

Town of Russell

35900 State Highway 13
Bayfield, Wisconsin 54814
(715) 779-5338

E-mail townofrussell@centurytel.net

Website www.townofrussell.org

Brian Goodwin
Chair

Judy Meierotto
Deputy Clerk/Treasurer

Dave Good
Clerk/Treasurer

PLAN COMMISSION MEETING **6:00 p.m. – Tuesday, April 14, 2015** **Community Center – 32500 W Old County K**

Any person wishing to attend who, because of a disability, requires special accommodations, should contact the Town Clerk at 715 779-5338, at least 24 hours before the scheduled meeting time, so appropriate arrangements can be made.

1. Call to order and roll call.
2. Pledge of Allegiance.
3. Set Agenda for Public Input now or at the end of the agenda (3 minute limit per person-15 minutes maximum).
4. Approval of the Plan Commission meeting minutes of March 3, 2015****.

NEW BUSINESS

5. Update on potential development by Curt Basina on parcel of land south of Buffalo Bay Store (Will be presented at Town Board Meeting following PC Meeting)
6. Recommendation to Town Board regarding recommendation to Bayfield County Planning and Zoning regarding request by Brent & Angela Soday to construct a home on 40-acres of land zoned F-1 on Lamont Road described as the SW ¼ SE ¼ Section 19 T51N R4W****.
7. Recommendation to Town Board regarding recommendation to Bayfield County Planning and Zoning regarding request by Craig & Sharon Locey to operate a Short Term Rental at 38085 Pageant Road****.
8. Discussion regarding Bayfield County Zoning Committee decision regarding Bolder Point LLC in conflict with Town or Russell recommendations****.

OLD BUSINESS

9. Schedule Joint Plan Commission – Town Board Meeting with Bayfield County Zoning to review proposed revisions to Alternative Development Zoning Overlay District language (Zoning available May 12, 2014).

OLD BUSINESS

10. Items for next meeting.
11. Next meeting date, time and location – 1st Tuesday is May 5, 2015. Joint meeting with Town Board on May 12th?
12. Adjourn.

The Commission and Town Board reserves the right to take action on any agenda item. **** indicates items attached.

Posted Wednesday, April 8, 2015 at noon. Revised and re-posted on April 13, 2015 at 4 p.m.

Dave Good–Clerk/Treasurer

Joint Special Town Board – Plan Commission Meeting – March 3, 2015

Posted February 27, 2015 at 4:00 p.m. at the Town Garage, Buffalo Bay Store, Peterson's Foods and Red Cliff Tribal Administration Center. Copies sent to The Ashland Daily Press and Bayfield County Journal.

Approximately 7 Town Electors and members of the public were present.

The Special Town Board Meeting was called to order by Chairman Brian Goodwin at 6:02 p.m. at the Town of Russell Community Center. Roll call was taken as follows; present Supervisors Larry Meierotto, Don Sullivan, Paul “Rocky” Tribovich and Clerk/Treasurer David L. Good. Supervisor Jeff Benton was excused.

The Plan Commission Meeting was called to order by Chairman, Larry Meierotto at 6:03 p.m. Roll call was taken as follows; Commissioners Ann Bowker and Kathy Wendling were present. Commissioners Tessa Levens and Jeff Benton were excused.

The Pledge of Allegiance was recited by those present.

PUBLIC INPUT – Goodwin asked the public if input should be held now or at the end of the meeting. A show of hands was taken. Public input was at the beginning of the meeting.

Mark Wendling spoke regarding the non-metallic mine request and supported the request based on its location and proximity to neighbors. He supported changing the Alternative Development requirement to become effective at 10-acres versus the current 20-acres. He asked the Town support the original plans BRC submitted to the USFS and WI DNR for parking lots and access boardwalks to the North Pikes Creek Wetlands Community Forest. Wayne Nelson spoke regarding the proposed Alternative Development change being detrimental to his prior developments. Jena Erickson spoke in favor of non-metallic mines and how they benefit a community and its residents and supported the Bolder Point request

APPROVAL OF MINUTES

A motion was made by Wendling and seconded by Bowker to approve the minutes of the Plan Commission Meeting of February 3, 2015. Discussion followed. The motion carried.

PC recommendation as it relates to the Comprehensive Plan to the Town Board regarding request by Bolder Point LLC to operate a non-metallic mine that will include storage of materials, crushing, and temporary hot mix and/or concrete plant in the SW ¼ of SE ¼ Section 26, T51N, R4W and possible action by Town Board regarding Town Board Recommendation to Bayfield County Planning and Zoning – Clerk Good provided copies of the access easement off State Highway 13 to the site. Craig Haukaas, agent, spoke briefly about the project and stressed the amount of investment required for this project in terms of its working life which is anticipated to be 50 years. The developers would like and need a 50 year commitment to make this project viable. Discussion followed about adjacent property owners and their notification of this project, access road to the site, general questions about WI DNR permits and site development. A motion was made by Wendling and seconded by Bowker to recommend approval to the Town Board for a term of 10 years and that access be to State Highway 13. Discussion followed about the motion. Wendling revised the motion to recommend 25 year permit with renewal for another 25 years upon review and added conditions of no crushing on Sundays and Holidays. Bowker agreed to the modifications. The motion carried.

A motion was made by Tribovich and seconded by Meierotto to recommend approval of the Bolder Point LLC non-metallic mine TBA as the Plan Commission recommended.

A motion was made by Tribovich and seconded by Sullivan to suspend Roberts Rules. The motion carried. Haukaas again stressed the need for a 50 year permit. Discussion followed about the renewal criteria, need for gravel in the area for the long term, and benefits to the community. A motion was made by Tribovich and seconded by Meierotto to return to regular session. The motion carried. Tribovich modified the motion as follows; to recommend the Bolder Point LLC application for a Conditional Use Permit for a non-metallic mine operation that includes the storage of materials, crushing and a temporary hot mix and/or concrete plant be approved as presented for 25 years of operation with a provision that an additional renewal of 25 years be allowed based on the reasons afforded in the initial 25 year permit and applicable rules in place at the time of renewal. Conditions specifically required for this recommendation of approval are as follows: All access to the site for operations of a non-metallic mine and transport of materials from the site will be from the site to State Highway 13. No crushing operations will be performed on Sundays and Federal Holidays. The motion carried.

Bayfield County process to update County Comprehensive Plan and request for input and contact – Discussion followed regarding the request. Wendling stated the County will be adopting the updates at the end of 2015 and will take similar action every year forward. The Plan Commission is working on amending the Town Comprehensive Plan. No action is required at this time.

Bayfield County Forestry and Parks request for input to the Bayfield County Local Comprehensive Outdoor Recreation Plan – Wendling stated the plan needs to be updated for the LSB Recreation Area and the North Pikes Creek Wetlands and Community Forest added. Clerk Good stated that the North Pikes Creek project is not a Town project. Discussion followed about adding the Shooting Range and possibly the Community Center. The Clerk was directed to update the information and bring it to the Town Board for review on March 10, 2015.

NPS request for input to Little Sand Bay Visitor Center Replacement Project; informational meeting March 5, 2015 – Discussion was held regarding the request. A motion was made by Meierotto and seconded by Sullivan to suspend Roberts Rules. The motion carried. Discussion with Rob Halvorson was held on the past history and activity at Little Sand Bay. His great grandfather Martin Halvorson settled in Little Sand Bay. This was a log staging area and a cook shack/camp was here in the early days. The Halvorsons built the first dock. The NPS did not honor the Halvorsons or Hermie Johnson as they did the Hokensons. Rob felt the NPS condemning his family's 40-acres at LSB contributed to his dad's stroke and death. The NPS has done more to destroy history than to preserve it. A motion was made by Tribovich and seconded by Sullivan to return to regular session. The motion carried. Discussion continued. A motion was made by Tribovich and seconded by Sullivan that the Clerk prepare comments to the NPS for the Town Boards review on March 10. The motion carried.

OLD BUSINESS

Discussion with Town Board and possible recommendations regarding Alternative Development Zoning Overlay District language – Tribovich discussed the history to the Alternative Development. Discussion followed about the proposed change from 20-acres to 10-acres to require an Alternative Development. Discussion followed. A motion was made by Tribovich and seconded by Sullivan to change the Alternative Development requirement to 10-acre parcels and have another joint meeting with the Plan Commission and the Bayfield County Planning and Zoning Administrator to review the proposed change and discuss other potential impacts to the ordinance. The motion carried.

Develop guidelines for Monuments of Recognition within the Town – Discussion followed about the Smith family request and recent action by the Plan Commission requesting a proposal in writing and the need to develop guidelines. Tribovich stated the Board will be addressing this at the March 10 meeting and asked for consensus of the Plan Commission that a wooden bench similar to the two benches

currently by the beach area be approved for the Bill Smith Memorial. The Plan Commission agreed. The Plan Commission will continue work on the guidelines.

Communication from Bayfield Regional Conservancy regarding the development of a Master Plan for the North Pikes Creek Wetland Community Forest – A motion was made by Tribovich and seconded by Sullivan to receive and place on file. The motion carried.

USFS and WI DNR approved Management Plans for the North Pikes Creek Wetland Community Forest discrepancies with Town of Russell Comprehensive Plan – A motion was made by Tribovich and seconded by Meierotto to notify the BRC and copy the USFS and WI DNR of the references in the Management Plans that are inconsistent with the Town Comprehensive Plan. The motion carried. Wending discussed the inconsistencies further.

Town Board resolution WI Dept. of Revenue opposing the transfer of annual assessment process to counties – A motion was made by Tribovich and seconded by Sullivan to adopt the attached resolution and to send copies to our legislators and the Joint Finance Committee members, the Town Assessor and Wisconsin Towns Association.

TOWN OF RUSSELL

Bayfield County, Wisconsin

Resolution 03 - 2015

Opposing Transfer of the Property Assessment Process to the County

WHEREAS, the Wisconsin Department of Revenue (DOR) proposes to change from municipal assessment to county assessment that requires 100% assessment of every property every year; and,

WHEREAS, this proposal will cause an unfathomable waste of taxpayer dollars through extraordinary cost increases; and,

WHEREAS, citizens will only be able to access a few Board of Review proceedings throughout an entire county, which significantly decreases the ability of local knowledge to create accuracy in the assessment process; and,

WHEREAS, towns, cities, and villages are no longer in control of their own costs because the county will just send them a bill; and,

WHEREAS, the proposal is an unprecedented intrusion into local government by requiring the state to suggest a salary range for their assessment director and work with the county to set a county budget and number of employees; and,

WHEREAS, the DOR has cited assessor problems as part of their rationale, but has never revoked an assessor license despite having the authority; and,

WHEREAS, over the last five years the DOR has already required additional work and detailed information from assessors to improve the process; and,

WHEREAS, this proposals kills private sector jobs and grows public sector jobs; and,

WHEREAS, the DOR cites that Wisconsin is one of few states that has municipal assessment, but forgets to note the strong leadership of Wisconsin citizens, our state’s dedication to local input, and the simple lack of town government in many states;

NOW THEREFORE BE IT RESOLVED, that the Town Board of the Town of Russell, Bayfield County does hereby oppose the implementation of county assessment in Wisconsin and asks for the proposal to be removed from the budget; and,

BE IT FURHTER RESOLVED, that Towns are and have always been willing to work with the State of Wisconsin, fellow local government groups, and other stakeholders to continually improve the assessment process.

Adopted this 3rd day of February in the year 2015.

Brian Goodwin, Chair

Jeff Benton, Supervisor

Larry Meierotto, Supervisor

Don Sullivan, Supervisor

Paul Tribovich, Supervisor

THIS IS TO CERTIFY THAT the foregoing is a true and correct copy of a resolution duly and legally adopted by the TOWN OF Russell at a Regular Town Board Meeting held the 3rd day of February in the year 2015.

Attested by: _____

David L. Good, Clerk/Treasurer

Agenda items for next Town Board Meeting scheduled for 7 p.m. on March 10, 2015 at the Community Center. None.

A motion to adjourn the Town Board Meeting at 7:53 p.m. was made by Tribovich and seconded by Sullivan. The motion carried. The next Plan Commission meeting will be at 6 p.m. on April 14, 2015 at the Community Center prior to the Town Board Meeting. A motion to adjourn the Plan Commission Meeting at 7:56 p.m. was made by Bowker and seconded by Wendling. The motion carried.

The minutes respectfully submitted by:

David L. Good – Clerk/Treasurer

TOWN BOARD RECOMMENDATION -- (CLASS A)

When **Town Board** has completed this form, please mail to:

Bayfield County Planning and Zoning Department
P.O. Box 58 – Washburn, WI 54891
Phone – (715) 373-6138 www.bayfieldcounty.org/zoning/asp
Fax – (715) 373-0114
e-mail: zoning@bayfieldcounty.org

Date Zoning Received: (Stamp Here)

Property Owner(s) is /are responsible to give this form to the Town Planning Commission and the Town Clerk. Note: Planning Commission meets prior to the Town. This is a **Class A** special use request. [Attach a copy of your application-front and back]. The Town will forward their recommendation to the Planning and Zoning Department.

Property Owner Craig T & Sharon K. Locey Contractor NA
Property Address 38085 Pageant Road Authorized Agent NA
Bayfield, WI 54814 Agent's Telephone NA
Telephone 715-779-5757 Written Authorization Attached: NA Yes () No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)
NE 1/4 of NW 1/4, Section 29, Township 51 N., Range 3 W. Town of Russell
Govt. Lot 1 Lot 6d7 Block _____ Subdivision Cliff Pointe CSM# _____
Volume _____ Page _____ of Deeds Parcel I.D.# 04-046-2-5103-29-200-1514⁰⁰⁰⁰ Acreage 4.5

Additional Legal Description: _____

Applicant: (State what you are asking for) Short term rental permit Zoning District: RRB

We, the Town Board, TOWN OF _____, do hereby recommend to

Table Approval Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: This question applies to Zoning Committee Applications only; it does not apply to Board of Adjustment Applications Yes No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:

1. The Tabled, Approval or Disapproval box checked
2. The Town's reasoning for the tabling, approval or disapproval
3. The form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Signed:

Chairman: _____

Supervisor: _____

Supervisor: _____

Clerk: _____

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)

Permit #:	
Date:	
Amount Paid:	
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.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

TYPE OF PERMIT REQUESTED →		<input type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input checked="" type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: <i>Craig T. & Sharon K. Locey</i>		Mailing Address: <i>P.O. Box 1007</i>		City/State/Zip: <i>Bayfield, WI. 54814</i>		Telephone: <i>715-779-5757</i>		
Address of Property: <i>38085 Pageant Road</i>		City/State/Zip: <i>Bayfield, WI. 54814</i>		Cell Phone:				
Contractor: <i>NA</i>		Contractor Phone: <i>NA</i>		Plumber: <i>NA</i>		Plumber Phone: <i>NA</i>		
Authorized Agent: (Person Signing Application on behalf of Owner(s)) <i>NA</i>		Agent Phone: <i>NA</i>		Agent Mailing Address (include City/State/Zip): <i>NA</i>		Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>NA</i>		
PROJECT LOCATION	Legal Description: (Use Tax Statement)	PIN: (23 digits) <i>04-046-2-51-03-29-200</i>		Recorded Document: (i.e. Property Ownership)		Volume _____ Page(s) _____		
<i>NE 1/4, NW 1/4</i>	Gov't Lot <i>1</i>	Lot(s) <i>6A1</i>	CSM	Vol & Page <i>157</i>	Lot(s) No. <i>100000</i>	Subdivision: <i>Cliff Pointe</i>		
Section <i>29</i> , Township <i>51</i> N, Range <i>3</i> W		Town of: <i>Russell</i>		Lot Size		Acreage <i>4.5</i>		

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes--continue →	Distance Structure is from Shoreline : <i>85</i> feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$ _____	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <i>Holding Tank</i>	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 100 gal)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
	<input checked="" type="checkbox"/> Short Term Rental	<input type="checkbox"/> Foundation	<input type="checkbox"/> _____	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____	<input type="checkbox"/> None

Existing Structure: (if permit being applied for is relevant to it)	Length: <i>NA</i>	Width: <i>NA</i>	Height: <i>NA</i>
Proposed Construction:	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2 nd) Porch	(X)	
		with a Deck	(X)	
<input type="checkbox"/> Commercial Use		with (2 nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____	(X)	
		<input checked="" type="checkbox"/> Special Use: (explain) <i>Short Term Rental</i>	(X)	
	<input type="checkbox"/> Conditional Use: (explain) _____	(X)		
	<input type="checkbox"/> 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): *Craig J. Locey & Sharon K. Locey*
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date *4/7/15*

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

Date _____

Address to send permit *P.O. Box 1007 Bayfield, WI. 54814*

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

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

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

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(* Driveway and (* Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)**
- (6) Show any (*): **(* Lake; (* River; (* Stream/Creek; or (* Pond**
- (7) Show any (*): **(* Wetlands; or (* Slopes over 20%**

See attached sheet.

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	NA Feet	Setback from the Lake (ordinary high-water mark)	85 Feet
Setback from the Established Right-of-Way	NA Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	300+ Feet		
Setback from the South Lot Line	82 Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	300+ Feet	Setback from 20% Slope Area	NA Feet
Setback from the East Lot Line	85 Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	57 Feet	Setback to Well	19' Feet
Setback to Drain Field	NA Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #:		Permit Date:		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) _____ <input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) _____ <input type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	Was Property Surveyed	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	
Inspection Record:		Zoning District ()		
		Lakes Classification ()		
Date of Inspection:	Inspected by:	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.)				
Signature of Inspector:				Date of Approval:
Hold For Sanitary: <input type="checkbox"/> _____	Hold For TBA: <input type="checkbox"/> _____	Hold For Affidavit: <input type="checkbox"/> _____	Hold For Fees: <input type="checkbox"/> _____	<input type="checkbox"/> _____

3
3.1 AC±

640±'

4
2.3 AC±

530'

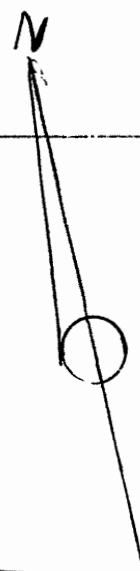
5
1.6 AC±

6
2.2 AC±

Private Drive

Looney's

Lake Superior



OUTLOT 1

1.2 AC±

2.0 AC±

Sheds

Residence

M±13

H T's

220±'

57'

87'

85'

163±'

240±'

10'

1c

520±'

150±'

90±'

210±'

200±'

330±'

250±'

200±'

200±'

260±'

TOWN OF RUSSELL TREASURER

DAVID L GOOD
94500 N LADD ST

BAYFIELD WI 54814
Phone: (715) 779-5338
E-Mail: townofrussell@centurytel.net

**STATE OF WISCONSIN - BAYFIELD COUNTY
REAL ESTATE PROPERTY TAX BILL FOR 2014**

CRAIG T & SHARON K LOCEY
TOWN OF RUSSELL

PAYMENTS ONLY should reference: **Tax ID:** 29984
DOCUMENT RECORDING, or anything else should reference:
PIN: 04-046-2-51-03-29-2 00-151-40000
Alternate/Legacy ID: 046-1104-01 006
Ownership: CRAIG T & SHARON K LOCEY

CRAIG T & SHARON K LOCEY
PO BOX 1007
BAYFIELD WI 54814

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

Property Description / Location of Property
Site Address: 38300 ROBIN RUN RD
Description: CLIFF POINTE SUBDIVISION IN GOVT LOT 1 SEC. 29-51-3 LOT 6 & 7

Please include self-addressed, stamped envelope for return receipt.
Please inform your treasurer of any billing address changes.

Acreage: 4.500
Document: 483-111

Assessed Value			Average Assessment Ratio	Net Assessed Value Rate (Does NOT reflect lottery or first dollar credit) 0.015565564	Real Estate Tax: 7,090.11 First Dollar Credit: -63.51 Lottery Credit: -107.48 Net Real Estate Tax: 6,919.12 Total Due: 6,919.12	
<u>Land</u>	<u>Improved</u>	<u>Total</u>				
\$171,600	\$283,900	\$455,500	0.99790			
Estimated Fair Market Value			An "X" means unpaid prior year taxes. <input type="checkbox"/>	School taxes reduced by school levy tax credit. \$729.39	For full payment pay to TOWN OF RUSSELL treasurer by January 31, 2015 Warning If not paid by due dates, installment option is lost and total tax is delinquent and subject to interest and if applicable, penalty. (See reverse)	
<u>Land</u>	<u>Improved</u>	<u>Total</u>				
\$172,000	\$284,500	\$456,500				
Estimated State Aids						
Taxing Jurisdiction	Allocated Tax District		Net Tax			% Tax Change
	2013	2014	2013	2014		
STATE	0	0	78.69	77.47		-1.6
COUNTY	8,713	8,938	1,760.83	1,775.86		0.9
TOWN OF RUSSELL	168,749	170,939	1,406.43	1,340.30		-4.7
SCHL-BAYFIELD	58,238	57,134	3,810.75	3,731.16		-2.1
TECHNICAL COLLEGE	3,122	2,826	581.03	165.32	-71.5	
Totals	238,822	239,837	7,637.73	7,090.11	-7.2	
First Dollar Credit			62.75	63.51	1.2	
Lottery & Gaming Credit			106.88	107.48	0.6	
Net Property Tax			7,468.10	6,919.12	-7.4	

TOWN BOARD RECOMMENDATION - - (CLASS A)

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department
P.O. Box 58 – Washburn, WI 54891
Phone – (715) 373-6138 www.bayfieldcounty.org/zoning/asp
Fax – (715) 373-0114
e-mail: zoning@bayfieldcounty.org

Date Zoning Received: (Stamp Here)

Property Owner(s) is /are responsible to give this form to the Town Planning Commission and the Town Clerk. Note: Planning Commission meets prior to the Town. This is a **Class A** special use request. [Attach a copy of your application-front and back]. The Town will forward their recommendation to the Planning and Zoning Department.

Property Owner Brent Sordary + Angela Contractor Steve Estola / Ted Kraml is
Property Address Lamont Road Authorized Agent Rocky Tribonick
SW 40 Agent's Telephone 715-779-5546
Telephone 618-540-9862 Written Authorization Attached: Yes No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)

SW 1/4 of SE 1/4, Section 19, Township 51 N., Range 04 W. Town of Russell

Govt. Lot _____ Lot _____ Block _____ Subdivision _____ CSM# _____

Volume _____ Page _____ of Deeds Parcel I.D.# 29198 Acreage 40

Additional Legal Description: _____

Applicant: (State what you are asking for) Drive way and Home site for permanent residence Zoning District: F1

We, the Town Board, TOWN OF _____, do hereby recommend to

Table Approval Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: This question applies to Zoning Committee Applications only; it does not apply to Board of Adjustment Applications Yes No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:

1. The Tabled, Approval or Disapproval box checked
2. The Town's reasoning for the tabling, approval or disapproval
3. The form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Revised: January 2013

Signed:

Chairman: _____

Supervisor: _____

Supervisor: _____

Clerk: _____

Date: _____

I authorize Rocky Tr. bouch to be the Authorized Agent for this project.

Brent A. Sunday Brent A Sunday 2 Apr 15

Angela J. Sunday Angela Sunday 2 Apr 15.

04046251041930100030000

04046251041940200010000

04046251041940100010000

04046251041930100040000

04046251041940100017000

04046251041930300010000

04046251041940400010000

04046251041930300021000

Russell

04046251041940400020000

04046251041940300010000

04046251041930300030000

04046251041940400030000

04046251041930400020000

LAWMONT RD

04046251043020100010000

04046251043010100010000

040462510430300010000

040462510430300010000

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)

Permit #:	
Date:	
Amount Paid:	
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: <i>Brent Sondag</i>	Mailing Address: <i>189 N POW Mth ADR</i>	City/State/Zip: <i>Scott AFB, IL 62225</i>	Telephone: <i>618-540-9862</i>
Address of Property: <i>S/W 40 Lamont Road</i>	City/State/Zip: <i>Russell Township / WI 62225</i>	Cell Phone: <i>719-213-0680</i>	
Contractor: <i>Steve Estabate</i>	Contractor Phone: <i>715-746-2574</i>	Plumber: <i>One Guy Plumbing</i>	Plumber Phone: <i>715-779-5081</i>
Authorized Agent: (Person Signing Application on behalf of Owner(s)) <i>Rocky Tybovich</i>	Agent Phone: <i>715-779-5586</i>	Agent Mailing Address (include City/State/Zip): <i>93600 Little Sand Bay Rd, Bayfield 54814</i>	Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
PROJECT LOCATION <i>SW 1/4, SE 1/4</i>	Legal Description: (Use Tax Statement) <i>04-046-2-51-04-19-4 0300-10,000</i>	Recorded Document: (i.e. Property Ownership) Volume _____ Page(s) _____	
Section <i>19</i> , Township <i>51</i> N, Range <i>04</i> W	Town of: <i>Russell</i>	Lot Size	Acreage <i>40</i>

<input checked="" type="checkbox"/> Shoreland →	<input checked="" type="checkbox"/> 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 : <i>100</i> feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input type="checkbox"/> 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
\$	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input checked="" type="checkbox"/> Basement		<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement		<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____	<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
	<input type="checkbox"/> _____			<input checked="" type="checkbox"/> None		

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

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	<i>(38 X 35)</i>	<i>1540</i>
	<input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	(X)	
	with Loft	(X)	
	with a Porch	<i>(30 X 8)</i>	<i>220</i>
	with (2 nd) Porch	(X)	
	with a Deck <i>bedroom</i>	<i>(16 X 12)</i>	<i>180</i>
<input type="checkbox"/> Commercial Use	with (2 nd) Deck <i>attached breezeway</i>	<i>(14 X 11)</i>	<i>240</i>
	<input checked="" type="checkbox"/> with Attached Garage	<i>(24 X 32)</i>	<i>900</i>
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/> Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/> Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/> Accessory Building (specify) _____	(X)	

Authorized Agent: (Person Signing Application on behalf of Owner(s)) **Rocky Tribovich** Agent Phone: **715-779-5586** Agent Mailing Address (include City/State/Zip): **93600 LITTLE SAND BAY RD BAYFIELD 54819** Written Authorization Attached Yes No

PROJECT LOCATION: **SW 1/4, SE 1/4** Legal Description: (Use Tax Statement) **04-046-2-51-04-19-4 030-10,000** PIN: (23 digits) **04-046-2-51-04-19-4 030-10,000** Recorded Document: (i.e. Property Ownership) Volume _____ Page(s) _____

Gov't Lot _____ Lot(s) _____ CSM _____ Vol & Page _____ Lot(s) No. _____ Block(s) No. _____ Subdivision: _____

Section **19**, Township **51** N, Range **04** W Town of: **Russell** Lot Size _____ Acreage **40**

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: **100** 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 Yes No

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
\$ _____	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input checked="" type="checkbox"/> Basement		<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement		<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____	<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
				<input checked="" type="checkbox"/> None		

Existing Structure: (if permit being applied for is relevant to it) Length: _____ Width: _____ Height: _____

Proposed Construction: Length: _____ Width: _____ Height: _____

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	(38 X 35)	1540
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(30 X 8)	220
		with (2 nd) Porch	(X)	
		with a Deck bedroom	(16 X 12)	180
<input type="checkbox"/> Commercial Use		with (2 nd) Deck attached breezeway	(14 X 11)	240
	<input checked="" type="checkbox"/>	with Attached Garage	(24 X 32)	900
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	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.

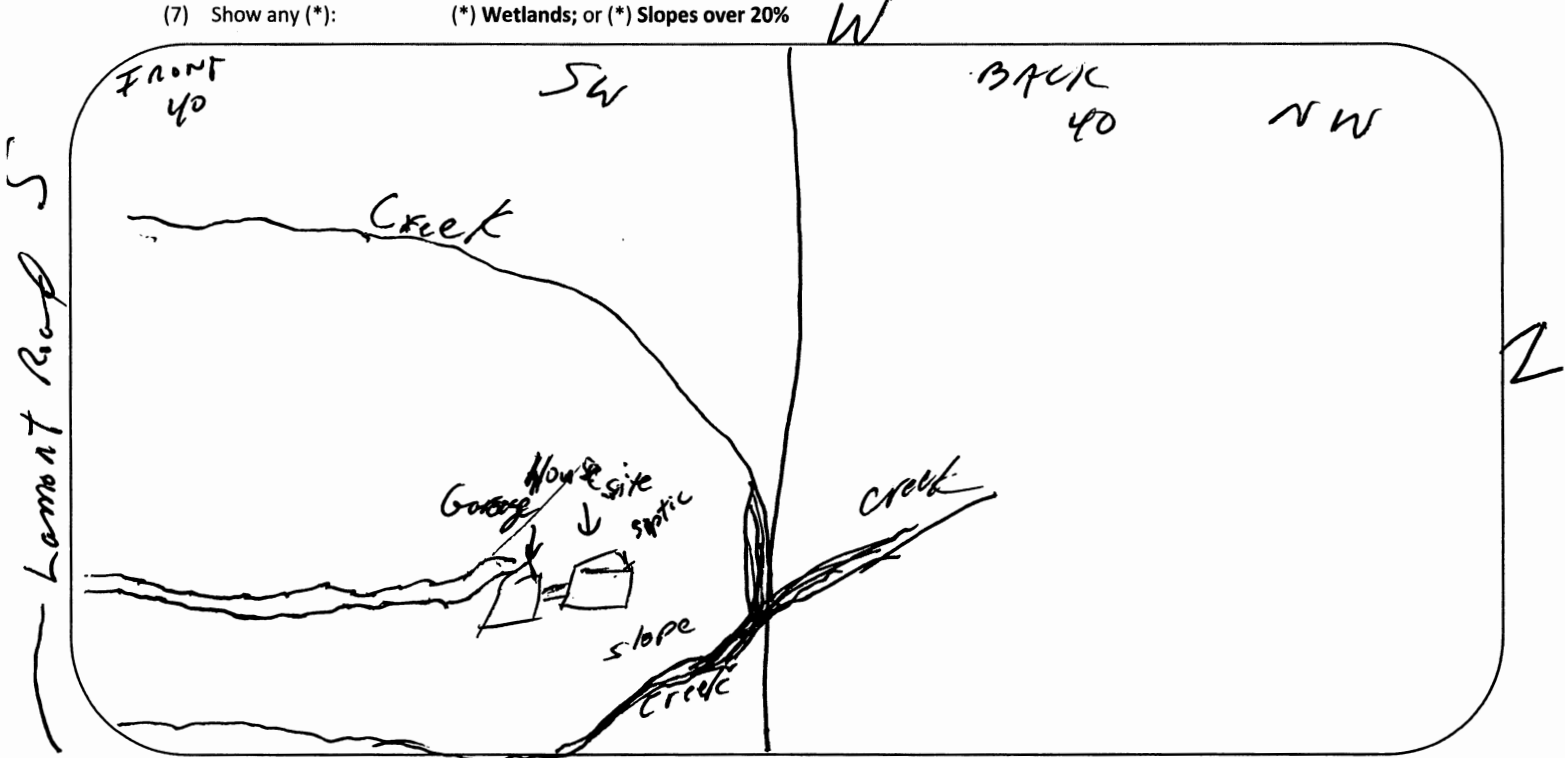
Owner(s): **Rocky Tribovich / Angela Sandoy** Date **2 Apr 15**
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

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 **189 N POW MIA DR SCOTT APBIL 62225** Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

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	40 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	100 Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet		
Setback from the South Lot Line	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	Feet	20% Slope Area on property	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

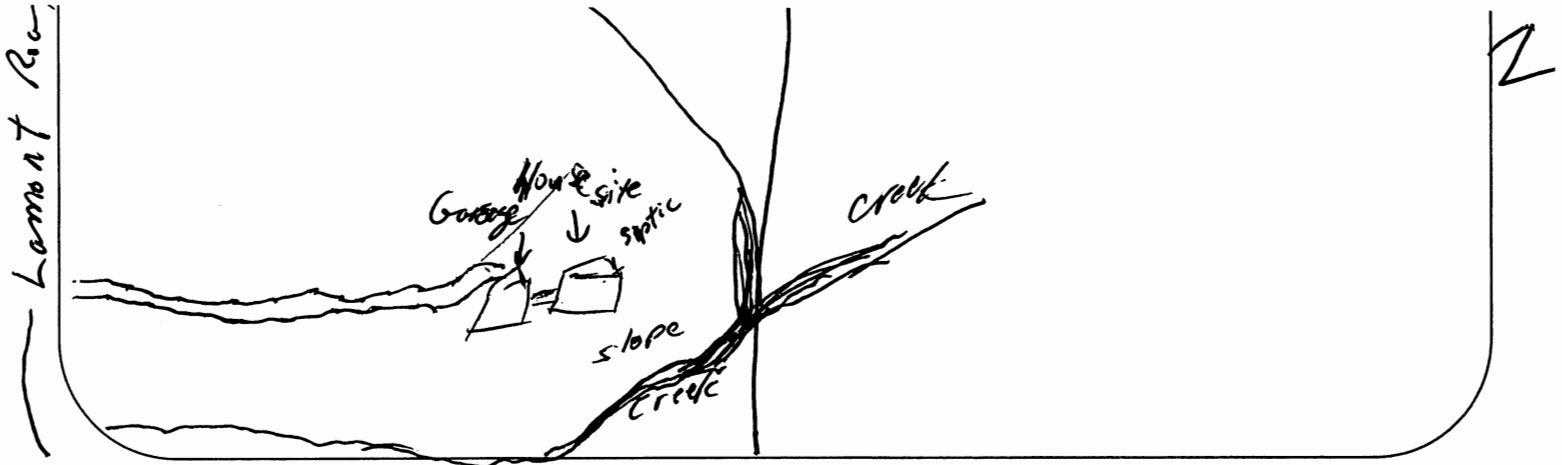
(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		
Permit #:	Permit Date:		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input type="checkbox"/> No		Affidavit Required <input type="checkbox"/> Yes <input type="checkbox"/> No
			Affidavit Attached <input type="checkbox"/> Yes <input type="checkbox"/> No



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)

E

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	40 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	100 Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet		
Setback from the South Lot Line	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	Feet	20% Slope Area on property	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #:		Permit Date:		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record:			Zoning District	(F-1)
			Lakes Classification	() ? (3)
Date of Inspection:		Inspected by:		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (if No they need to be attached.)				
Signature of Inspector:				Date of Approval:
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

DAVID L GOOD
94500 N LADD ST

STATE OF WISCONSIN - Bayfield
REAL ESTATE PROPERTY TAX BILL FOR 2014

SONDAY, BRENT A & ANGELA J
TOWN OF RUSSELL

BAYFIELD WI 54814
(715) 779-5338

PAYMENTS ONLY should reference **Tax ID** 29197
DOCUMENT RECORDING, or anything else should reference
PIN: 04-046-2-51-04-19-4 02-000-10000
Alternate/Legacy ID: 046102805000

townofrussell@centurytel.net

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

Property Description / Location of Property

Site Address:

Description: NW SE 232

BRENT A & ANGELA J
SONDAY
4153 DOUGLAS LOOP

USAFA CO 80840

Acreage: 40.00

Please include self addressed, stamped envelope for return receipt.
Please inform your treasurer of any billing address changes.

Assessed Value				Average Assessment Ratio	Net Assessed Value Rate (Does not reflect lottery credit)	Real Estate Tax	944.82
Land	Improved	Total		0.99790	0.0155655640	First Dollar Credit	0.00
60,700	0	60,700				Lottery Credit	0.00
Estimated Fair Market Value				An "X" means unpaid prior year taxes.	School taxes reduced by school levy tax credit	Net Real Estate Tax	944.82
Land	Improved	Total		□	\$97.20		
60,800	0	60,800					
Estimated State Aids Allocated Tax District						Net Tax	% Tax Change
Taxing Jurisdiction	2013	2014	2013	2014			
STATE	0	0	10.49	10.32			-1.6
COUNTY	8,713	8,938	234.65	236.65			0.9
TOWN OF RUSSELL	168,749	170,939	187.42	178.61			-4.7
TECHNICAL COLLEGE	3,122	2,826	77.43	22.03			-71.5
SCHL-BAYFIELD	58,238	57,134	507.82	497.21			-2.1
			0.00	0.00			0.0
			0.00	0.00			0.0
			0.00	0.00			0.0
Total			1,017.81	944.82			-7.2
	First Dollar Credit		0.00	0.00			0.0
	Lottery & Gaming Credit		0.00	0.00			0.0
	Net Property Tax		1,017.81	944.82			-7.2
						Total Due: 944.82	
						For full payment, pay to	
						TOWN OF RUSSELL	
						treasurer by	
						January 31, 2015	
						Warning: If not paid by due dates,	
						installment option is lost and total tax	
						is delinquent and subject to interest	
						and if applicable, penalty.	
						(See reverse)	

For payment in full; pay **\$944.82** or pay 1st installment of: **\$472.41** Pay 2nd installment of: **\$472.41**

By January 31, 2015

Amount Enclosed: _____

Make check payable and mail to:
TOWN OF RUSSELL TREASURER

DAVID L GOOD
94500 N LADD ST

BAYFIELD WI 54814

SONDAY, BRENT A & ANGELA J
Tax ID: 14-046-029197

Include this stub with your payment

By January 31, 2015

Amount Enclosed: _____

Make check payable and mail to:
TOWN OF RUSSELL TREASURER

DAVID L GOOD
94500 N LADD ST

BAYFIELD WI 54814

SONDAY, BRENT A & ANGELA J
Tax ID: 14-046-029197

Include this stub with your payment

By July 31, 2015

Amount Enclosed: _____

Make check payable and mail to:
BAYFIELD TREASURER

DANIEL ANDERSON
PO BOX 397

WASHBURN WI 54891

SONDAY, BRENT A & ANGELA J
Tax ID: 14-046-029197

Include this stub with your payment

DAVID L GOOD
94500 N LADD ST

STATE OF WISCONSIN - Bayfield
REAL ESTATE PROPERTY TAX BILL FOR 2014

SONDAY, BRENT A & ANGELA J
TOWN OF RUSSELL

BAYFIELD WI 54814
(715) 779-5338

townofrussell@centurytel.net

PAYMENTS ONLY should reference Tax ID 29198
DOCUMENT RECORDING, or anything else should reference
PIN: 04-046-2-51-04-19-4 03-000-10000
Alternate/Legacy ID: 046102806000

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

Property Description / Location of Property

Site Address:

Description: SW SE IN V.947 P.882 233

BRENT A & ANGELA J
SONDAY
4153 DOUGLAS LOOP

USAFA CO 80840

Acreage: 40.00

Please include self addressed, stamped envelope for return receipt.
Please inform your treasurer of any billing address changes.

Assessed Value	Land 60,700	Improved 0	Total 60,700	Average Assessment Ratio 0.99790	Net Assessed Value Rate (Does not reflect lottery credit) 0.0155655640	Real Estate Tax 944.82
Estimated Fair Market Value	Land 60,800	Improved 0	Total 60,800	An "X" means unpaid prior year taxes. □	School taxes reduced by school levy tax credit \$97.20	First Dollar Credit 0.00 Lottery Credit 0.00 Net Real Estate Tax 944.82
Estimated State Aids Allocated Tax District						
Taxing Jurisdiction	2013	2014	2013	2014	% Tax Change	
STATE	0	0	10.49	10.32	-1.6	
COUNTY	8,713	8,938	234.65	236.65	0.9	
TOWN OF RUSSELL	168,749	170,939	187.42	178.61	-4.7	
TECHNICAL COLLEGE	3,122	2,826	77.43	22.03	-71.5	
SCHL-BAYFIELD	58,238	57,134	507.82	497.21	-2.1	
			0.00	0.00	0.0	
			0.00	0.00	0.0	
			0.00	0.00	0.0	
Total			1,017.81	944.82	-7.2	Total Due: 944.82
	First Dollar Credit		0.00	0.00	0.0	For full payment, pay to
	Lottery & Gaming Credit		0.00	0.00	0.0	TOWN OF RUSSELL
	Net Property Tax		1,017.81	944.82	-7.2	treasurer by
						January 31, 2015
						Warning: If not paid by due dates, installment option is lost and total tax is delinquent and subject to interest and if applicable, penalty. (See reverse)

For payment in full; pay **\$944.82** or pay 1st installment of : **\$472.41** Pay 2nd installment of : **\$472.41**

By January 31, 2015

Amount Enclosed: _____

Make check payable and mail to:
TOWN OF RUSSELL TREASURER

DAVID L GOOD
94500 N LADD ST

BAYFIELD WI 54814

SONDAY, BRENT A & ANGELA J

Tax ID: 14-046-029198

Include this stub with your payment

By January 31, 2015

Amount Enclosed: _____

Make check payable and mail to:
TOWN OF RUSSELL TREASURER

DAVID L GOOD
94500 N LADD ST

BAYFIELD WI 54814

SONDAY, BRENT A & ANGELA J

Tax ID: 14-046-029198

Include this stub with your payment

By July 31, 2015

Amount Enclosed: _____

Make check payable and mail to:
BAYFIELD TREASURER

DANIEL ANDERSON
PO BOX 397

WASHBURN WI 54891

SONDAY, BRENT A & ANGELA J

Tax ID 14-046-029198

Include this stub with your payment

Sunday Cabin

Log Work by Scandinavian Log and Timber Works

SCANDINAVIAN LOG AND TIMBER WORKS
ASSUMES RESPONSIBILITY FOR
ARCHITECTURAL DESIGN AND CONSTRUCTION
OF THE LOG WORK ONLY AS SHOWN IN THIS
PLAN. PROVIDED THE LOG WORK IS
CONSTRUCTED BY SCANDINAVIAN LOG AND
TIMBER WORKS. ALL OTHER ELEMENTS ARE TO
BE APPROVED BY LOCAL BUILDING AUTHORITIES
AND BUILT TO LOCAL BUILDING CODES. ANY
ENGINEERING REQUIRED AND RELATED COSTS
ARE THE RESPONSIBILITY OF THE OWNER.

SHEET:

A-1

NO SCALE

SCALE:

4/10/2015

DATE:

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W US HWY 2
Hurley, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

PROJECT DESCRIPTION:
Sunday Cabin

SHEET TITLE:

COVER

NO.	DESCRIPTION	BY	DATE
4	Third Revision	Z.E.	12/29/2014
5	Fourth Revision	Z.E.	1/6/2015
6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015





NO.	DESCRIPTION	BY	DATE
4	Third Revision	Z.E.	12/29/2014
5	Fourth Revision	Z.E.	1/6/2015
6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:
MAIN FLOOR

PROJECT DESCRIPTION:
Sunday Cabin

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W US HWY 2
Hurley, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

DATE:

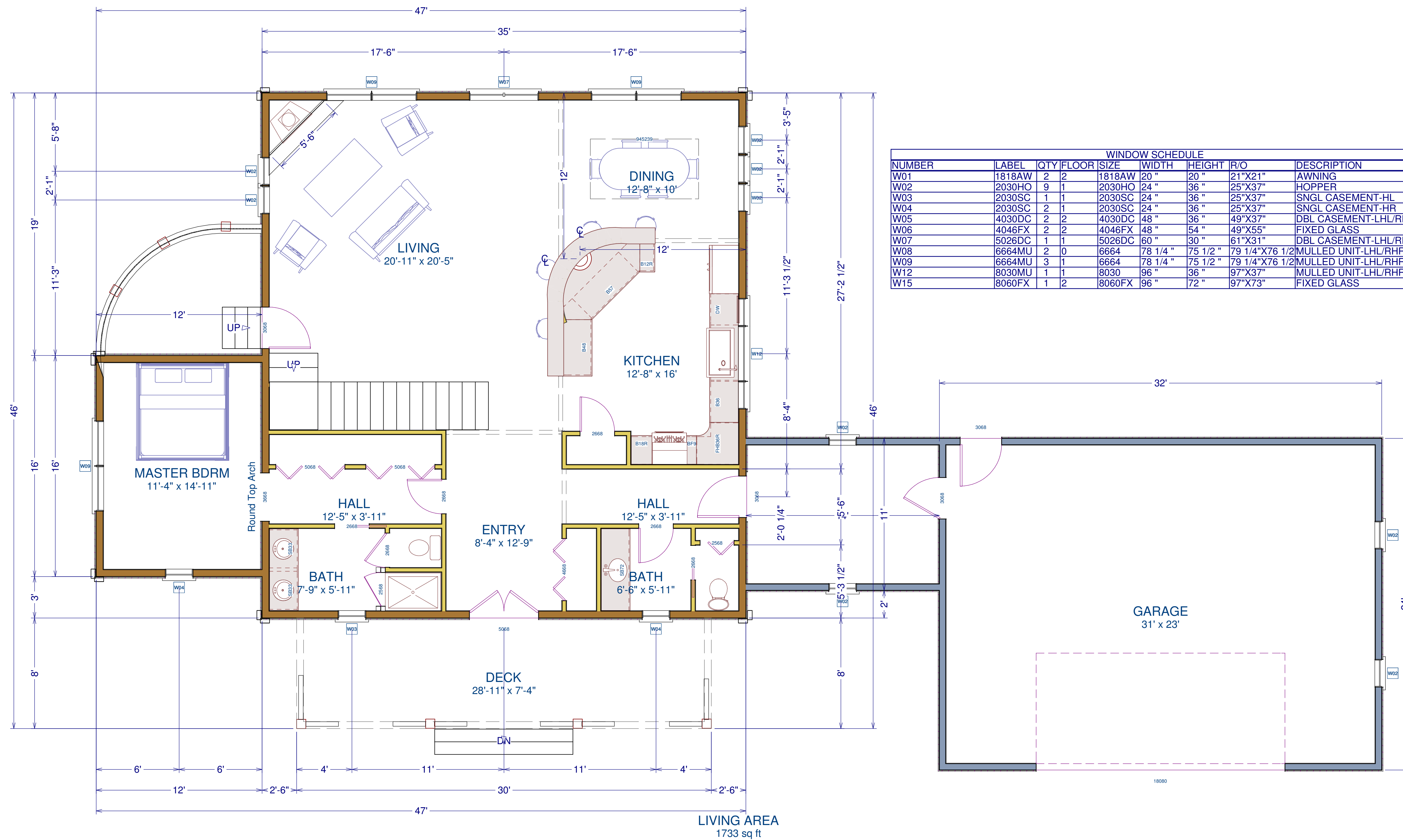
4/10/2015

SCALE:

1' = 1/4"

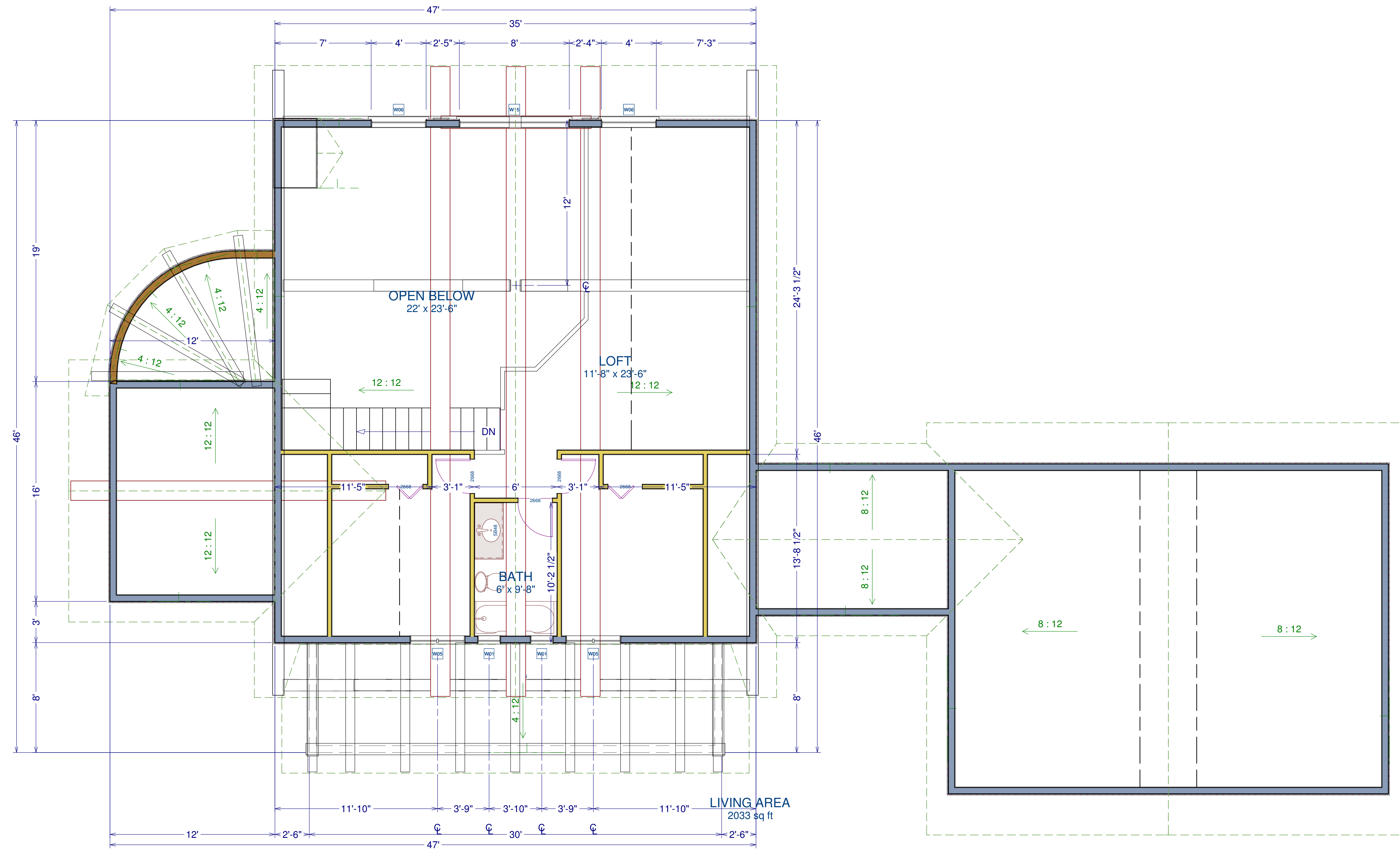
SHEET:

A-2



Main Floor

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.



Second Floor



NO.	DESCRIPTION	BY	DATE
4	Third Revision	Z.E.	12/29/2014
5	Fourth Revision	Z.E.	1/6/2015
6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:
SECOND FLOOR

PROJECT DESCRIPTION:
Sunday Cabin

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W US HWY 2
Hurley, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

DATE:

4/10/2015

SCALE:

1' = 1/4"

SHEET:

A-3

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.



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5	Fourth Revision	Z.E.	1/6/2015
6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:
FOUNDATION

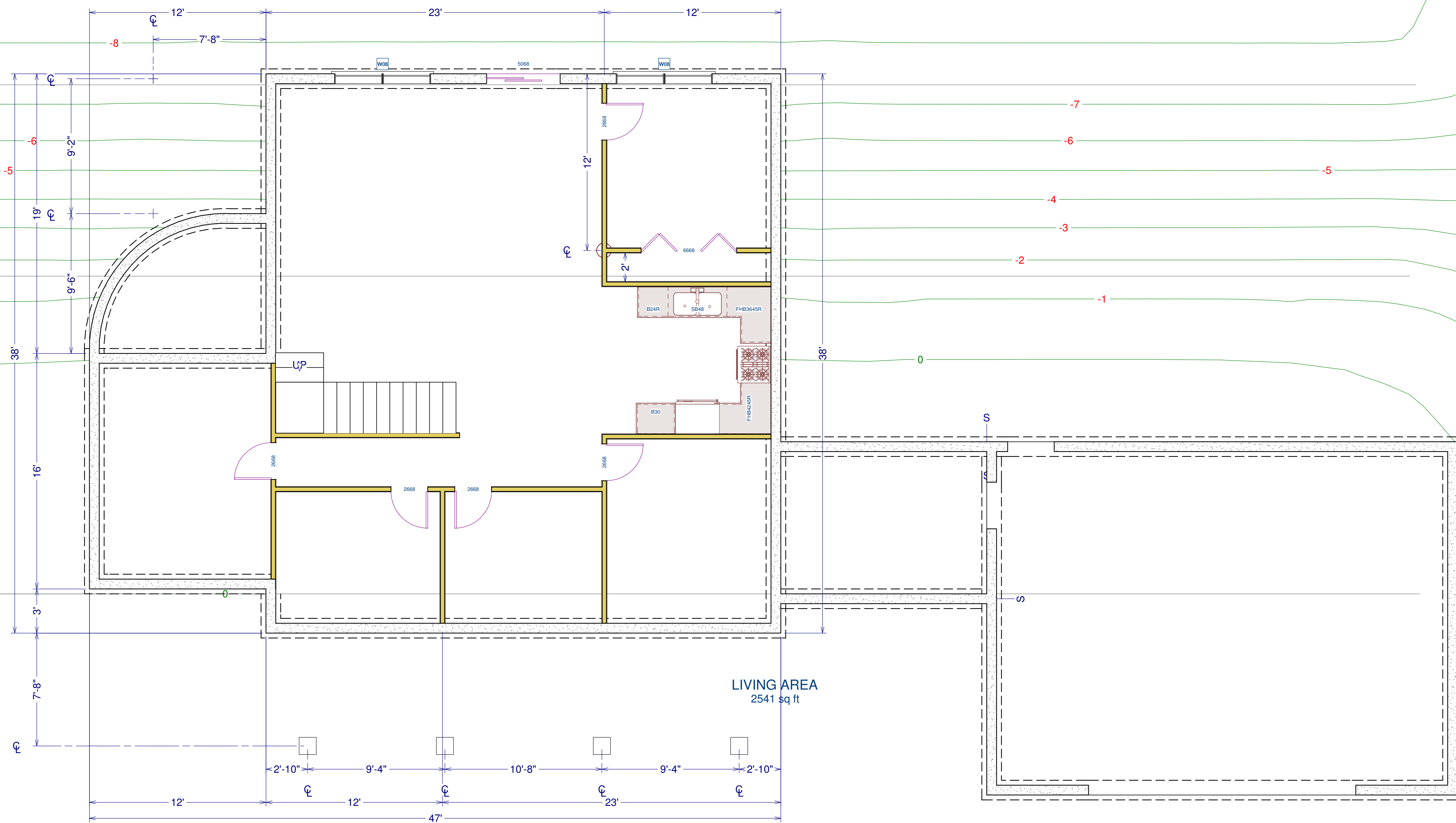
PROJECT DESCRIPTION:
Sunday Cabin

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W US HWY 2
Hurley, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

DATE:
4/10/2015

SCALE:
1' = 1/4"

SHEET:
A-4



Foundation

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.



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6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:
ELEVATIONS

PROJECT DESCRIPTION:
Sunday Cabin

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W US HWY 2
Pulney, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

DATE:
4/10/2015

SCALE:
1' = 1/4"

SHEET:
A-5



Front Elevation



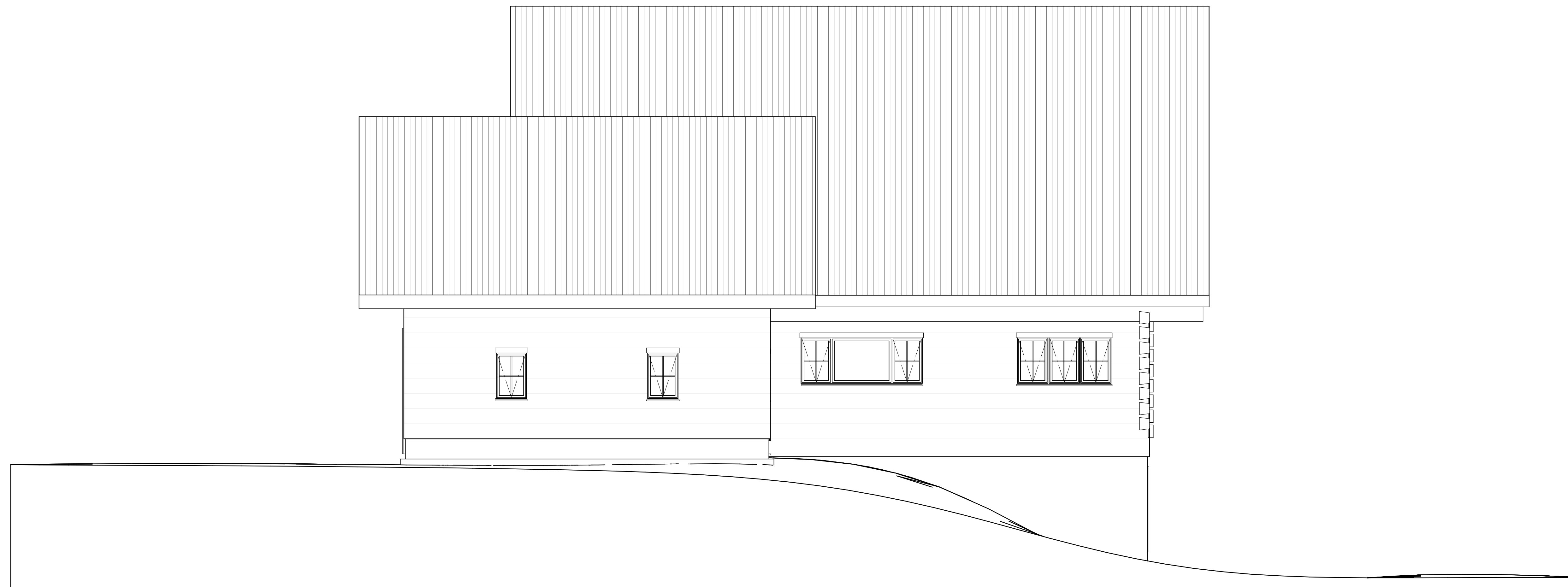
Rear Elevation

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.



Left Elevation

Cross Section 23



Right Elevation

Cross Section 24

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.



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8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:

ELEVATIONS

PROJECT DESCRIPTION:

Sunday Cabin

DRAWINGS PROVIDED BY:

Scandinavian Log and Timber Works

7020 W US HWY 2
Hurley, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

DATE:

4/10/2015

SCALE:

1' = 1/4"

SHEET:

A-6



NO.	DESCRIPTION	BY	DATE
4	Third Revision	Z.E.	12/29/2014
5	Fourth Revision	Z.E.	1/6/2015
6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:
CROSS SECTION

PROJECT DESCRIPTION:
Sunday Cabin

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W US HWY 2
Hurley, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

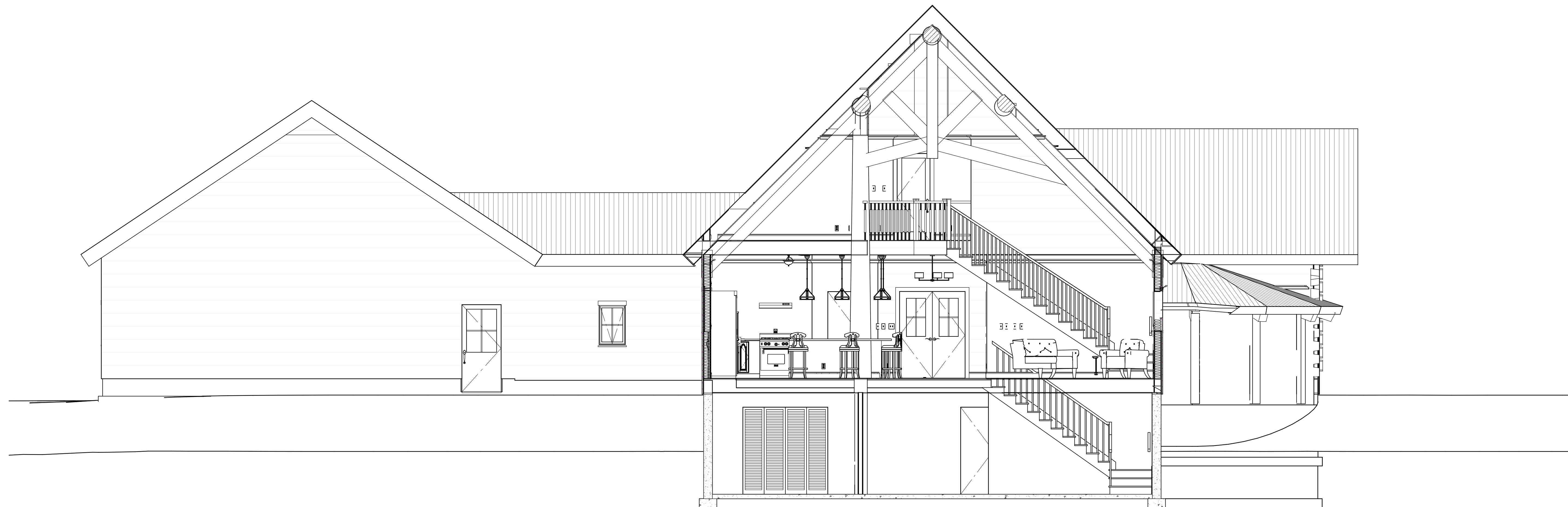
DATE:

4/10/2015

SCALE:

SHEET:

A-7



Cross Section 27

Cross Section

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.

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6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:
ELECTRICAL

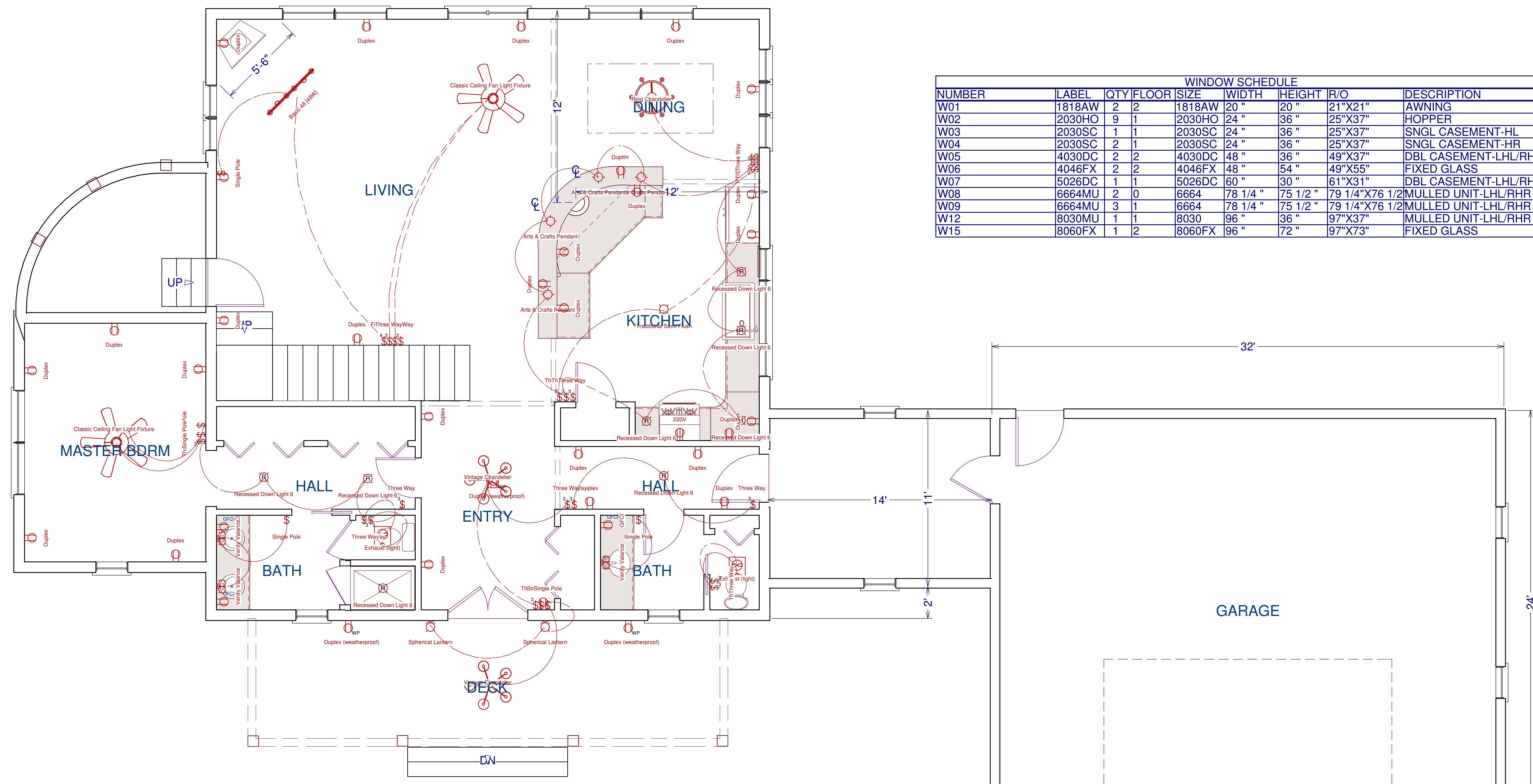
PROJECT DESCRIPTION:
Sunday Cabin

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W US HWY 2
Hurley, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

DATE:
4/10/2015

SCALE:

SHEET:
A-8

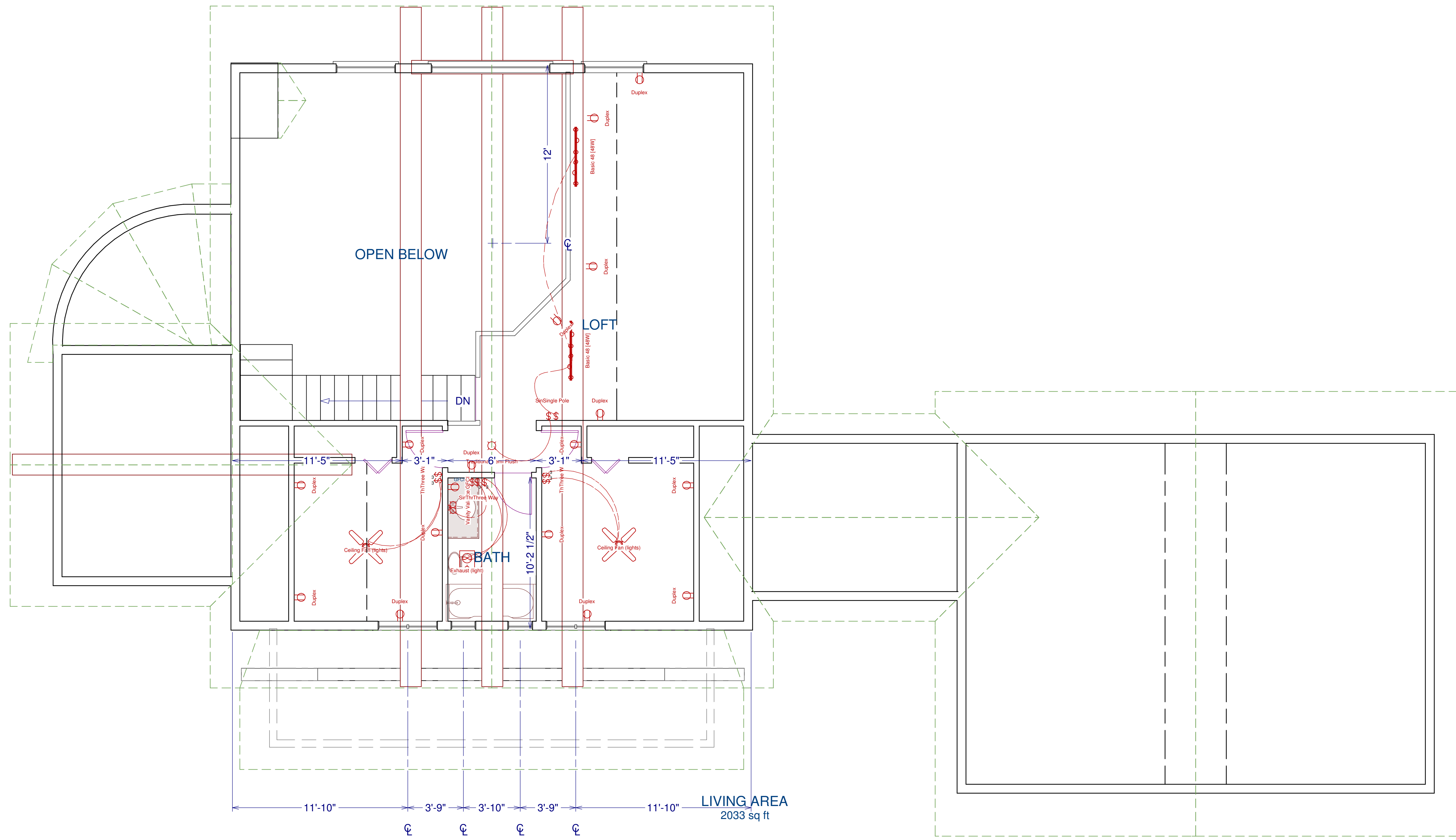


NUMBER	LABEL	QTY	FLOOR	SIZE	WIDTH	HEIGHT	R/O	DESCRIPTION
W01	1818AW	2	2	1818AW	20"	20"	21"X21"	AWNING
W02	2030HO	9	1	2030HO	24"	36"	25"X37"	HOPPER
W03	2030SC	1	1	2030SC	24"	36"	25"X37"	SNGL CASEMENT-HL
W04	2030SC	2	1	2030SC	24"	36"	25"X37"	SNGL CASEMENT-HR
W05	4030DC	2	2	4030DC	48"	36"	49"X37"	DBL CASEMENT-L/L/RHR
W06	4046FX	2	2	4046FX	48"	54"	49"X55"	FIXED GLASS
W07	5026DC	1	1	5026DC	60"	30"	61"X31"	DBL CASEMENT-L/L/RHR
W08	6664MU	2	0	6664	78 1/4"	75 1/2"	79 1/4"X76 1/2"	MULLED UNIT-L/L/RHR
W09	6664MU	3	1	6664	78 1/4"	75 1/2"	79 1/4"X76 1/2"	MULLED UNIT-L/L/RHR
W12	8030MU	1	1	8030	96"	36"	97"X37"	MULLED UNIT-L/L/RHR
W15	8060FX	1	2	8060FX	96"	72"	97"X73"	FIXED GLASS

LIVING AREA
1733 sq ft

1st Floor

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.



2nd Floor

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.



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6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:
ELECTRICAL

PROJECT DESCRIPTION:
Sunday Cabin

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W US HWY 2
Hurley, Wisconsin 54534
(715)561-5420 - www.scandinavianlogandtimber.com

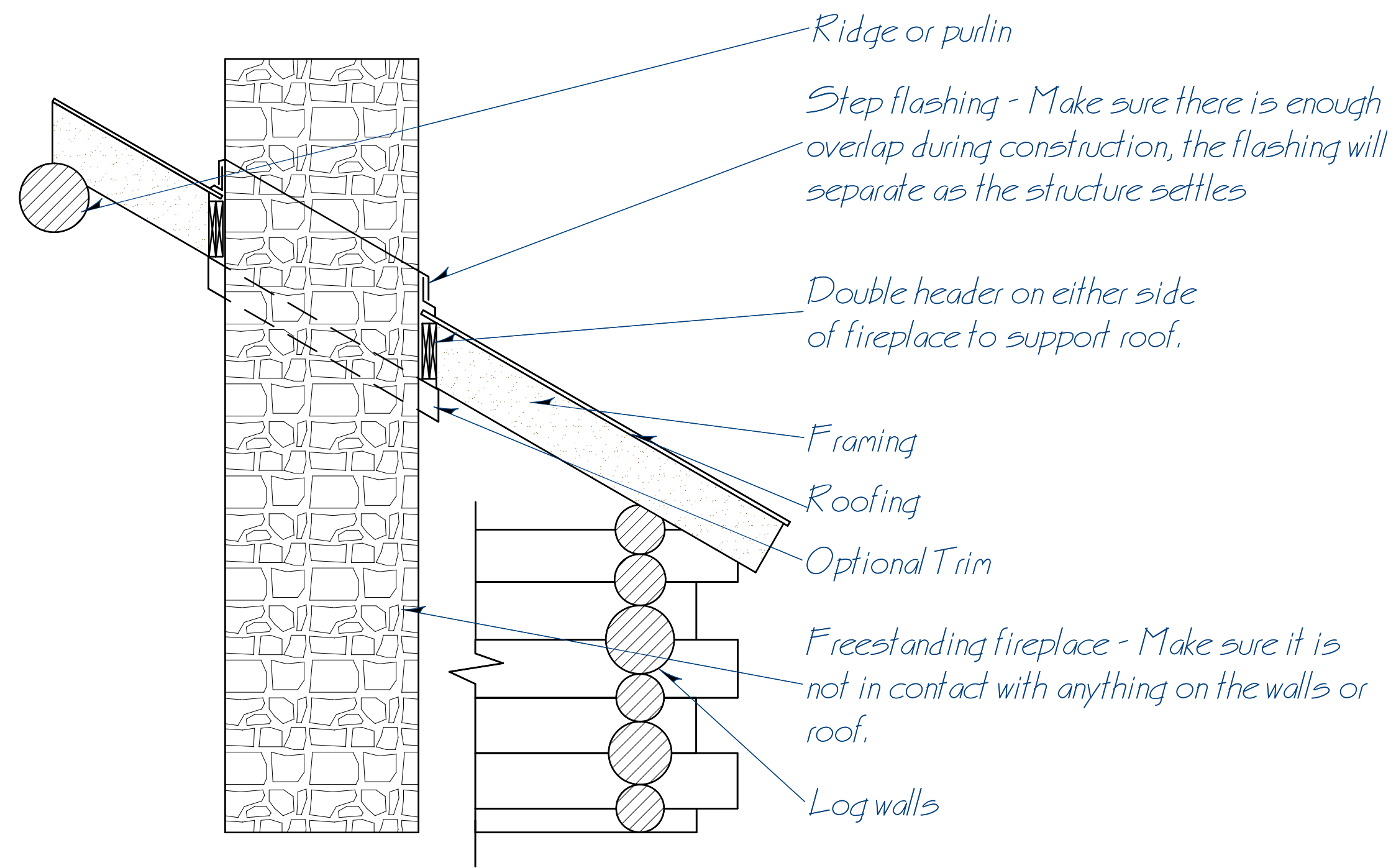
DATE:

4/10/2015

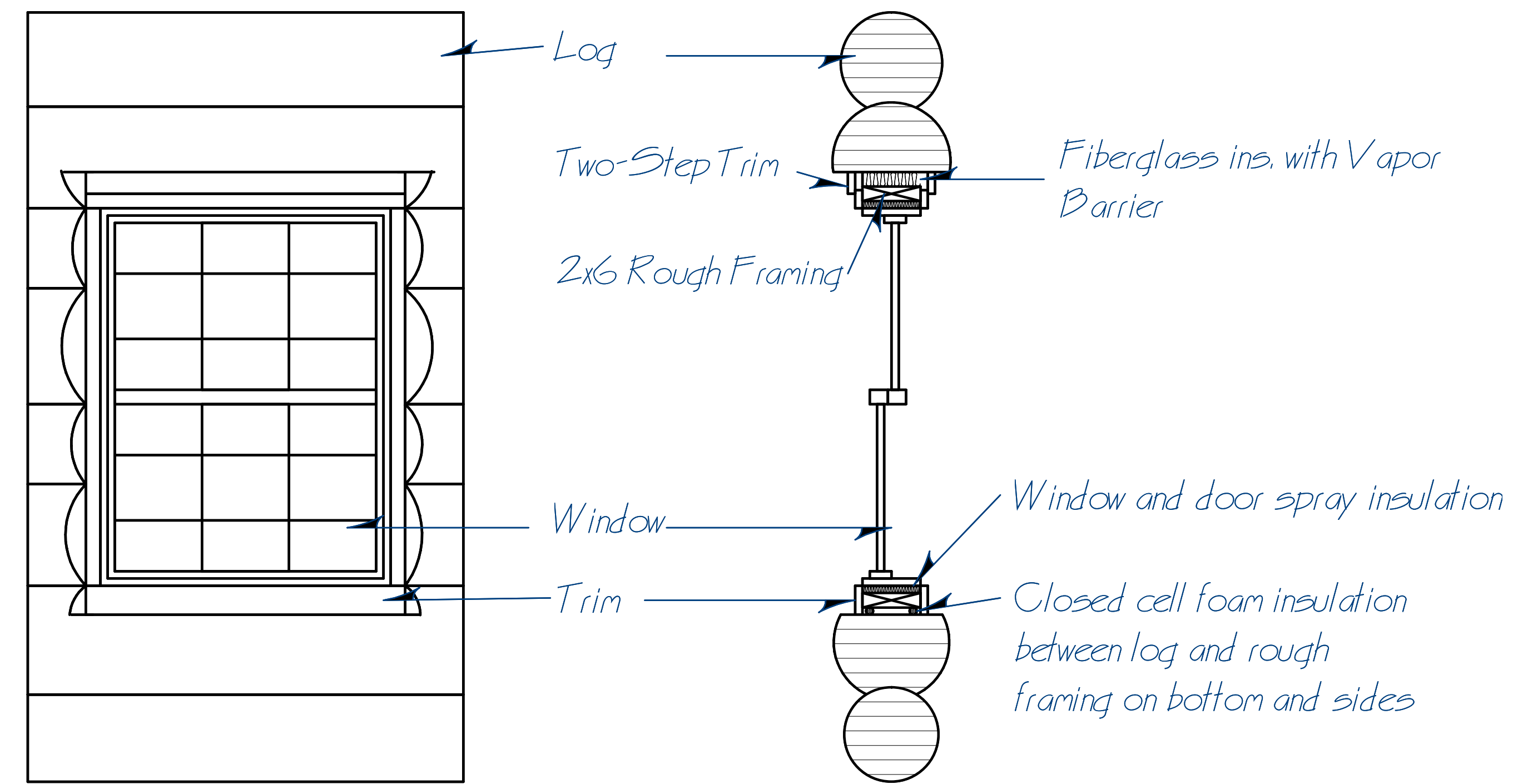
SCALE:

SHEET:

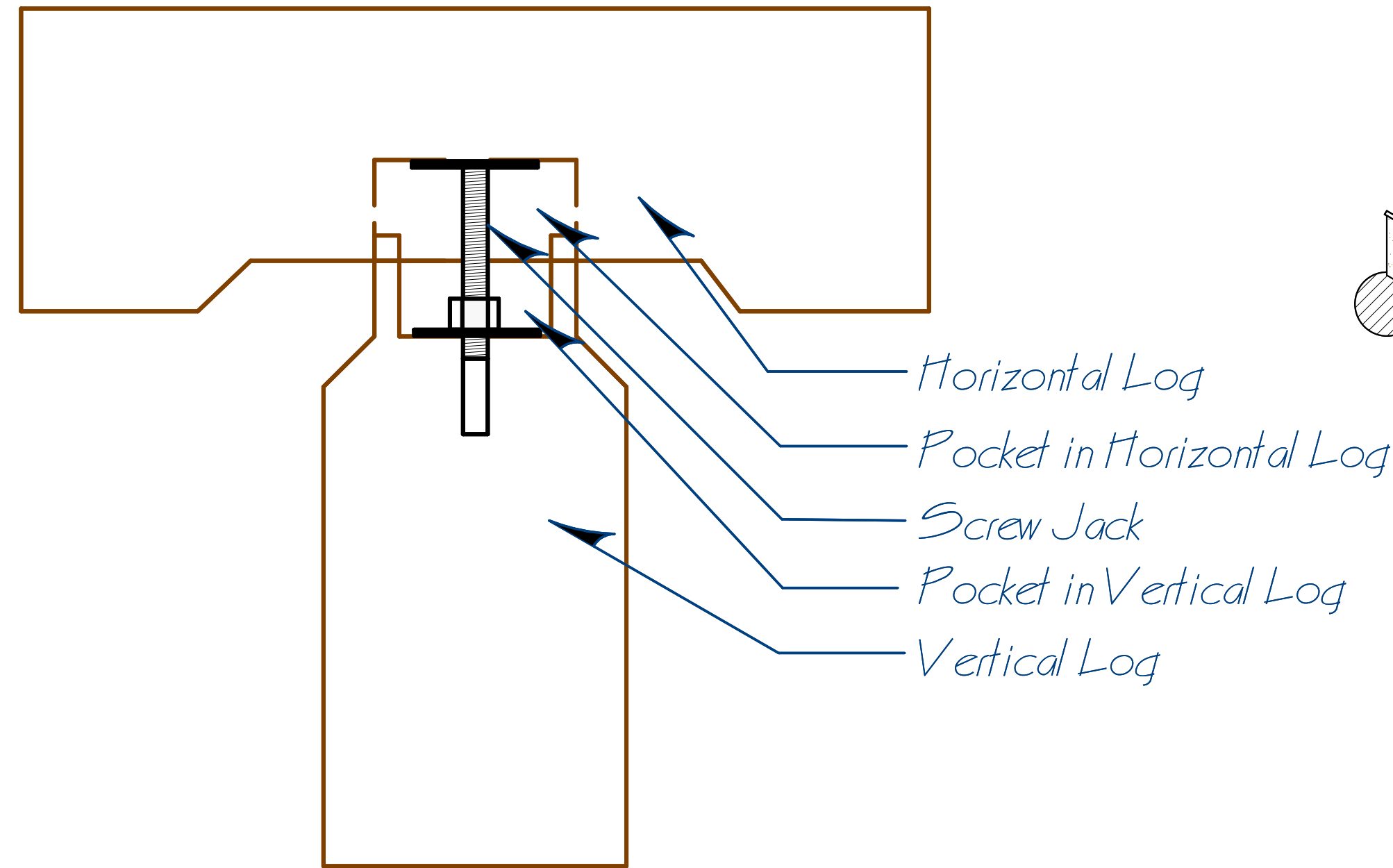
A-9



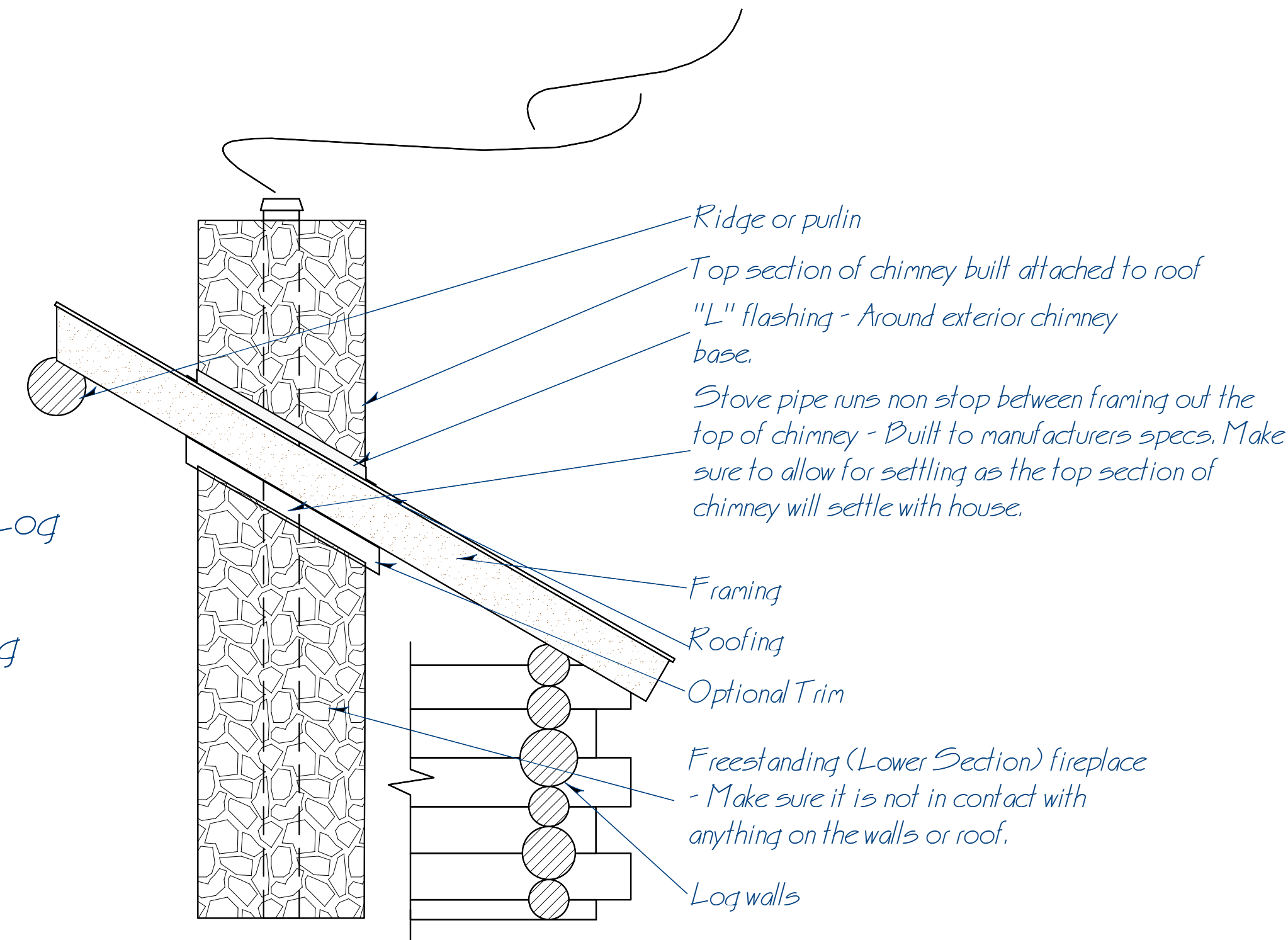
STAND ALONE FIREPLACE DETAIL



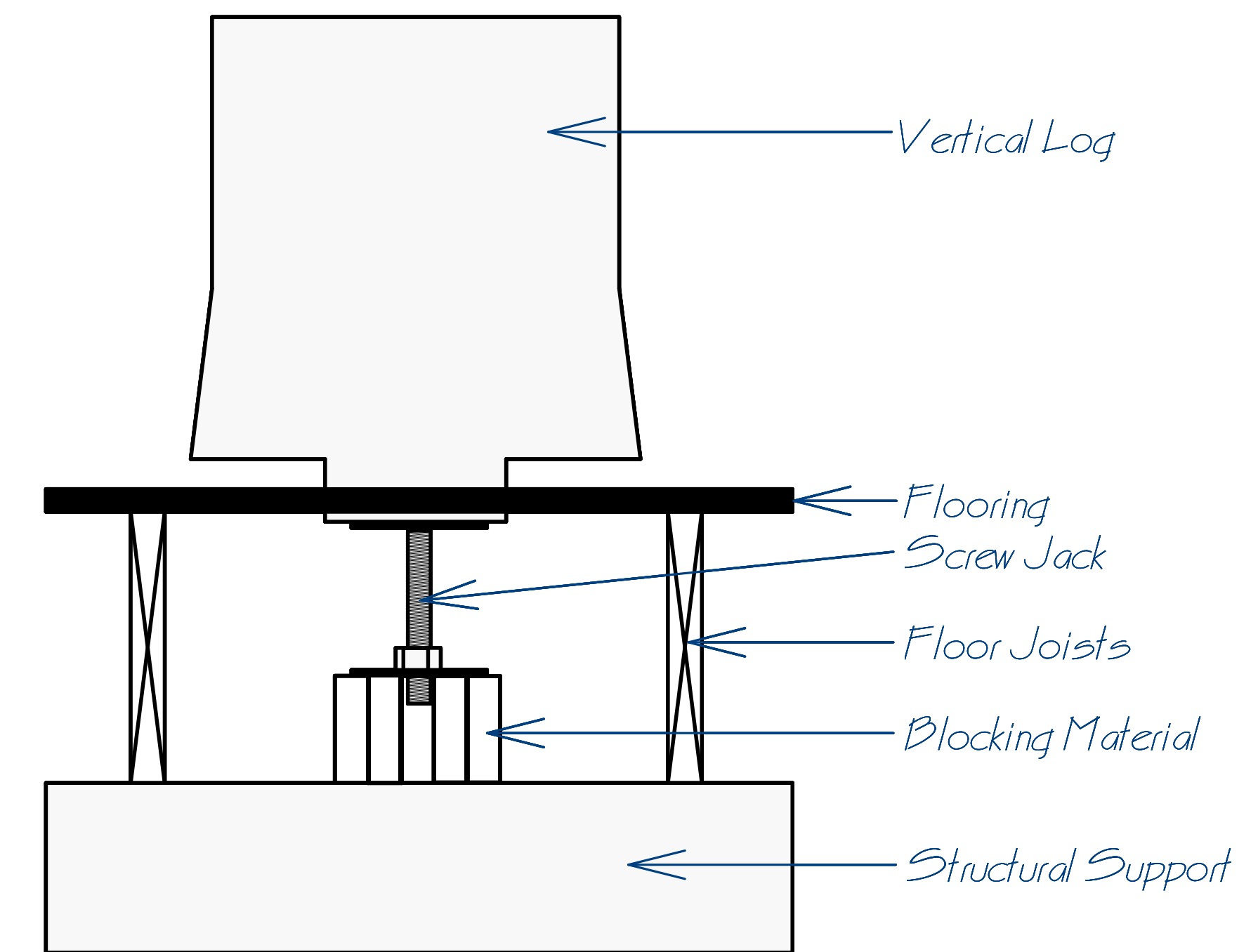
WINDOW INSTALLATION



SETTLER DETAIL WHEN ON TOP OF POST



ZERO CLEARANCE FIREPLACE DETAIL



SETTLER DETAIL WHEN ON BOTTOM OF POST

Details



NO.	DESCRIPTION	BY	DATE
4	Third Revision	Z.E.	12/29/2014
5	Fourth Revision	Z.E.	1/6/2015
6	Fifth Revision	Z.E.	1/21/2015
7	Sixth Revision	Z.E.	4/2/2015
8	Seventh Revision	Z.E.	4/10/2015

SHEET TITLE:
DETAILS

PROJECT DESCRIPTION:
Sunday Cabin

DRAWINGS PROVIDED BY:
Scandinavian Log and Timber Works
7020 W. US HWY. 2
Pulney, Wisconsin 54534
(715)561-5820 - www.scandinavianlogandtimber.com

DATE:

4/10/2015

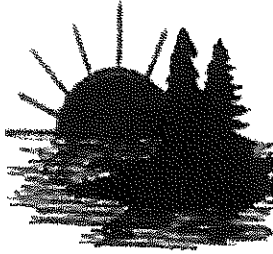
SCALE:

NO SCALE

SHEET:

A-10

SCANDINAVIAN LOG AND TIMBER WORKS ASSUMES RESPONSIBILITY FOR ARCHITECTURAL DESIGN AND CONSTRUCTION OF THE LOG WORK ONLY AS SHOWN IN THIS PLAN. PROVIDED THE LOG WORK IS CONSTRUCTED BY SCANDINAVIAN LOG AND TIMBER WORKS. ALL OTHER ELEMENTS ARE TO BE APPROVED BY LOCAL BUILDING AUTHORITIES AND BUILT TO LOCAL BUILDING CODES. ANY ENGINEERING REQUIRED AND RELATED COSTS ARE THE RESPONSIBILITY OF THE OWNER.



BAYFIELD COUNTY PLANNING AND ZONING DEPARTMENT

Bayfield County Courthouse
117 East Fifth Street
Post Office Box 58
Washburn, WI 54891

COPY

Telephone: (715) 373-6138
Fax: (715) 373-0114

E-mail: zoning@bayfieldcounty.org
Web Site: www.bayfieldcounty.org/zoning

April 2, 2015

Boulder Point LLC
89850 Old Co K
Bayfield, WI 54814

Note:

Incomplete and/or unfinished applications expire 4 months from the date of this letter.

RE: Reclamation Plan and Conditional Use Application for (non-metallic mine) on [a 40-acre parcel (Tax ID #29359), described as SW ¼ of the SE ¼ Section 26, Township 51 North, Range 4 West, Town of Russell, Bayfield County, WI]

To Whom It May Concern:

As you know, the Bayfield County Planning and Zoning Committee conducted a public hearing / meeting on March 19, 2015, where Craig Haukaas, your agent informed the Committee of the application for **the above mentioned**. After discussion and review, the Planning and Zoning Committee **approved** your request **with conditions** based upon the information presented and Town Board recommendations.

The approval includes the following:

- Reclamation Plan
- Non-Metallic Mine - (with storage of materials and crushing only)

with the following conditions:

- ❖ 10 year duration
- ❖ Hours of Operation (6 AM to 6 PM) – No Holidays or Sundays
- ❖ All access to the site for operations of mine and transport of materials from the site will be— from the site to St Hwy 13
- ❖ No Crushing Operations will be performed on Sundays and Federal Holidays

Additional Conditions placed by (Planning and Zoning Dept)

- ❖ Financial Assurance must be in place prior to reclamation plan being valid.
- ❖ Temporary Hot Mix and/or Concrete Plant(s) must obtain separate Planning and Zoning Committee approval.

Congratulations on obtaining this approval. Be advised any aggrieved party has the right to appeal this decision to the Board of Adjustment within thirty (30) days.

Enclosed is a copy of the affidavit prepared by this Dept. setting forth the terms and conditions of your permit. Your \$30 check and the original affidavit will be taken to the Reg. of Deeds Office for recording. After recordation, your permit card will be mailed to you provided all requirements have been met and/or submitted.

Please note, 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 individual land use application(s) / permit(s) from the Planning and Zoning Department. Terms and conditions of your permit shall be binding upon, and inure to the benefit of, all current and future owners of such property.

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.

Thank you for your cooperation and please let our office know if you have any questions or comments.

Sincerely,



Robert D. Schierman, Director
Bayfield County Planning and Zoning Department

enc: copy of affidavit

cc: Craig Haukaas, agent, 101 W Main St #201, Ashland WI 54806
David Good, Town Clerk
Office File

via email: Mike Wenholz, DNR, Shoreland Specialist: (Michael.wenholtz@wisconsin.gov)

AFFIDAVIT

On March 19, 2015 the owner was granted by the Bayfield County Planning and Zoning Committee a:

**Reclamation Plan & Conditional Use Permit
[Non-Metallic Mining]**

Property Owner: **Boulder Point LLC**

Property Description: a 40-acre parcel (Tax ID #29359), described as SW ¼ of the SE ¼ Section 26, Township 51 North, Range 4 West, Town of Russell, Bayfield County, WI.

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

- Reclamation Plan
- Operation of a Non-Metallic Mine – with storage and crushing

Condition(s):

- 10 year duration
- Hours of Operation (6 AM to 6 PM) - No Holidays or Sundays
- All access to the site for operations of mine and transport of materials from the site will be—from the site to St Hwy 13
- No Crushing Operations will be performed on Sundays and Federal Holidays.

Additional Conditions placed by (Planning and Zoning Dept.)

- ❖ Financial Assurance must be in place prior to reclamation plan being valid.
- ❖ Temporary Hot Mix and/or Concrete Plant(s) must obtain separate Planning and Zoning Committee approval.

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.

PATRICIA A OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2015R-558214

04/02/2015 11:05AM

IF EXEMPT #:

RECORDING FEE: 30.00

PAGES: 1

Return to:
Bayfield County Zoning

<p>Bayfield County Planning & Zoning Dept.</p> <p>Governmental Official Printed Name and Title: ROBERT D. SCHIERMAN, Director</p> <p>Signature of Governmental Official: <i>Robert D. Schierman</i></p> <p>On this <u>2nd</u> day of <u>April</u>, 20<u>15</u></p>	<p>This instrument was signed before me in the State of Wisconsin, County of Bayfield</p> <p>Notary Public: <i>Deborah A. Kmetz</i></p> <p>My commission expires on: <u>11-27-16</u></p>
--	--

V11140 P351

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.

Permits may Also Be Required
LAND USE – X
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL – ZC 3/19/2015
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **15-0059** Issued To: **Boulder Point LLC / Craig Haukass, Agent**

Location: **SW** ¼ of **SE** ¼ Section **26** Township **51** N. Range **4** W. Town of **Russell**

Gov't Lot Lot Block Subdivision CSM#

For: **Commercial Other: [Non-Metallic Mine]**

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

ZC Condition(s): 1] 10 year duration (Expiration 4/8/2025). 2] Hours of operation (6 AM to 6 PM) No Holidays or Sundays. 3] All access to the site for operations of mine and transport of materials from the site will be from the site to St Hwy 13. 4] No crushing operations will be performed on Sundays and Federal Holidays. **Department Conditions:** 1] Financial assurance must be in place prior to reclamation plan being valid. 2] Temporary hot mix and/or concrete plant(s) must obtain separate Planning and Zoning Committee approval.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

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

Rob Schierman

Authorized Issuing Official

April 8, 2015

Date

TOWN BOARD RECOMMENDATION – CLASS B (aka: TBA)

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department
 P.O. Box 58 – Washburn, WI 54891
 Phone – (715) 373-6138
 Fax – (715) 373-0114
 e-mail: zoning@bayfieldcounty.org

Web Site available:
www.bayfieldcounty.org/zoning

Date Zoning Received: (Stamp Here)

Applicants must forward this (Pink) form to the Planning and Zoning Department with their application. Planning and Zoning Dept. must send form and copy of application to the Town Clerk. (It is requested that Board of Adjustment & Zoning Committee public hearing(s) and agenda item(s) receive Town Board's position **prior** to consideration of application.)
THIS FORM MUST BE GIVEN TO TOWN CLERK BY ZONING

Property Owner Bolder Point LLC Contractor Nichero Ferry Lines, Inc.
 Property Address 8850 TURNER Rd. Authorized Agent Craig Haukaas
Bayfield, WI 54814 Agent's Telephone 75-685-1001
 Telephone 715-779-5031 Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)
N 1/2 of NW 1/4 & NE 1/4 S 35 SW 1/4 of SE 1/4, Section 26, Township 51 N., Range 4 W. Town of Russell
 Govt. Lot — Lot — Block — Subdivision — CSM# —
 Volume 1137 Page 785 of Deeds Parcel I.D.# 04-046-2-51-26-4 03-000-10000
04-046-2-51-25-1 02-000-10000 Acreage 60
 Additional Legal Description: —

Applicant: (State what you are asking for) Open and operate non-metallic mine, that will include crushing and storage of materials, temp. Hot mix & Concrete
Zoning District: F-1

We, the Town Board, TOWN OF RUSSELL, do hereby recommend to

Table Approval Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: This question applies to Zoning Committee Applications only; it does not apply to Board of Adjustment Applications Yes No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

SEE ATTACHED RECOMMENDATION + CONDITIONS

** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:

1. The Tabled, Approval or Disapproval box checked
2. The Town's reasoning for the tabling, approval or disapproval
3. The **Pink** form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Revised: February 2013

Signed:
 Chairman: [Signature]
 Supervisor: [Signature]
 Supervisor: Larry Megerath
 Clerk: [Signature]
 Date: 3-3-2015



Town of Russell

35900 State Highway 13
Bayfield, Wisconsin 54814
(715) 779-5338 or Fax (715)779-0249

e-mail townofrussell@centurytel.net

website www.townofrussell.org

Brian Goodwin-Chairman

Dave Good-Clerk/Treasurer

Judy Meierotto-Deputy Clerk

March 4, 2015

To: Bayfield County Planning & Zoning

RE: Bolder Point LLC Conditional Use Permit – Non-metallic Mine

The Town of Russell Plan Commission and Town Board both reviewed and recommended approval of the above referenced permit at a Joint Plan Commission-Special Town Board Meeting held March 3, 2015.

The Town Board motion to recommend approval contained information pertinent to the recommendation for approval and follows:

A motion was made by Tribovich and seconded by Meierotto to recommend the Bolder Point LLC application for a Conditional Use Permit for a non-metallic mine operation that includes the storage of materials, crushing and a temporary hot mix and/or concrete plant be approved as presented for 25 years of operation with a provision that an additional renewal of 25 years be allowed based on the reasons afforded in the initial 25 year permit and applicable rules in place at the time of renewal. Conditions specifically required for this recommendation of approval are as follows:

1. All access to the site for operations of a non-metallic mine and transport of materials from the site will be from the site to State Highway 13.
2. No crushing operations will be performed on Sundays and Federal Holidays.

The motion carried.