

Permit No. 23-429

APPLICATION FOR TEMPORARY MOTOR VEHICLE PERMIT
(ONE APPLICATION FOR EACH VEHICLE AT EACH JOB LOCATION)

CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Little Traverse Tree Service The Inn at Stonecliffe Permit Fee: \$275.00

Contact Name: Scott Langlois Ben Horn Date: 11DEC23

Address: 289 S Ellsworth City: Petoskey

State: Michigan Zip: 49770 Fax#: _____

Phone #: 231-330-4276 Email Address: littletraversetreeservice@gmail.com

Work Site: The Inn at Stonecliffe

Reason Vehicle is Needed: Tree Trimming & Removal

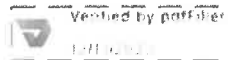
Vehicle Description: Platform Basket (Scissor Lift) 2210
Make Model/Description

Proposed Starting & Ending Date: 18DEC23-31DEC23 Total Days of Usage: 14

What Boat Line & Dock: Arnold Freight-British Landing

Proposed Travel Route: State Dock, M-185, British Landing Rd, State Rd, British Landing Rd, Annex Rd,
Stonecliffe Rd, Cudahy Circle

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: _____ Date: 11DEC23

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

Please visit: cityofmi.org for council dates & times

Mailing address: 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: 12.12.23 Fee Received: _____ Ck #: _____

Date of Action on Application: 12.13.23 Approved: _____ Denied: _____ By: Council

Comments: _____

Permit No. 23-430

APPLICATION FOR TEMPORARY MOTOR VEHICLE PERMIT
(ONE APPLICATION FOR EACH VEHICLE AT EACH JOB LOCATION)

CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Little Traverse Tree Service The Inn at Stonecliffe Permit Fee: \$425.00

Contact Name: Scott Langlois Ben Horn Date: 11DEC23

Address: 289 S Ellsworth City: Petoskey

State: Michigan Zip: 49770 Fax#: _____

Phone #: 231-330-4276 Email Address: littletraversetreeservice@gmail.com

Work Site: The Inn at Stonecliffe

Reason Vehicle is Needed: Tree Trimming & Removal

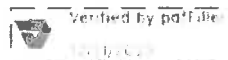
Vehicle Description: 2011 Freightliner M-2
Make Model/Description

Proposed Starting & Ending Date: 18DEC23-31DEC23 Total Days of Usage: 14

What Boat Line & Dock: Arnold Freight-British Landing

Proposed Travel Route: State Dock, M-185, British Landing Rd, State Rd, British Landing Rd, Annex Rd,
Stonecliffe Rd, Cudahy Circle

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Applicants Signature: _____ Date: 11DEC23

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City Use: Application Received: 12.12.23 Fee Received: _____ Ck #: _____

Date of Action on Application: 12.13.23 Approved: _____ Denied: _____ By: Council

Comments: _____

Permit No. T23-184

APPLICATION FOR TEMPORARY TRAILER PERMIT
(ONE APPLICATION FOR EACH TRAILER AT EACH JOB LOCATION)
CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Little Traverse Tree Service The Inn at Stonecliffe Permit Fee: \$75.00
Contact Name: Scott Langlois Ben Horn Date: _____
Address: 289 S Ellsworth Rd City: Petoskey
State: MI Zip: 49770 Fax#: _____
Phone #: 231-330-4276 734-657-7949 Email Address: littletraversetreeservice@gmail.com

Work Site/Destination: The Inn at Stonecliffe

Reason Trailer is Needed: Move tree trimming equipment to site

Trailer Description: Loadtrail Equipment Trailer 10,000lbs
Make Model/Description Weight

Proposed Starting & Ending Date: 18DEC23-31DEC23 Total Days of Usage: 14

What Boat Line & Dock: Arnold Freight - British Landing
State Dock, M-185, British Landing Rd, State Rd, British Landing Rd, annex Rd,
Proposed Travel Route: Stonecliffe Rd, Cudahy Circle

Trailers pulled by horse and dray CANNOT EXCEED 3000 pounds

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Applicants Signature: [Signature]  Date: 11DEC23

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

Please visit: cityofmi.org for council dates & times.
Mailing address: 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: 12.12.23 Fee Received: _____ Ck #: _____
Date of Action on Application: 12.13.23 Approved: _____ Denied: _____ By: Council
Comments: _____