

OFFICE USE

Site Address: _____
 Date Call Received: _____
 Name of Caller: _____
 Ph.# of Caller: _____
 Date given to Zoning Officer: _____
 Inspection Date #1: _____
 Inspection Date #2: _____
 Inspection Date #3: _____
 Non-compliance found of: _____
 Date notified of non-compliance: _____
 Re-inspection Date: _____
 Foundation Survey Received: _____
 Comments: _____
 Zoning Officer/Date: _____

SITE INFO

Subdivision Romanka Park Subdivision
 Lot No./Block No. 13 + 14
 Zoning R-1
 Section 5 T 4 N, R 18 E
 SETBACKS
 Street Yard See plan ft.
 Rear Yard See plan ft.
 Side Yard Attached ft.
 Side Yard _____ ft.
 Shore Yard _____ ft.
 Height 13' ft.

INSPECTION

PHASE	DATE	Intl
Foundation		
Height		
SETBACKS		
Street Yard		
Rear Yard		
Side Yard (R)		
Side Yard (L)		
Shore Yard		

NOTICE OF COMPLIANCE

The applicant/owner is responsible for full compliance with the Zoning Ordinances, Walworth County, WI. Any violations shall be corrected within 30 days after notification, unless an extension of time is granted.

Keep this card posted until construction is complete.

WALWORTH COUNTY ZONING PERMIT

NUMBER: 45613

ISSUED FOR THE CONSTRUCTION OF:

Boat house repair

Issued to	Owner (Agent) <u>Henry Budnik</u>
	Building Site <u>W1754 Byrnes Lane</u>
	Address <u>Walworth County, Wisconsin</u>
	Township <u>East Troy</u> Parcel Number <u>PRP 00017B</u>

Issued by	WALWORTH COUNTY DEPARTMENT OF ZONING 741-3394
	Person Issuing <u>Dennis Schwank</u> <u>9/15/05</u>
	Date Issued <u>9-16-05</u> Permit Expires <u>9-16-07</u>

CONDITIONS OF APPROVAL: As per plan to repair an existing dry boat house. The roof with deck must be replaced or repaired within the existing footprint and envelope of the existing boat house. No land disturbance approved.

This permit shall require the submittal of a foundation survey prepared by a Registered Land Surveyor, to the Zoning Department within 30 days of backfilling, placement of the slab or posts.

This permit shall require the applicant to call the Zoning Department at 262-741-3394 for an inspection to assure compliance with the setback requirements of the Zoning Ordinance. The applicant shall call the Zoning Department within 30 days of backfilling. Lot boundaries shall be clearly identified for inspection.

This permit is not valid until all other applicable permits have been obtained.

ZONING PERMIT NUMBER 45613		WALWORTH COUNTY WATERFRONT ZONING PERMIT APPLICATION		TAX KEY NUMBER(S) PRP 00017B	
OWNER'S NAME Henry Budnik				MAILING ADDRESS W1754 Byrnes Lane	
PROJECT ADDRESS <small>(If Different Than Above)</small>		CONTRACTORS NAME HACKBARTH BUILDERS		TELEPHONE 262-642-9601	FAX NO. 262-642-4485
LOCATION: SECTION 5 , T 4 , N, R 18 E.		SUBDIVISION NAME Romadka Park Subdivision		LOT NO. 13	BLOCK NO. 14
2. PROJECT PLEASE MARK ALL THAT APPLY <input type="checkbox"/> NEW SINGLE FAMILY RESIDENCE <input type="checkbox"/> MULTI-FAMILY, #UNITS _____ <input type="checkbox"/> DECK <input type="checkbox"/> POOL <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> ACCESSORY STRUCTURE/GARAGE <input checked="" type="checkbox"/> OTHER Repair Existing Dry Boathouse Roof		3. DESCRIPTION A. Construction Size/Dimensions () X () () X () B. Total Sq. Ft. 330 C. Structure is used for? (example: kitchen, bedroom, storage, etc.)		4. HEIGHT 13' FEET _____ INCHES FEET _____ INCHES Building Height is the vertical distance measured from the lowest finished grade along the street yard elevation of the structure to the ridge of the highest roof line of the structure. The highest point of the roof of a boathouse shall not be more than 14 feet measured from the lowest finished grade along the structure to the highest roofline.	
5. ESTIMATED COST TOTAL \$ 2,500.00		6. FLOODPLAIN INFORMATION 100 YEAR FLOODPLAIN ELEVATION _____ LOWEST FLOOR ELEVATION _____ FLOODPLAIN SETBACK _____ FEET FROM BUILDING FOUNDATION TO 100 YEAR FLOODPLAIN			
7. SANITARY FACILITIES <input type="checkbox"/> MUNICIPAL SEWER <input type="checkbox"/> PRIVATE SEWAGE SYSTEM _____ NUMBER OF BEDROOMS EXISTING _____ NUMBER OF BEDROOMS ADDED _____ TOTAL NUMBER OF BEDROOMS					
The owner agrees to comply with the Walworth County Code of Ordinances Chapter 74 and with the conditions of this permit; understands that the issuance of the permit created no legal liability, express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all the above information is accurate.					
SIGNATURE OF OWNER * See attached		DATE _____			
PERMIT EXPIRATION: PERMIT EXPIRES WITHIN TWENTY-FOUR (24) MONTHS AFTER THE ISSUANCE OF THE PERMIT IF THE STRUCTURE FOR WHICH A PERMIT IS ISSUED IS NOT SUBSTANTIALLY COMPLETED. (Chapter 74, Division 11, Walworth County Code of Ordinances)					
WALWORTH COUNTY LAND USE AND RESOURCE MANAGEMENT DEPARTMENT 13929 COUNTY RD. W. WAUKESHA, WISCONSIN 53186 PHONE # 262-741-3333 OR FAX # 262-741-3266					

45613

CONDITIONS OF APPROVAL

This permit is issued subject to any federal, state or local restrictions. Each applicant for a zoning permit is charged with knowledge of the Walworth County Code of Ordinances. Copies of the text of the zoning ordinances or portions thereof and copies of the official zoning maps are available for sale, copying or inspection upon request. Any statement made, site plan submitted, assurance given or permit erroneously issued contrary to the zoning ordinances is null and void. Any modification of approved permit requires zoning permit review and approval.

- This permit shall require the submittal of a foundation survey prepared by a Registered Land Surveyor, to the zoning department within 30 days of backfilling.
- In lieu of the survey as required above, the owner is eligible to complete and return the inspection waiver form in the same time frame.
- This permit shall require the applicant to call the zoning division at 262-741-3394 for an inspection to assure compliance with the setback requirements of zoning. The applicant shall call the zoning division immediately upon backfilling the foundation. Lot boundaries shall be clearly identified for inspection.
- This permit is not valid until all other applicable permits have been obtained.

As per plan to repair an existing dry boathouse. The roof with deck must be replaced or repaired within the existing footprint and envelope of the existing boathouse. No land disturbance approved OKAY TO ISSUE

PERMIT REVIEWED BY THE WALWORTH COUNTY ZONING DIVISION REVIEW DATE: 9/14/05

ISSUING OFFICER: Darin Schrank ISSUE DATE: 9/15/05

**** FOR OFFICE USE ONLY ****

FEE _____	EROSION CONTROL APPLICATION TO LCC _____
DOUBLE FEE _____	RETURNED TO ZONING _____
OTHER _____	
TOTAL _____	

ZONING DISTRICT (S): R-1 NOT IN SHORELAND IN SHORELAND

SANITARY APPROVAL (INITIALS) _____ SANITARY PERMIT NO. _____
 DATE OF SANITARY PERMIT APPROVAL: _____

PERMIT DENIED BY WALWORTH COUNTY ZONING DIVISION

NAME: _____ DATE: _____

ORDINANCE REQUIRES: _____

APPLICANT IS REQUESTING: _____

WALWORTH COUNTY WATERFRONT ZONING PERMIT APPLICATION		TAX KEY NUMBER(S)	
		TOWNSHIP OF: EAST TROY	
OWNERS NAME Henry Budnik	MAILING ADDRESS W1754 Byrnes Lane	TELEPHONE 262-642-1552	FAX NO.
PROJECT ADDRESS (If Different Than Above)			
CONTRACTORS NAME HACKBARTH BUILDERS	MAILING ADDRESS P.O. Box 316	TELEPHONE 262-642-9601	FAX NO. 262-642-4485
LOCATION: SECTION 5/8 , T 4 N, R 18 E.			
LOT WIDTH	LOT DEPTH	SQ. FT. / ACREAGE	SUBDIVISION NAME Romadka Park Subdivision
			LOT NO. 13 & 14
PLEASE MARK ALL THAT APPLY		A. Construction Size/Dimensions	
<input type="checkbox"/> NEW SINGLE FAMILY RESIDENCE <input type="checkbox"/> MULTI-FAMILY, #UNITS _____ <input type="checkbox"/> DECK <input type="checkbox"/> POOL <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> ACCESSORY STRUCTURE/GARAGE <input checked="" type="checkbox"/> OTHER Repair Existing, Dry Boathouse Roof		() X () () X () B. Total Sq. Ft. _____ C. Structure is used for? (example: kitchen, bedroom, storage, etc.) _____	
		FEET _____ INCHES _____ FEET _____ INCHES _____ Building Height is the vertical distance measured from the lowest finished grade along the street yard elevation of the structure to the ridge of the highest roof line of the structure. The highest point of the roof of a boathouse shall not be more than 14 feet measured from the lowest finished grade along the structure to the highest roofline.	
TOTAL \$ 2,500.00		100 YEAR FLOODPLAIN ELEVATION _____ LOWEST FLOOR ELEVATION _____ FLOODPLAIN SETBACK _____ FEET FROM BUILDING FOUNDATION TO 100 YEAR FLOODPLAIN	
<input type="checkbox"/> MUNICIPAL SEWER <input type="checkbox"/> PRIVATE SEWAGE SYSTEM		_____ NUMBER OF BEDROOMS EXISTING _____ NUMBER OF BEDROOMS ADDED _____ TOTAL NUMBER OF BEDROOMS	
The owner agrees to comply with the Walworth County Code of Ordinances Chapter 74 and with the conditions of this permit; understands that the issuance of the permit created no legal liability, express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all the above information is accurate.			
SIGNATURE OF OWNER <i>[Signature]</i>		DATE 9/6/05	
PERMIT EXPIRATION: PERMIT EXPIRES WITHIN TWENTY-FOUR (24) MONTHS AFTER THE ISSUANCE OF THE PERMIT IF THE STRUCTURE FOR WHICH A PERMIT IS ISSUED IS NOT SUBSTANTIALLY COMPLETED. (Chapter 74, Division 11, Walworth County Code of Ordinances)			

SEP - 7 2005
 WALWORTH COUNTY
 PLANNING DEPARTMENT

LAND MANAGEMENT DEPARTMENT

W3929 COUNTY ROAD NN
ELKHORN, WI 53121
262-741-3394 TEL
262-741-3266 FAX

ZN 000045613

Date 9/07/2005

Received of: HACKBARTH BUILDERS, INC.
For: BUDNIK, HENRY
How Paid: CK 75.00
CK# 2235 / EAST TROY TWSP

Amount: \$75.00

Init: DS Return:

Account Number Description
001-1341-2522- ACC STR 700 OR LESS

Amount 75.00
Code ACCI
Qty Tax 1

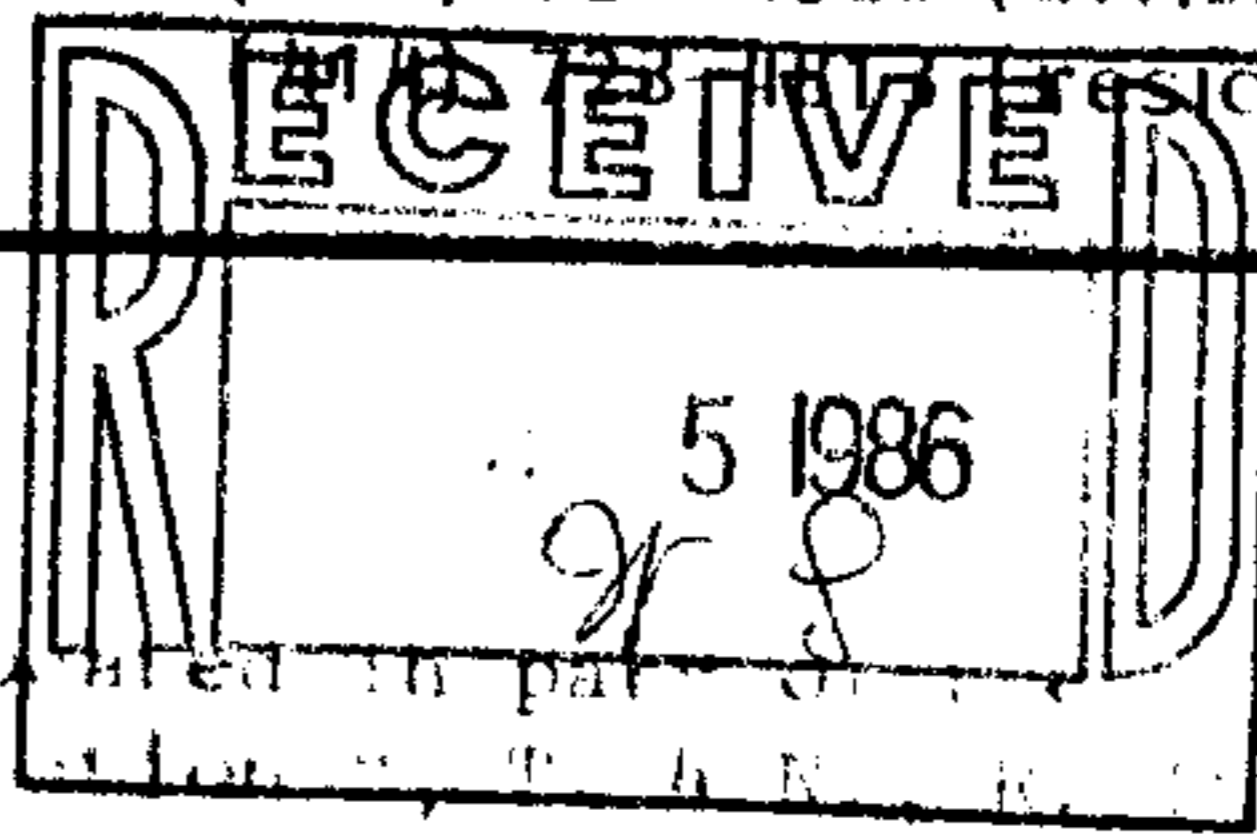
Sls

ABERNATHY and ASSOCIATES

Kenneth B. Abernathy Jr.

Wisconsin Registered Land Surveyor S-1594

Rt. 3, Box 273
Elkhorn, Wisconsin 53121
Phone (414) 723-4260 (office)
(414) 723-4260 (residence)



PLAT OF SURVEY

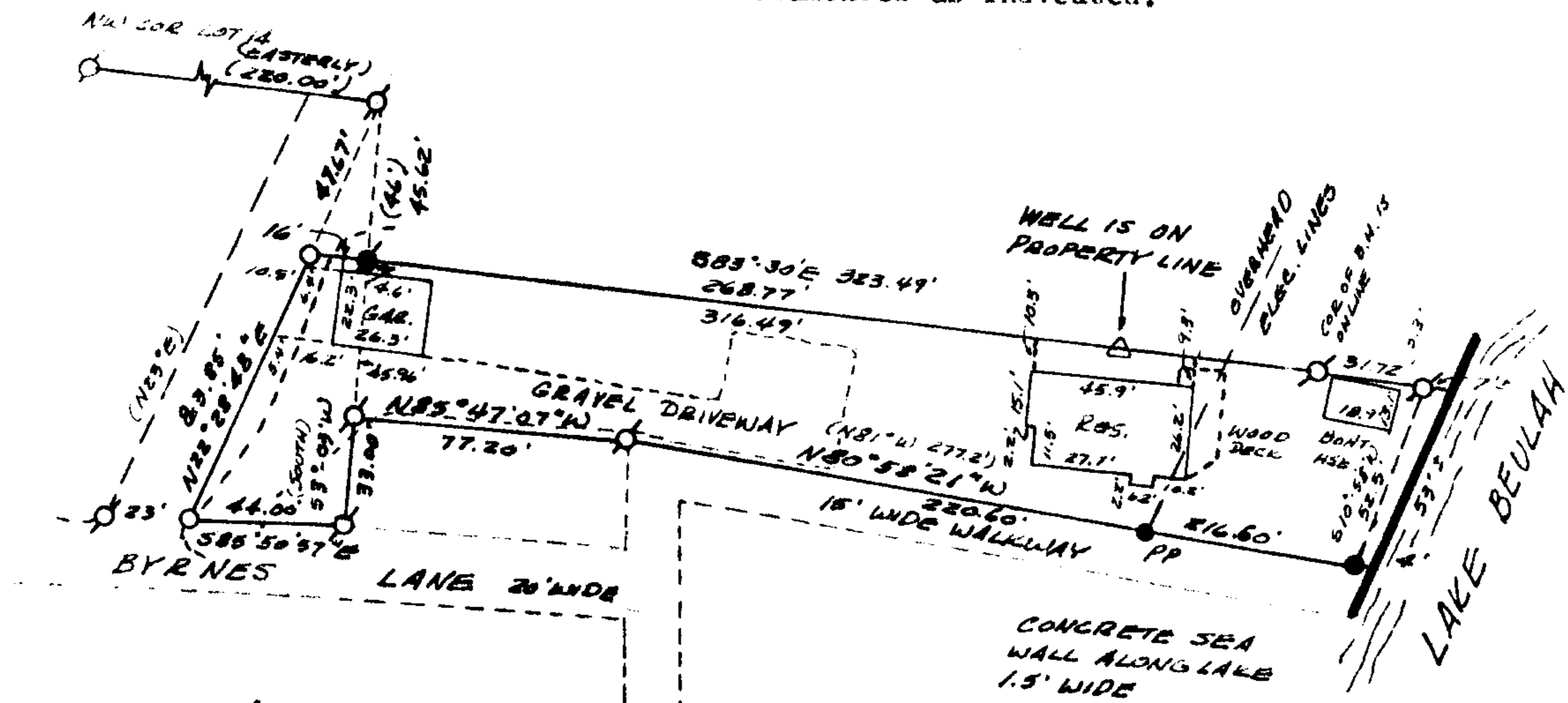
Part of Lots 13 and 14 of Romadka Park Subdivision being located in part of the Southeast 1/4 of Section 5, and part of the Northeast 1/4 of Section 5, T4N, R10E, S1E, Walworth County, Wisconsin.

LEGAL DESCRIPTION: recorded in Volume 295 Page 874 as document No. 05168

Ordered by: Bob McKillop
2120 Rueben Dr.
Waukesha, WI. 53186

Owner: Harold Norling
2464 Byrnes Lane
Mukwonago, WI. 53149

Note: Set railroad spikes in Blacktop Driveway on west line of parcel. Owner to the north states that owners agreed mutually on the location of driveway and existing retaining wall.
South line of parcel is recorded as N 81° W 277' but was found to be monumented as indicated.



BEARINGS ARE BASED ON RECORDED LEGAL DESCRIPTION AND ASSUME THE NORTH LINE TO BEAR S85°30'E



SCALE: 1" = 60 FEET

Legend

- FOUND IRON PIPE
- FOUND IRON ROD
- FOUND BRASS CAPPED MONUMENT
- ⊙ FOUND CONCRETE MONUMENT
- + CHISEL CUT IN CONCRETE
- SET IRON ROD, 24" LONG, WEIGHING 1.5 LBS./LINEAL FT., 3/4" DIA.
- SET IRON ROD, 30" LONG, WEIGHING 4.5 LBS./LINEAL FT., 1-11/16" DIA.
- (xx) RECORDED AS DIMENSION
- x-x- EXISTING FENCE
- PP- POWER POLE

"I hereby certify that I have surveyed the above described property and that the above map is a true representation thereof and shows the size and location of the property, its exterior boundaries, the location of all visible structures and dimensions of all principal buildings thereon, boundary fences, apparent easements, roadways and visible encroachments, if any."

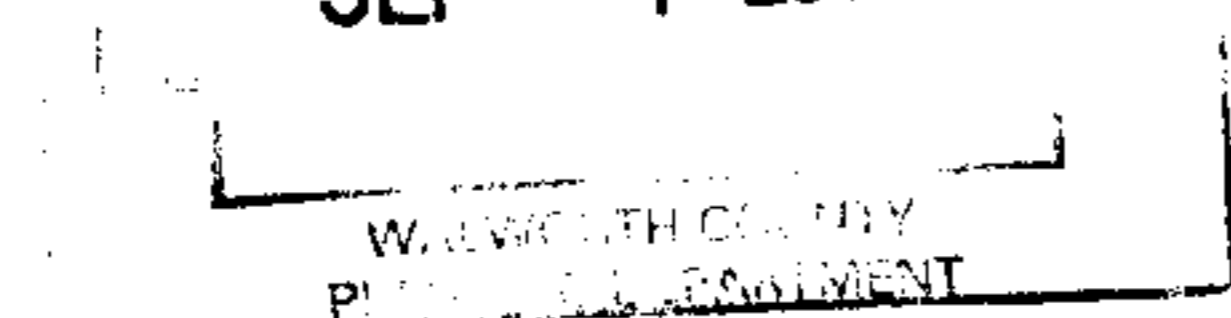
"This survey is made for the use of the present owners of the property, and also those who purchase, mortgage, or guarantee the title thereto within one year from date hereof."

Kenneth B. Abernathy Jr.

KENNETH B. ABERNATHY, JR.
WISCONSIN REGISTERED LAND SURVEYOR,
S-1594

Date: 4-17-86 Job No. 408

SEP - 7 2005



418-513

