

492617

Document Number

Document Title

Zoning Affidavit Creating Restriction on
Sale and Use of Land

RE: Lots 17 and 18 (PIN # CR250-6) both
being located in Longview Estates
further described as a parcel of land
In Government Lot 6, Section 19,
Township 36 North, Range 8 East,
Oneida County, Wisconsin.

STATE OF WISCONSIN)
COUNTY OF ONEIDA)

VOL 0902 PAGE 686

ONEIDA COUNTY, WIS.

Received for Record the
day of NOV A.D. 1998
125 o'clock P.M. and Recorded in
Vol 902 of RECORDS on page 686-688

Thomas H. Loughlin
REGISTER OF DEEDS
12 -

Recording Area

Name and Return Address

CR 250-6
Parcel Identification Number (PIN)

Albert L. Schaller and Mary Lynn Schaller, being first duly sworn on oath, deposes and says
that they are residents of the Town of Crescent, Oneida County, Wisconsin; that they are the
owners of two parcels of land, Lots 17 and 18 (PIN # CR250-6) which is described in a Warranty
Deed found in Volume 810, pages 126 and 127. Both parcels are located on Long View Drive,
Town of Crescent, Oneida County Records, which is attached hereto and incorporated herein as
though fully set forth at this point. Both parcels are in Longview Estates which is located on
property described as; Parcel #1, A parcel of land in Government Lot 6, Section 19, Township 36
North, Range 8 East, described as follow:

Beginning at the South one-quarter corner of Section 19, marked by a U.S.G.L.O. concrete
monument, witnessed by a 6" White Pine bearing N 60 degrees W., 6.3 feet and a 12" Norway
pine bearing South 24.7 feet; thence N 87 degrees 13' W., 119.9 feet along the South Line of
section 19 to an iron pipe thence N 35 degrees 07' E., 456.1 feet to an iron pipe near the shore of
Long Lake; thence S. 38 degrees 54' E. 100.0 feet along the lake to an iron pipe; thence S 34

This information must be completed by submitter: document title, name & return address, and PIN (if required). Other information such
as the granting clauses, legal description, etc. may be placed on this first page of the document or may be placed on additional pages of the
document. Note: Use of this cover page adds one page to your document and \$2.00 to the recording fee. Wisconsin Statutes, 59.517. WRDA 2/96

degrees 19' W., 364.4 feet to The Place of Beginning.

Parcel #2, A parcel of land in Government Lot 6, Section 19, Township 36 North, Range 8 East, Oneida County, Wisconsin, more particularly described as follows:

:

Commencing at the South one-quarter corner of Section 19, marked by a U.S.G.L.O. concrete monument, witnessed by a 6" White Pine bearing N.60 degrees W., 6.3 feet and a 12" Norway pine bearing South, 24.7 feet; thence N. 87 degrees 13' W., 119.9 feet along the South line of Section 19 to The Place of Beginning, marked by an iron pipe.

Thence continuing N 87 degrees 13' W., 199.8 feet to an iron pipe thence N. 42 degrees 02' E., 585.3 feet to an iron pipe near the shore of long lake; thence S 44 degrees 31' E., 100.0 feet along the lake to an iron pipe; thence S 35 degrees 07' W., 456.1 feet to The Place of Beginning. The above lateral lines extend to the lake including all riparian rights thereto. Together with complete right of ingress and egress to the Town Road over the existing road.

Because Albert L. Schaller and Mary Lynn Schaller are willing to agree that both parcels will remain together and not be sold separately at a later date, The Oneida County Planning and Zoning Department is willing to allow the use and placement of an addition to the existing dwelling, to include living area , and garage space on Lot 17 and Lot 18 (PIN # CR250-6}. This affidavit is given to create and place a restriction on the realty described herein and to ensure future compliance with this restriction.

Dated this 5 day of November 1998

Albert L. Schaller

Albert L. Schaller

Mary Lynn Schaller

Mary Lynn Schaller

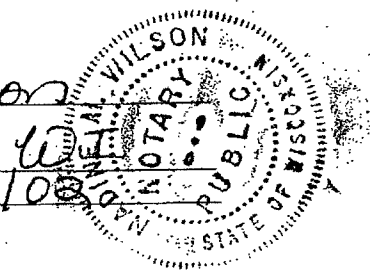
Personally came before me this 5th day of Nov, 1998, the above named Albert L. Schaller and Mary Lynn Schaller, known to me to be the persons who executed the foregoing instrument and acknowledge the same.

Nadine M. Wilson

Notary Public

(County) Oneida (State) NY

My commission expires 4/14/00



Drafted by

Mary Lynn Schaller

Figure 1. The effect of the number of trials on the number of correct responses. The number of correct responses was plotted against the number of trials for each participant. The number of correct responses increased with the number of trials, and the increase was more pronounced for the high-ability group than for the low-ability group.

493686

VOL 906 PAGE 34

AFFIDAVIT FOR DEED RESTRICTION

State of Wisconsin)
Oneida County) ss.

In re the title to:
Lot # 17 and 18, Longview Est. Subdivision
p.t. Gov't Lot 6, S 19, T 38, R 8, PIN #
CR 250-6, Town of Crescent

ONEIDA COUNTY, WIS.

Received for Record the 25th
day of Nov A.D. 19 98
9.02 o'clock P.M. and Recorded in
Vol 906 of RECORDS on page 34

Thomas H. Loughton
REGISTER OF DEEDS
10.00

Albert Schaller, being first duly sworn on oath, deposes and says that he is a resident of the Town of Crescent, Oneida County, Wisconsin. That he is an occupant and an owner of the above described realty; that he recognizes that the present sewage system used by him on the above described realty is undersized in relationship to the size of the buildings serviced by said sewage system; that if said system fails during his occupancy he shall replace it with a sewage system sized properly. That this affidavit is given to place a deed restriction on the above described realty to insure future compliance with the Wisconsin Administrative Code.

Albert Schaller
Signed ALBERT SCHALLER
Print Name

State of Wisconsin)
Oneida County)

Personally came before me this 25th day of November, 1998, the above named ~~Madeline M. W. Albert Schaller~~ known to me to be the person who executed the foregoing instrument and acknowledge the same.

Madeline M. W. Albert Schaller
Notary Public
Oneida County, Wisconsin
My commission expires 4/14/98 2002

Instrument drafted by affiant.

Casey Mayton <caseymayton@kw.com>
To: John Francis <jfrancis1946@gmail.com>

Fri, Mar 8, 2019 at 11:43 AM

I spoke with Oneida County and Town of Crescent to get the documentation. The Assessor Card/Report is attached for you showing the year built of 1999-2000 when the construction began. Home was added on and remodeled, it had good bones and foundation was good, reroofed with addition. Ceiling was left and new drywall on walls. All new doors and patio doors and windows and flooring. Small bathroom off kitchen all new everything about three years ago. The Assessor said the assessed value is about 10% off the current value and market value. If there was an appraisal required that would probably be much higher as well.

With the current tank, they are just required to check it every 2 years instead of every 3 years since it is smaller. We are waiting on the documentation for the septic agreement from the County, will send as soon as I get it. I attached a blank form if the Buyers want to fill a new one out as well. Sounds like County doesn't need the tank replaced to close but the escrow is there if needed in Spring. We will move forward with the Well Inspection on Monday and hopefully the Buyers will accept the full 5K escrow amount this weekend and we can close.

Thanks for your patience with all this!

Casey

2019 Property Records for Town of Crescent, Oneida County

March 8, 2019

Tax key number: 004010250 6

Property address: 2512 Long View Dr

Traffic / water / sanitary: Medium / Well water / Septic

Legal description: PT G.L. 6 2.52CA/2.55A LOTS 17 & 18 SM L1360 A/K/A UNRD LONGVIEW EST BOTH PCLS V810-126 SEE ZONING AFFID V902 P686 LONG LAKE WF SEE TOD/DOC 767051

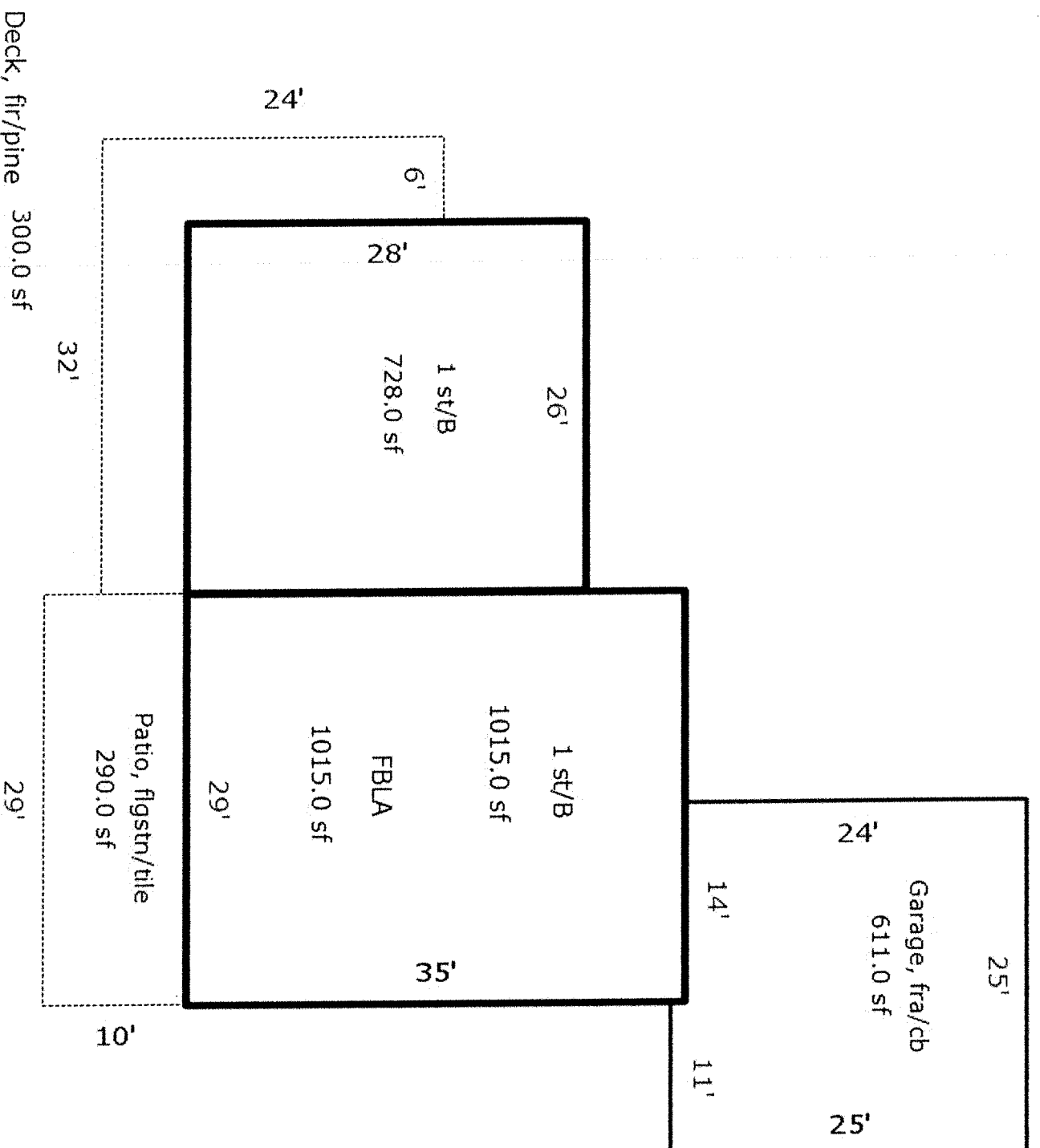
Summary of Assessment	
Land	\$109,900
Improvements	\$236,500
Total value	\$346,400

Land							Description	Assess Value
Qty	Land Use	Width	Depth	Square Feet	Acres	Water Frontage		
1	Residential	200	370	108,900	2.500	None	Land value per county records	\$109,900

Residential Building			
Year built:	1997	Full basement:	1,743 SF
Year remodeled:		Crawl space:	
Stories:	1 story	Rec room (rating):	
Style:	Ranch	Fin bsmt living area:	1,015 SF
Use:	Single family	First floor:	1,743 SF
Exterior wall:	Split log	Second floor:	
Masonry adjust:		Third floor:	
Roof type:	Asphalt shingles	Finished attic:	
Heating:	Gas, forced air	Unfinished attic:	
Cooling:	No A/C	Unfinished area:	
Bedrooms:	3	Garage	611 SF
Family rooms:		Patio	290 SF
Baths:	3 full, 0 half	Deck	300 SF
Other rooms:			
Whirl / hot tubs:			
Add'l plumb fixt:			
Masonry FPs:	1 stacks, 2 openings		
Metal FPs:			
Gas only FPs:		Grade:	B
Bsmt garage:		Condition:	Good
Shed dormers:		Energy adjustment:	No
Gable/hp dorm:		Percent complete:	100%



Total living area is 2,758 SF; building assessed value is \$228,800



2019 Property Records for Town of Crescent, Oneida County

March 8, 2019

1				Other Building Improvement (OBI)	
Main Structure		Modifications (Type, Size)		Photograph	
OBI type:	W/S	Units:	1	Grade:	C
Const type:	Std construction			Condition:	Average
Year built:				% complete:	100%
# of identical OBIs: 1				Other Building Improvement (OBI)	
Main Structure		Modifications (Type, Size)		Photograph	
OBI type:	Utility shed, residential	Width:	12 LF	Grade:	C
Const type:	Frame	Depth:	24 LF	Condition:	Average
Year built:	1999	Fir area:	288 SF	% complete:	100%
					

PLB 67

1a-N



State and County
Permit Application
for Private Domestic Sewage Systems

State Permit # 15067
County Permit # 600-79
County Dane

CR 250-6

410-24

*DENOTES STATE APPROVAL REQUIRED

Date Approval Received from State if Required _____

State Plan I.D. # _____

A. OWNER OF PROPERTY

Mailing Address:

Don & Peterson 111 EAST VERONA AVE VERONA WISCONSIN 53593

B. LOCATION: 1/4 1/4, Section 19, T 36 N, R 8 E (or) W Lot# _____ City _____

Subdivision Name, _____ nearest road, lake or landmark Blk# _____ Village _____

Township CRASCEN

C. TYPE OF OCCUPANCY: *Commercial _____ *Industrial _____ *Other (specify) _____ *Variance _____

Single family X Duplex _____ No. of Bedrooms 2 No. of Persons _____

D. SEPTIC TANK CAPACITY 800 Total gallons No. of tanks 1

HOLDING TANK CAPACITY _____ Total gallons No. of tanks _____

Prefab concrete X Poured-in-Place _____ Steel _____ Fiberglass _____ Other (specify) _____

New Installation _____ Replacement _____

Lift Pump Tank or Siphon Chamber _____ Total gallons Prefab concrete _____ Poured-in-Place _____ Other (Specify) _____

E. EFFLUENT DISPOSAL SYSTEM: Percolation Rate _____ Total Absorb Area 410 sq. ft.

New _____ Replacement _____ Alternate (Specify) _____

Seepage Trench: _____ No. of Lineal Ft. _____ Width _____ Depth _____ Tile depth (top) _____ No. of Trenches _____

Seepage Bed: X Length 23' Width 18' Depth 36" Tile depth (top) 24" No. of Lines 3

Seepage Pit: _____ Inside diameter _____ Liquid Depth _____ No. of Seepage Pits _____

Percent slope of land Final Distance from critical slope 20'

WATER SUPPLY: Private ☒ Joint ☐ Community ☐ Municipal ☐

Owners name as listed on EH 115 if other than present owner:

I, the undersigned, do hereby certify that the information I have reported is in accord with Section H62.20, Wisconsin Administrative Code, and that I have sized the effluent disposal system from the EH-115 prepared by the Certified Soil Tester,

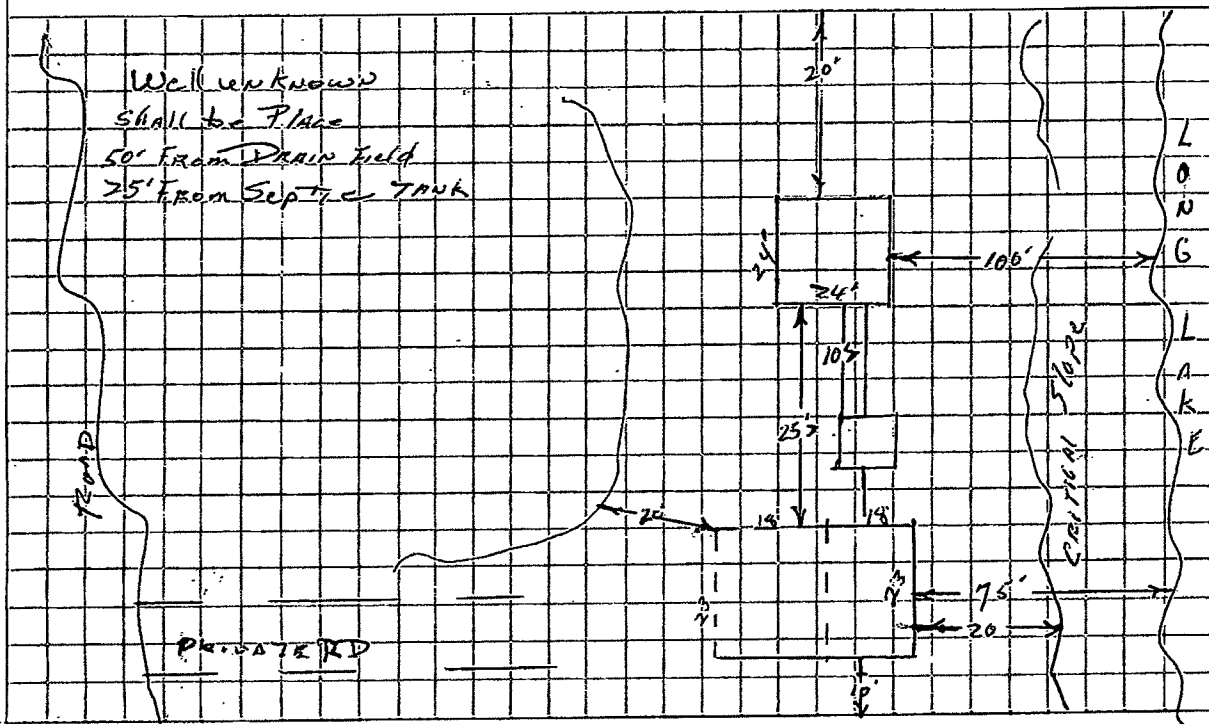
NAME Joseph A. Mahner C.S.T. # 55-1367 and other information

obtained from OWNER (owner/builder).

Plumber's Signature Joseph A. Mahner MP/MPSW# 5621 Phone # 282-5791

Plumber's Address Pt 4 Rhinelander Wis 54501

PLAN VIEW: Provide sketch below of system (include direction of slope and all distances in accord with H62.20. Well location shall be included on the sketch. Indicate or dimension location of all wells on the property or neighbors property. If well has not been drilled please indicate.



Do Not Write in Space Below - FOR COUNTY AND STATE DEPARTMENT USE ONLY

Date of Application _____ Fees Paid: State _____ County _____ Date _____

Permit Issued/Revised (date) 11-8-79 Issuing Agent Name _____

Inspection Yes _____ No _____ State Valid# _____

1. county (white copy) 3. owner (green copy) DIVISION OF HEALTH AND SAFETY, MADISON, WI 53701

2. state (pink copy) 4. plumber (canary copy) ONEIDA COUNTY

RHINELANDER, WIS. 54501 Revised Date 7/1/78

WISCONSIN DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF HEALTH, BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 309

MADISON, WISCONSIN 53701

REPORT ON SOIL BORINGS AND PERCOLATION TESTS

LOCATION: 1/4, 1/4, Section 17, T26N, R6E (or) W. Township or Municipality CRESCENT
 Lot No. 18, Block No. Long Lake Estates County 5543
 Owner's Name: DOUG PATTERSON Subdivision Name 111 EAST VERONA AVE VERONA WISCONSIN 53591
 Mailing Address: _____
 TYPE OF OCCUPANCY: Residence X No. of Bedrooms 2 Other _____
 EFFLUENT DISPOSAL SYSTEM: NEW X ADDITION _____ REPLACEMENT _____
 DATES OBSERVATIONS MADE: SOIL BORINGS Nov. 4, 1979 PERCOLATION TESTS _____
 SOIL MAP SHEET 2-246 SOIL TYPE Cobble CS Sayner-Vilas

PERCOLATION TESTS

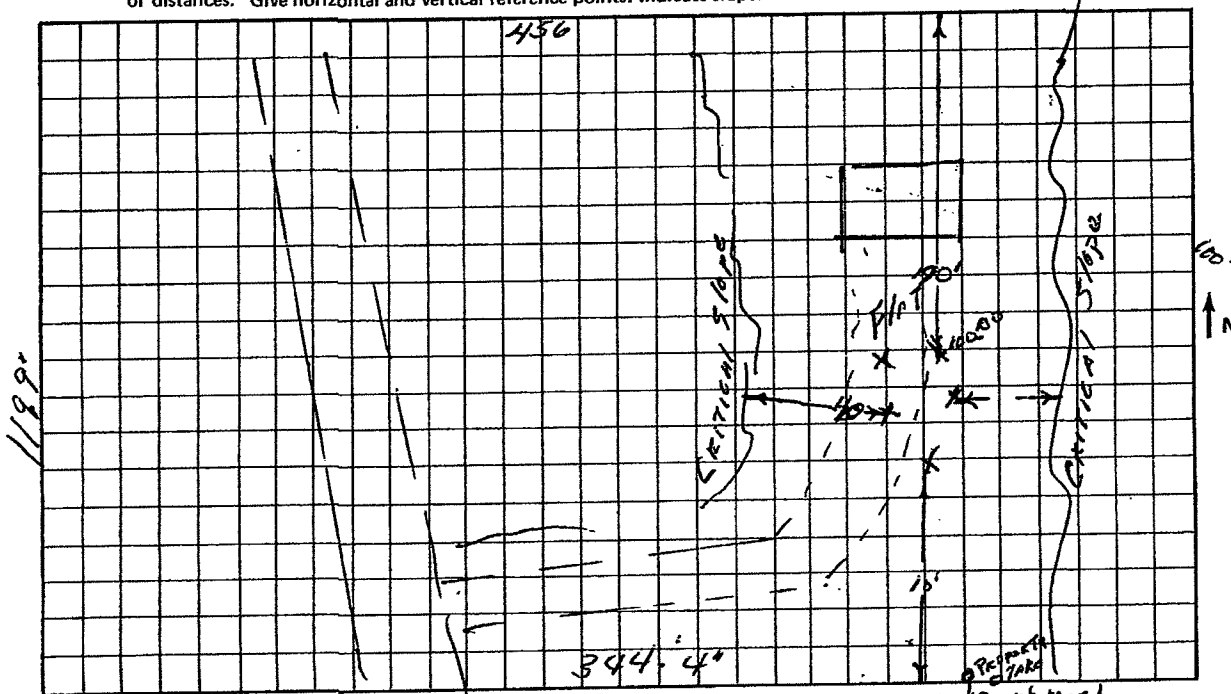
TEST NUMBER	DEPTH INCHES	CHARACTER OF SOIL THICKNESS IN INCHES	HOURS SINCE HOLE 1ST WETTED	WATER IN HOLE AFTER SWELLING	TEST TIME INTERVAL IN MINUTES	DROP IN WATER LEVEL, INCHES			RATE MIN/IN
						PERIOD 1	PERIOD 2	PERIOD 3	
P-									
P-					3-10				
P-									

SOIL BORING TESTS

TEST NUMBER	TOTAL DEPTH INCHES	DEPTH TO GROUNDWATER, INCHES		CHARACTER OF SOIL WITH THICKNESS, INCHES (DEPTH TO BEDROCK IF OBSERVED)
		OBSERVED	ESTIMATED HIGHEST	
B-1	72"	NONE		72" Cobble CS
B-34	72"	NONE		72" Cobble CS
B-5	72"	NONE		72" Cobble CS

PLAN VIEW (Locate percolation tests, soil bore holes and suitable soil areas.)

Indicate on the plan the location and square feet of suitable areas. Indicate number of square feet of absorption area needed for building type and occupancy. 820' Indicate scale OK
 or distances. Give horizontal and vertical reference points. Indicate slope.



I, the undersigned, hereby certify that the soil tests reported on this form were made by me in accord with the procedures and methods specified in the Wisconsin Administrative Code, and that the data recorded and location of test holes are correct to the best of my knowledge and belief.

Name (print) Joseph A. Madnes Certification No. 55-1369
 Address 214 Riverside W.S. 5401
 Name of installer if known Joe P. Kumb... 9th Ave
 CST Signature Joseph A. Madnes

ONEIDA COUNTY PLANNING & ZONING
INSPECTION SHEET

79-600

- CRESCENT -

Name: DOUG. PETERSON
(Print)
Premises number LOT 18
Direction to premises or lot _____

Legal description SEC. 19. T36N-R8E
Road or street OFF LONG LAKE RD.
Name of lake or river LONG LAKE

BUILDING PERMIT

1. Was the building permit posted? _____ Permit number ?
2. Type of building (cottage, garage, mobile home, etc.) New Dwelling
Size of building _____
3. Do all parts of the building meet the set back requirements (75 feet from water front, 10 feet from lot lines, 60 feet from center of town road, 70 feet from center of county highway, 80 feet from center of state or federal highway and 20 feet off R.O.W. line) Yes
If not explain: _____
4. Has the regulation pertaining to cutting of trees been complied with? Yes
If not, explain. _____
5. Has the regulation pertaining to filling, grading, lagooning and dredging been complied with? Yes
If not, explain. _____

SANITARY PERMIT

1. Was the permit posted? Yes Permit number 15067
2. Date notified of inspection 11-8-79 Time 1:10 PM
3. Type of building (cottage, garage, mobile home, etc.) New Dwelling
4. Are all parts of septic tank, drain field, dry well 10 feet from rear and side yards, 50 feet from the high water mark of the lake or stream, 10 feet from the R.O.W. line? Yes
If not, explain. _____
5. Is the septic tank 10 feet from all buildings and 25 feet from the well? Yes If not, explain. _____
6. Is the disposal field or dry well 25 feet from all buildings, 50 feet from the well, 20 feet from a 20% or more slope? Yes
7. Is the well 2 feet from the dwelling, 25 feet from septic tank, 50 feet from disposal field, 5 feet from lot line? Yes
8. Is there at least 3 feet of soil between the bottom of the soil absorption system and high ground water or bedrock? Yes
9. Septic tank size? 800 Sq. feet of drain field? 414 - 3 lines
Size of seepage pit: Inside Diameter _____ Liquid Depth _____
Date of Inspection 11-9-79 Inspector, Oneida County Planning & Zoning Office Vernon P. Grant

OCCUPANCY PERMIT

Name: DOUG. Peterson (Print) _____ having conformed with all of the requirements
of Oneida County Zoning Codes is hereby issued an Occupancy Permit, pursuant to Chapter 9.30 (A) (B) (C) of the Oneida County Zoning Code.
Name: _____ (Print) _____ having not conformed with all of the requirements
of the Oneida County Zoning Code, to-wit: _____

is not issued a Certificate of Land Use or an Occupancy Permit, pursuant to Chapter 9.28 & 9.29 of the Oneida County Zoning Code, the land cannot be used and the building cannot be occupied.

By: Vernon P. Grant Zoning Administrator
Inspector