

Permit No. V26-139

Permit Fee: \$375.00

APPLICATION FOR TEMPORARY MOTOR VEHICLE PERMIT
CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Mission Point Resort Contact Name: Dennert Ware

Address: 6633 Main Street City: Mackinac Island State: MI

Zip: 49757 Phone: 906-847-3028 Email: dware@missionpoint.com

Work Site: Mission Point Propane Tanks

Reason Vehicle is Needed: Propane Delivery

Explanation of why the work cannot be reasonably performed, accommodated, or accomplished by a horse drawn dray (documentation & photos of equipment & materials may be required): _____

The volume of propane needed for the operation could not be safely transported by horse dray due to weight and the hazard it would present.

Vehicle Description: Kenworth Truck #702
Make Kenworth Model/Description Truck

Proposed Starting & Ending Date: 9/23/26-9/25/26 Total Days of Usage: > 1 Day

Overnight Parking Location: Not Necessary

Boat Line & Dock: Arnold Freight to British Landing

Proposed Travel Route: British Landing to East Side of Island VIA M-185 to Mission Point Resort

The submittal of this application does not imply approval from the City of Mackinac Island. Approved permits are based on the information provided on the application. Any use or purpose which is contrary to approved uses and purposes or violation of any other local ordinances or state law constitutes a violation of permits conditions and will be punishable as a civil infraction and revocation of the permit.

Applicants Signature: [Signature] Date: 9/9/26

Applications will not be submitted to City Council for approval until the fee has been received.

Please visit: www.cityofmi.org for council meeting dates & times

Mailing address & Payments made to: City of Mackinac Island, P. O. Box 455, Mackinac Island, MI, 49757

Phone: 906-847-3702

Fax: 906-847-6430

Email: clerk@cityofmi.org

City Use: Application Received: 9/14/26 Fee Received: _____ Ck #: _____

Date of Action on Application: 9/16/26 Approved: _____ Denied: _____ By: Council

Comments: _____