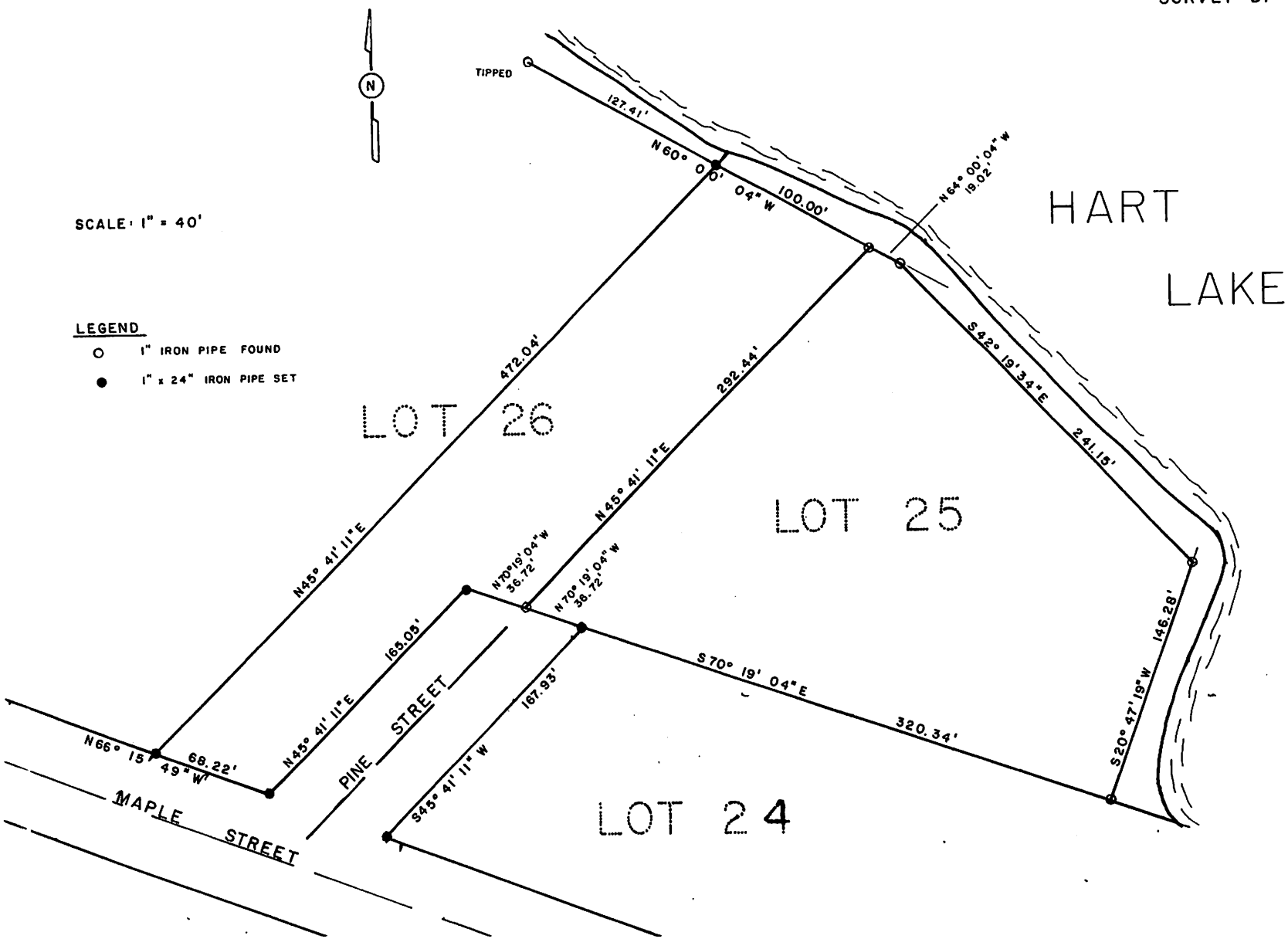
#4381 NE 33-47-8

PLAT OF SURVEY

LOCATED IN LOTS 25 & THE SOUTHERNLY 100 FEET OF 26,
LEDIN'S SUBDIVISON, BAYFIELD COUNTY, WISCONSIN

SURVEY FOR: CATHOLIC DIOCESE OF SUPERIOR

SURVEY BY: W. A. SHEARMAN, R.L.S.
LAKE NEBAGAMON, WI.



Franki Gross

From: Travis Tulowitzky
Sent: Monday, February 28, 2022 4:14 PM
To: Tim Dykstra
Cc: Franki Gross
Subject: RE: Vernon Project (9838 TeePee Trail, Iron River Tax ID#34995)
Attachments: Vernon Mitagation plan.pdf

Tim & Franki,

Attached is the plan from Tim Dykstra and the Impervious Surface Calculation from Todd Norwood. Based on this information and the information provided below, the raingarden should be sized based on being >30' from the downspout:

896 sqft proposed garage roof + 1768 sqft existing house roof + 600 sqft lawn area upslope = 3264 sqft x .03= 98 Sq.ft. raingarden

This should reduce the impervious surface from 20% to 14%.

Franki- Including this e-mail along with the attached drawing, I would accept as the stormwater management plan.

Thanks,

Travis

Travis Tulowitzky
Conservation Technician
Bayfield County Land & Water Conservation
(715) 373-6167
travis.tulowitzky@bayfieldcounty.wi.gov

* Existing mitigation onsite *

ENTERED 9-13 $100 RECEIVED SEP 09 2022 Bayfield Co. Planning and Zoning Agency

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.

Property Owner(s): CTD LLC					
Mailing Address: 28190 St Hwy 137 Ashland WI 54806		Property Address: 9838 Teepee Trail Iron River WI 54847			
Legal Description: _____ 1/4, _____ 1/4,		Section, Township, Range: Sec 33 Township 47 N, Range 8 W			
Authorized Agent/Contractor: Tim Dykstra		Gov't Lot	Lot #	CSM#	Vol & Page
Lot(s) #	Block(s) #	Subdivision: Lots 25+26 Ledins Sub in Gov Lots 4+5		Town of: Iron River	
Parcel ID # (PIN #): 04-024-2-47-08-33-100-207-39300		Tax ID # 34995		Date: 9/9/22	

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.

Calculation of Impervious Surface: Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

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 of all impervious surfaces:

b. Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;

c. Relocation or modification of 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 Item	Dimension	Area (Square Footage)
Existing House		
Existing Accessory Building/Garage	Garage 28x32	896
Existing Sidewalk(s), Patio(s) & Deck(s)		
Existing Covered Porch(es), Driveway & Other Structures	Driveway	5624
Proposed Addition/House	see Plan	2158
Proposed Accessory Building/Garage		
Proposed Sidewalk(s) & Patio(s)		
Proposed Covered Porch(es) & Deck(s)	22x20 covered Porch 60x8 Deck	440 480
Proposed Driveway		
Proposed Other Structures		
Total:		

a. Total square footage of lot: 43560

b. Total impervious surface area: 9598

c. Percentage of impervious surface area: 100 x (b)/a = 22%

If the proposed impervious surface area is greater than 15% mitigation is required.

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

Issuance Information (County Use Only)	Date of Inspection:
Inspection Record: Existing pit to treat existing garage (896) and Proposed house (2158). 15% w/ treated.	Zoning District ( ) Lakes Classification ( )
Condition(s):	Stormwater Management Plan Required: ☐ Yes ☒ No
Signature of Inspector:	Date of Approval: 10/10/22

u/forms/imperviousurface
Created: May 2012 (®Apr 2016; Sept 2020)

Proofed by: _____

Bayfield County Land & Water Conservation Department
615 2nd Ave. East; PO Box 126
Washburn, WI 54891

• Phone: (715) 373-6167 • Website: www.bayfieldcounty.org

October 5, 2022

CTD LLC
28190 State Highway 137
Ashland, WI 54806

RE: Stormwater management plan for 9838 Teepee Trail Road, Iron River, WI 54847 described as Lots 25 and 26, Ledins Sub In Gov. Lots 445, Section 33, Township 47 North, Range 08 West, Town of Iron River, Bayfield County, Wisconsin. Parcel ID #: 04-024-2-47-08-33-1 00-207-39300. Tax ID: 34995.

Dear CTD LLC,

Upon examining photos, site maps, the impervious surface calculations sheet, and discussing the site with McKenzie Slack from Bayfield County Planning & Zoning Department, it has been calculated that if you continue to treat the existing garage and treat the entirety of the proposed house, you will reduce your impervious surface to 15%. You can gutter the house and run the downspouts to the existing rain garden for treatment.

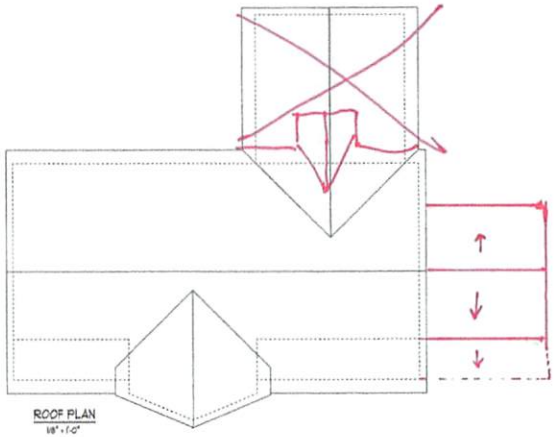
Implementing and maintaining the practices described above should address things that are required for stormwater management as part of your permit application. If you have any questions, please let me know.

Sincerely,

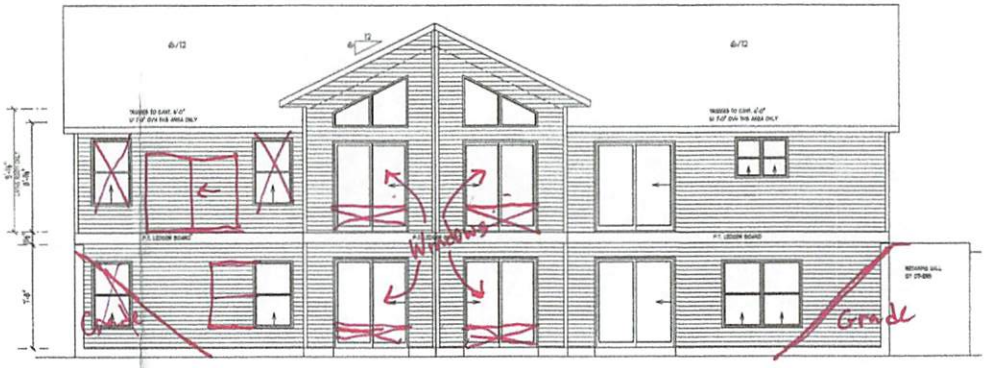
Andy Teal
Surface Water Conservation Specialist
Bayfield County Land & Water Conservation Department

Cc: McKenzie Slack, Bayfield County Planning & Zoning Department
Travis Tulowitzky, Bayfield County Land & Water Conservation Department

	PITCH	OVERHANG	HEEL
FROM FRONT	6/12	24"	7"
	6/12	24"	18"

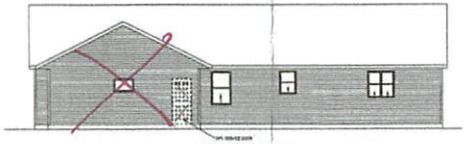


ROOF PLAN
1/8" = 1'-0"

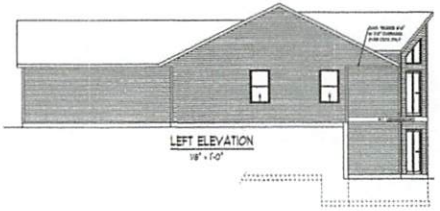


FRONT ELEVATION
1/4" = 1'-0"

RIGHT ELEVATION
1/8" = 1'-0"



REAR ELEVATION
1/8" = 1'-0"



LEFT ELEVATION
1/8" = 1'-0"

THIS PLAN IS THE PROPERTY OF:

Amwood® CUSTOM HOMES
"Your Best Investment"
P.O. Box 35 · Jessville, IN 61547-0351
608-756-2565 Fax 608-756-3443
www.amwoodhomes.com

GENERAL NOTATIONS:
- Although every effort has been made in preparing these plans, and checking them for accuracy, the contractor must check all dimensions and details and must be responsible for same.
- This print and/or set is the property of Amwood Homes, Inc., and use of this print is prohibited without the written consent of Amwood Homes, Inc.
- Amwood Homes, Inc. and/or its dealer shall have construction lien rights for use of their blueprints, drawings, plans and/or specifications.

TITLE: AA LEOPOLD

CODE	BY	DATE	CODE	BY	DATE
Plan / Custom	AM	06-19-11	Processor		
Revision			Revision		
Revision			Revision		
Revision			Foundation		

Cust. No.

F.O. No.

Job No.

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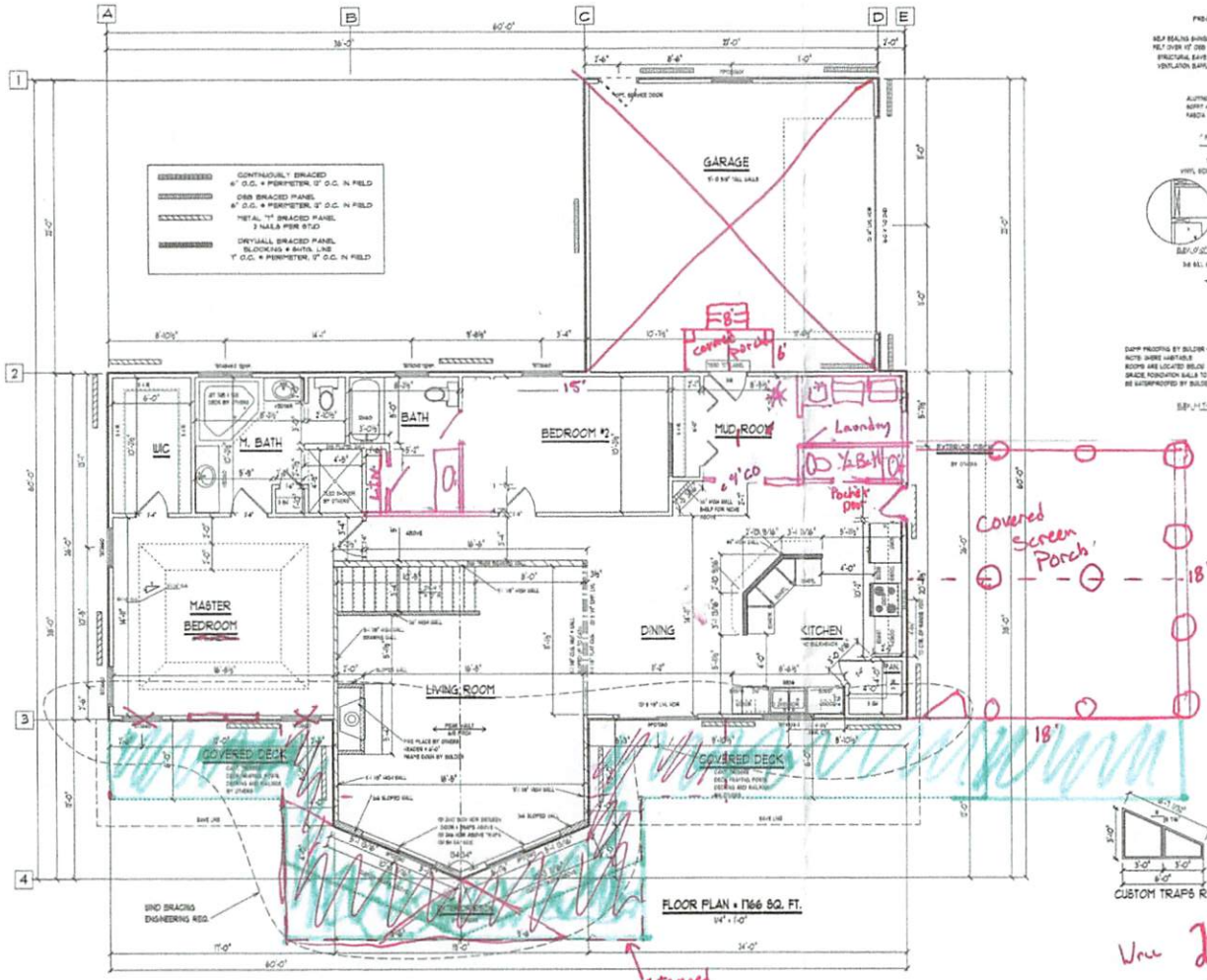
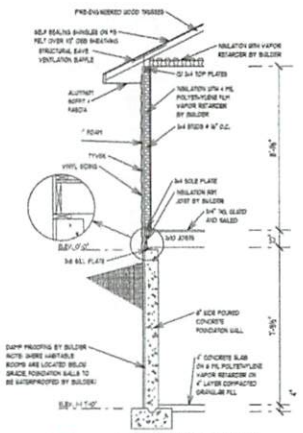


FLOOR PLAN • 1766 SQ. FT.

EXTERIOR DIMENSIONS ARE TO STUD FACE

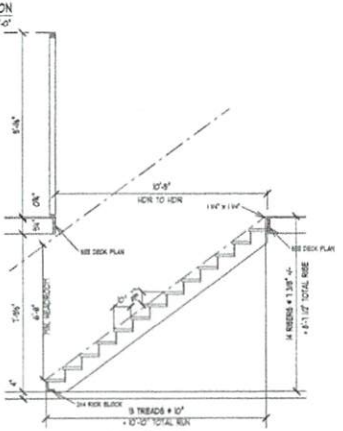


NOTE: CONCRETE FOOTINGS AND SLABS SHALL BE REINFORCED IN ACCORDANCE WITH LOCAL AND / OR STATE BUILDING CODES

NOTE: REGARDLESS OF DETAILS, BOTTOM OF FOOTINGS SHALL BE ON FIRM UNDISTURBED SOIL.

TYPICAL WALL SECTION

CUSTOM TRAPS R.O.



STAIR SECTION

Vrc 200 LF -
208 LF -

244
70
280
550 sq' STAMPED

88e 41'
132e 9'

THIS PLAN IS THE PROPERTY OF:

Amwood CUSTOM HOMES
"Your Dual Screenhouse"
P.O. Box 31 - Jonesville, SC 29353-0031
803-786-2585 Fax: 803-786-3443
www.amwoodhomes.com

GENERAL NOTATIONS:

- Although every effort has been made in preparing these plans and shading sheet for accuracy, the contractor must check all dimensions and details and must be responsible for same.
- This plan and/or set is the property of Amwood Homes, Inc., and use of this plan is prohibited without the written consent of Amwood Homes, Inc.
- Amwood Homes, Inc. and/or its dealer shall have construction lien rights for use of their blueprints, drawings, plans and/or specifications.

TITLE: AS DESIGNED

CODE	BY	DATE	CODE	BY	DATE
Plan / Custom	AM	08/09/11	Processor		
Revision			Revision		
Revision			Revision		
Revision			Foundation		

Cust. No.
P.O. No.
Job No.

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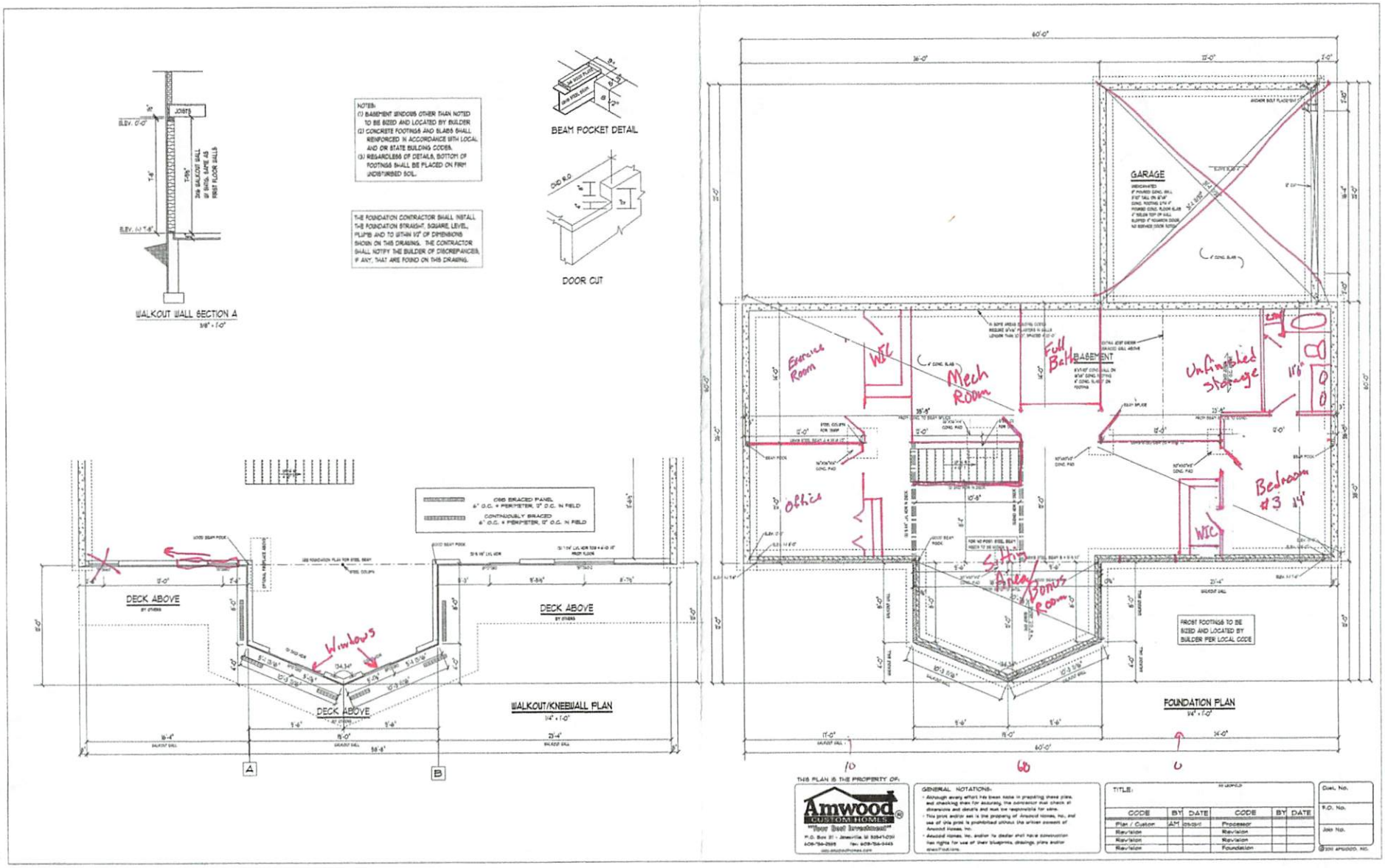


WALKOUT WALL SECTION A
3/8" = 1'-0"
NOTES:
(1) BASEMENT WINDOWS OTHER THAN NOTED TO BE SIZED AND LOCATED BY BUILDER
(2) CONCRETE FOOTINGS AND SLABS SHALL REINFORCED IN ACCORDANCE WITH LOCAL AND OR STATE BUILDING CODES.
(3) REGARDLESS OF DETAILS, BOTTOM OF FOOTINGS SHALL BE PLACED ON FIRM UNDISTURBED SOIL.
THE FOUNDATION CONTRACTOR SHALL INSTALL THE FOUNDATION STRAIGHT, SQUARE, LEVEL, PLUMB AND TO WITHIN 1/2" OF DIMENSIONS SHOWN ON THIS DRAWING. THE CONTRACTOR SHALL NOTIFY THE BUILDER OF DISCREPANCIES, IF ANY, THAT ARE FOUND ON THIS DRAWING.
BEAM POCKET DETAIL
DOOR CUT
GARAGE
BASEMENT
Exercise Room
WIC
Mech Room
Full Bath
Unfinished Storage
Office
Bedroom #3
Sitting Area
Bonus Room
FROST FOOTINGS TO BE SIZED AND LOCATED BY BUILDER PER LOCAL CODE
FOUNDATION PLAN
1/4" = 1'-0"
DECK ABOVE
Windows
WALKOUT/KNEEWALL PLAN
1/4" = 1'-0"
A
B
THIS PLAN IS THE PROPERTY OF:
Amwood CUSTOM HOMES
"Your Best Investment"
GENERAL NOTATIONS:
TITLE:
CODE
BY
DATE
Plan / Custom
AM
Revision
Processor
Foundation
Dwg. No.
F.O. No.
Job No.

DYKSTRA CONSTRUCTION, INC

50181 State Hwy 13
ASHLAND, WI 54806
715-682-9599
715-682-8410Fax
info@dykstraconstructininc.com

January 31, 2022

I, Todd Vernon, give Tim Dykstra, Dykstra Construction, Inc., the authority to sign any documents for permits on our behalf..

Todd Vernon **Date** 2/01/22

Real Estate Bayfield County Property Listing

Today's Date: 9/8/2022

Property Status: Current

Created On: 3/19/2008 9:46:09 AM

Description

Updated: 3/26/2018

Tax ID:	34995
PIN:	04-024-2-47-08-33-1 00-207-39300
Legacy PIN:	
Map ID:	
Municipality:	(024) TOWN OF IRON RIVER
STR:	S33 T47N R08W
Description:	LOT 3 CSM #1563 IN V.9 P.208 (LOCATED IN LOTS 25 & 26 LEDINS SUB IN GOVT LOTS 4 & 5) IN V.1002 P.712
Recorded Acres:	1.000
Calculated Acres:	1.000
Lottery Claims:	0
First Dollar:	Yes
Zoning:	(R-1) Residential-1
ESN:	118

Tax Districts

Updated: 3/19/2008

1	STATE
04	COUNTY
024	TOWN OF IRON RIVER
163297	SCHL-MAPLE
001700	TECHNICAL COLLEGE

Recorded Documents

Updated: 6/2/2009

WARRANTY DEED

Date Recorded: 9/12/2008 **2008R-522834 1002-712**

CERTIFIED SURVEY MAP

Date Recorded: 9/25/2007 2007R-516506 9-207

Ownership

Updated: 3/26/2018

C T D LLC ASHLAND WI

Billing Address:	**Mailing Address:**
C T D LLC	**C T D LLC**
28190 STATE HWY 137	28190 STATE HWY 137
ASHLAND WI 54806	ASHLAND WI 54806

Site Address

* indicates Private Road

9838 TEEPEE TRL IRON RIVER 54847

Property Assessment

Updated: 7/30/2021

2022 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.000	188,100	118,300

2-Year Comparison	2021	2022	Change
Land:	188,100	188,100	0.0%
Improved:	118,300	118,300	0.0%
Total:	306,400	306,400	0.0%

Property History

Parent Properties	Tax ID
04-024-2-47-08-33-1 00-207-39000	20337
04-024-2-47-08-33-1 00-207-40000	20338
04-024-2-47-08-33-1 00-207-41000	20339

HISTORY

Expand All History White=Current Parcels Pink=Retired Parcels

- **Tax ID:** 20339 **Pin:** 04-024-2-47-08-33-1 00-207-41000 **Leg. Pin:** 024112509000
- **Tax ID:** 20338 **Pin:** 04-024-2-47-08-33-1 00-207-40000 **Leg. Pin:** 024112508000
- **Tax ID:** 20337 **Pin:** 04-024-2-47-08-33-1 00-207-39000 **Leg. Pin:** 024112507000

34995 **This Parcel** **Parents** **Children**

paid online $50

BAYFIELD COUNTY
SANITARY PERMIT APPLICATION

RECEIVED

ENTERED 9/19

Zoning District _____

Lakes Class _____

I. APPLICATION INFORMATION (Please Print All Information)

SEP 16 2022

Bayfield Co. Planning and Zoning Agency

Soil Test No: 196-08

County Permit No: 08-1955

Property Owner's Name: CTD LLC

County: Bayfield — Bayfield

Address of Property: 9838 Teepee Trail Iron River WI 54847

Property Location: ¼ ¼, S 33 T 47 N, R 08 E (or) W

Property Owner's Mailing Address: 28190 State Hwy 137

Township: Iron River

Gov. Lot #: 4+5

City, State	Zip Code	Phone Number	Lot #	Block #:	CSM #:	CSM Doc #	Subdivision Name
Ashland WI	54806	—	25+26		1563		

II. TYPE OF BUILDING: (Check One)

- ☐ State Owned
- ☐ Public (Explain the use/purpose _____)
- ☒ 1 or 2 Family Dwelling - No. of Bedrooms 3

Tax ID#: 34995

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***: _____ Date Issued: _____

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)
450	0.7	651	643	—	96 —	98

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	1000	—	1000	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* TODD VERNON

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

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

Plumber's Signature: (No Stamps)

MP/MPRSW No: 699374

Plumber's Address: (Street, City State, Zip Code) 13660 HWY H Iron River, WI. 54847

Home Phone: 715-209-0161

Business Phone: Same

VIII. COUNTY / DEPARTMENT USE ONLY

☒ Approved	☐ Disapproved ☐ Owner Given Initial Adverse Determination	Sanitary Permit/Transfer Fee:	Date Issued:	Issuing Agent's Signature / Date: 9/26/22 1527412

IX. CONDITIONS OF APPROVAL / REASONS FOR DISAPPROVAL:

1.) To be carried out by MP.

Plot Plan on reverse side

Polkoski Plumbing
P.O. Box 522
Iron River, WI 54847
MPRS. # 220090

ID # 04-024-2-47 -08-33-100-
207-39300

Scale: 1" = 40' unless noted!
* = Nail in 18" oak = B.M. & VRP = Elev. 100.0'
System Elev.: 96.0'

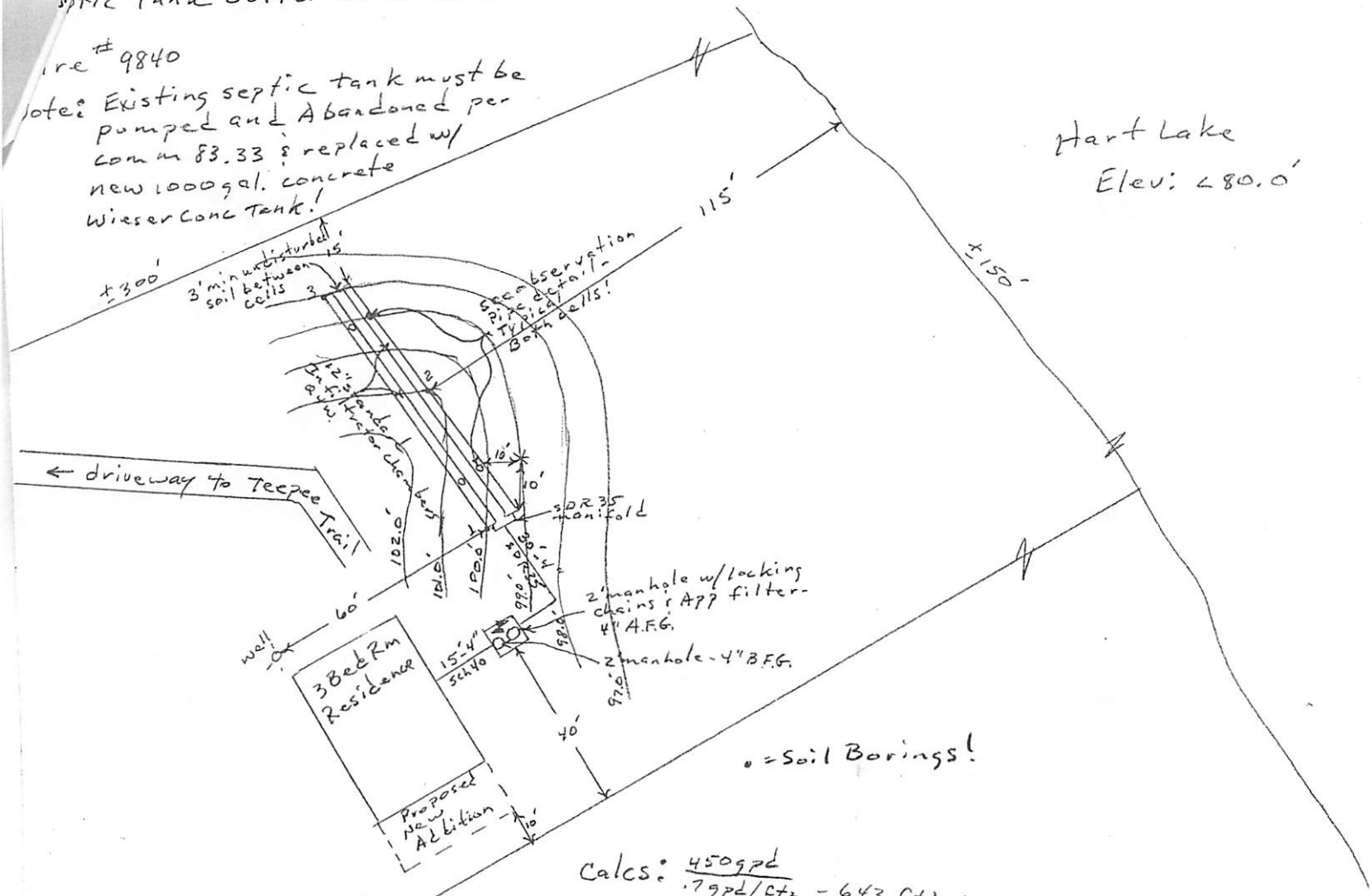
Conventional Soil Absorption Component Manual used: SBD-10567-P (R.6/99)

N

⧗: septic Tank is 1000 gallon wieser concrete - 104" L - 86" W. and 42" from bottom of tank to flow line inlet
Chamber Specs: 34" Width - 48" Length - 12" Height - 8" F.L. manifold to trench bot.
Tank & Infiltrator Quick 4 Standard 12" high leaching Chamber are in compliance with Comm 82-84.
Septic Tank outlet must have state approved filter. - Polylok model # PL-525

Permit # 9840

Note: Existing septic tank must be pumped and Abandoned per comm 83.33 & replaced w/ new 1000 gal. concrete wieser Conc Tank!



Calcs: $\frac{450 gpd}{.7 gpd/ft^2} = 643 ft^2$ design

$\frac{643 ft^2}{20 ft^2/ch} = 32$ ch @ $20 ft^2/ch + 2$ cells ($5.8 ft^2$/pr endcaps) = $651 ft^2$ prop.

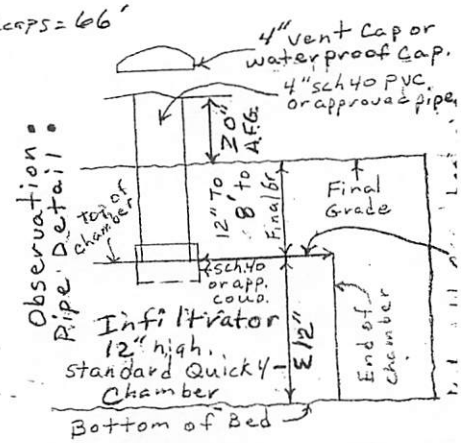
Cell 1 = 16 ch x $20 ft^2/ch = 320 ft^2 + 5.8 ft^2$/pr endcaps = $326 ft^2$

Cell 2 = same as cell 1

Total $651 ft^2$ prop.

Total Length =

Cell 1 & 2 = 16 ch x 4'/ch = 64' + 2'/pr endcaps = 66'



Property Owner:
C.T.D., LLC
27505 Cherryville Rd
Ashland, WI 54806

Legal Description:
Govt Lots # 4 & 5 Sec 33 T47N R8W
Lot # 3 of CSM # 1563
Town of Iron River
Bayfield Co.

Lot Line

Name of Frontage Road (_____)

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

RECEIVED NOV 2 6 2008

ENTERED

commerce.wi.gov
Wisconsin Department of Commerce

Safety and Buildings Division
201 W. Washington Ave., P.O. Box 7162
Madison, WI 53707-7162

RECEIVED DEC 01 2008 Bayfield Co. Zoning Dept.

County: Bayfield

Sanitary Permit Number (to be filled in by Co.): 08-195S

State Transaction Number:

Project Address (if different than mailing address): 9840 Teepee Trail

Parcel #: 04-024-2-47-08-33-100-207-390

Sanitary Permit Application

In accordance with s. Comm. 83.21(2), Wis. Adm. Code, submission of this form to the appropriate governmental unit is required prior to obtaining a sanitary permit. Note: Application forms for state-owned POWTS are submitted to the Department of Commerce. Personal information you provide may be used for secondary purposes in accordance with the Privacy Law, s. 15.04(1)(m), Stats.

196-08

I. Application Information – Please Print All Information

Property Owner's Name: C.T.D., LLC

Property Owner's Mailing Address: 27505 Cherryville Rd

City, State: Ashland, WI | Zip Code: 54806 | Phone Number: 715 682-6646

Property Location: Govt. Lot 4 & 5; ____ ¼, ____ ¼, Section 33 (circle one); T 47 N; R 8 ~~E~~ W

Subdivision Name:

☐ City of ____
☐ Village of ____
☒ Town of Iron River

II. Type of Building (check all that apply)

☒ 1 or 2 Family Dwelling – Number of Bedrooms 3

☐ Public/Commercial – Describe Use ____

☐ State Owned – Describe Use ____

Lot #: 3

Block #:

CSM Number: 1563

III. Type of Permit: (Check only one box on line A. Complete line B if applicable)

A.	☐ New System	☒ Replacement System	☐ Treatment/Holding Tank Replacement Only		☐ Other Modification to Existing System (explain)
B.	☐ Permit Renewal Before Expiration	☐ Permit Revision	☐ Change of Plumber	☐ Permit Transfer to New Owner	List Previous Permit Number and Date Issued

IV. Type of POWTS System/Component/Device: (Check all that apply)

☒ Non-Pressurized In-Ground ☐ Pressurized In-Ground ☐ At-Grade ☐ Mound ≥ 24 in. of suitable soil ☐ Mound < 24 in. of suitable soil

☐ Holding Tank ☐ Other Dispersal Component (explain) ____ ☐ Pretreatment Device (explain) ____

V. Dispersal/Treatment Area Information:

Design Flow (gpd)	Design Soil Application Rate(gpdsf)	Dispersal Area Required (sf)	Dispersal Area Proposed (sf)	System Elevation
450	.7	643	651	96.0'

VI. Tank Info

	Capacity in Gallons: New Tanks	Capacity in Gallons: Existing Tanks	Total Gallons	# of Units	Manufacturer	Prefab Concrete	Site Constructed	Steel	Fiber Glass	Plastic
Septic ~~or Holding~~ Tank	1000	–	1000	1	Wieser Concrete	✓				
~~Dosing Chamber~~										

VII. Responsibility Statement- I, the undersigned, assume responsibility for installation of the POWTS shown on the attached plans.

Plumber's Name (Print)	Plumber's Signature	~~MP~~/MPRS Number	Business Phone Number
Allan Polkoski	[signature]	220090	715 372-4156

Plumber's Address (Street, City, State, Zip Code): P.O. Box 522 Iron River, WI 54847

VIII. County/Department Use Only

☒ Approved	☐ Disapproved	Permit Fee	Date Issued	Issuing Agent Signature
11/26/08	☐ Owner Given Reason for Denial	$ 12/1/08 $250 mg	12/1/08	[signature]

IX. Conditions of Approval/Reasons for Disapproval

RECEIVED DEC 01 2008 Bayfield Co. Zoning Dept.

Attach to complete plans for the system and submit to the County only on paper not less than 8 1/2 x 11 inches in size

SBD-6398 (R. 01/07) Valid thru 01/09

Real Estate Bayfield County Property Listing

Today's Date: 9/13/2022

Property Status: Current

Created On: 3/19/2008 9:46:09 AM

Description

Updated: 3/26/2018

Tax ID:	34995
PIN:	04-024-2-47-08-33-1 00-207-39300
Legacy PIN:	
Map ID:	
Municipality:	(024) TOWN OF IRON RIVER
STR:	S33 T47N R08W
Description:	LOT 3 CSM #1563 IN V.9 P.208 (LOCATED IN LOTS 25 & 26 LEDINS SUB IN GOVT LOTS 4 & 5) IN V.1002 P.712
Recorded Acres:	1.000
Calculated Acres:	1.000
Lottery Claims:	0
First Dollar:	Yes
Zoning:	(R-1) Residential-1
ESN:	118

Tax Districts

Updated: 3/19/2008

1	STATE
04	COUNTY
024	TOWN OF IRON RIVER
163297	SCHL-MAPLE
001700	TECHNICAL COLLEGE

Recorded Documents

Updated: 6/2/2009

WARRANTY DEED

Date Recorded: 9/12/2008 **2008R-522834 1002-712**

CERTIFIED SURVEY MAP

Date Recorded: 9/25/2007 2007R-516506 9-207

Ownership

Updated: 3/26/2018

C T D LLC ASHLAND WI

Billing Address:	**Mailing Address:**
C T D LLC	**C T D LLC**
28190 STATE HWY 137	28190 STATE HWY 137
ASHLAND WI 54806	ASHLAND WI 54806

Site Address

* indicates Private Road

9838 TEEPEE TRL IRON RIVER 54847

Property Assessment

Updated: 7/30/2021

2022 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.000	188,100	118,300

2-Year Comparison	2021	2022	Change
Land:	188,100	188,100	0.0%
Improved:	118,300	118,300	0.0%
Total:	306,400	306,400	0.0%

Property History

Parent Properties	Tax ID
04-024-2-47-08-33-1 00-207-39000	20337
04-024-2-47-08-33-1 00-207-40000	20338
04-024-2-47-08-33-1 00-207-41000	20339

HISTORY

Expand All History White=Current Parcels Pink=Retired Parcels

Tax ID: 20339 **Pin:** 04-024-2-47-08-33-1 00-207-41000 **Leg. Pin:** 024112509000
Tax ID: 20338 **Pin:** 04-024-2-47-08-33-1 00-207-40000 **Leg. Pin:** 024112508000
Tax ID: 20337 **Pin:** 04-024-2-47-08-33-1 00-207-39000 **Leg. Pin:** 024112507000

34995 **This Parcel** **Parents** **Children**

Town, City, Village, State or Federal Permits May Also Be Required
SHORELAND / WETLANDS / IMPERVIOUS SURFACE
LAND USE – **X**
SANITARY – **Reconnect (#08-195S)**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. **22-0284** Tax ID: **34995** Issued To: **CTD LLC**

Location: ¼ of ¼ Section **33** Township **47** N. Range **8** W. Town of **Iron River**

Doc 2008R-522834
Gov't Lot Lot **3** Block Subdivision CSM# **1563**
In V. 9 P. 208

Residential Structure in R-1 zoning district
For: **[1-Story], Residence on a Basement (60' x 32'); Deck (60' x 8'); Porch (18' x 18'); Porch #2 (6'x 8') = 2,772 sq. ft.] at a Height of 26' 1 ½"**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Meet and maintain setbacks including eaves & overhangs. To be constructed per plan. Adhere to treated impervious surface plan. Town/State/DNR permits may be required. A Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

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.

Mckenzie Slack, AZA
Authorized Issuing Official

October 12, 2022
Date