

#150.00 per location x 2

Permit No. V25-0600

Permit Fee: \$300.00

APPLICATION FOR TEMPORARY MOTOR VEHICLE PERMIT

CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Nelbud / Dusty Coleman Contact Name: Jeremy Vanhaisma/ Dusty Coleman

Address: 7996 Clyde Park SW City: Byron Center State: MI

Zip: 49315 Phone: (616) 430 - 6807 / (906) 430 - 5240 Email: kbeerman@nelbud.com / dcoleman@grandhotel.com

Work Site: Grand Hotel & Gate House

Reason Vehicle is Needed: Detailed Hood Cleaning for hotel kitchen hoods and Gate House kitchen hoods

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): _____

Many hotel hoods are in need of in depth cleaning beyond what they have had in prior years.

The Nelbud van has a mounted industrial pressure washing system highly capable of completing the required cleaning

to the fullest, that other power washers and tools have not been able to achieve as adequately.

Vehicle Description: Chevy

Make

Work Van

Model/Description

Proposed Starting & Ending Date: 4/15/2025 - 4/18/2025 Total Days of Usage: 3 (leaving AM of 18th)

Overnight Parking Location: Grand Hotel Pro Shop or Back Dock

Boat Line & Dock: Arnold Freight

Proposed Travel Route: Coal Dock - Astor Str. - Market Street - Cadotte Ave - Grand Hotel

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: Dustin Coleman Date: 3/28/2025

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: 3/28/25 Fee Received: _____ Ck #: _____

Date of Action on Application: 4/2/25 Approved: _____ Denied: _____ By: Council

Comments: _____

(03.05.2025)