City of Mackinac Island P.O. Box 455 Mackinac Island, MI 4975 Telephone: (906 847-3702 Fax: (906)847-6430 Fmail: clerk@cityofmi.org

Email: clerk@citvofmi.org Mackinac Island, MI 49757 **APPLICATION FOR BUSINESS LICENSE** Please indicate the type of business license you are applying for. Check only one: New Business (A business located within the City which was not licensed the previous year.) Renewai Business (A business licensed the previous year and identical to previously approved license.) | x | Off-Island Business (A business operating within the City but not physically located within the City.) Name of Business: Standard Electric Company / Graham Motor & Generator Service Name of Owner, Agent, or Manager: Bill Gray President Location of Business: 1610 W South Airport Road, Traverse City MI 49686 Mailing Address: 1610 W South Airport Road Telephone No: 231-929-1829 City, State, & Zip: Traverse City MI 49686 231-946-3734 Type of Business: Generator Repair Email Address: State of Michigan Sales Tax Number / Social Security or FEIN: 38-1060870 ls this business a licensed trade regulated by the State of Michigan (contractor, architect, etc) Yes No (If yes, please include a copy of your state license certificate) Horse or bicycle related businesses please include a copy of your certificate of liability insurance. NUMBER OF SIGNS SIGNAGE: List the number and describe the type and location of all signs. (Refer to the City's Sign and Outdoor Merchandise Display Ordinance for guidance.) Also, check whether each sign is new or existing. TYPE & LOCATION **EXISTING** The following information is required for all businesses. If there are any changes to existing signage or new signage, please fill out a Sign Permit Application and provide drawings, sketches, and/or photos for each sign; showing all pertinent signage details. I affirm that the information provided in this application is true and I have the authority to provide such information. Applicant's Signatur Make checks payable to the City of Mackinac Island DO NOT WRITE IN THIS AREA - CITY USE ONLY Fee Rec'd: Check No. Date Rec'd: Approved \_\_\_\_\_\_ Denied \_\_\_\_\_ License No. \_25-251 Council Action Date: L