

#30 x 5 locations

Permit No. T26-116

Permit Fee: \$150.00

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

Applicant Name: BELONGA PLUMBING AND HEATING

Contact Name: STEVEN PAQUIN

Address: 115 ELLIOTT ST

City: ST. IGNACE

State: MI

Zip: 49781

Phone: 906 643 9595

Work Site: IROQUOIS HOTEL, BICYCLE STREET INN, ISLAND HOUSE HOTEL, CHIPPEWA HOTEL, MURRAY HOTEL

Reason Trailer is Needed: ① ② ③ ④ ⑤

If application is for a trailer to be pulled by a vehicle - Explanation of why the work cannot be reasonably performed, accommodated, or accomplished by a horse drawn dray. Documentation and / or photos may be required. The Mackinac Island Service Company enforces a 3,000 pound weight limit: _____

Trailer Description: SULLAIR

185 AIR COMPRESSOR

2060

Make

Model/Description

Weight

Proposed Starting & Ending Date: 11/2/26-12/30/26

Total Days of Usage: 60

Overnight parking location: AT EACH HOTEL

Boat Line & Dock: ARNOLD FREIGHT-COAL DOCK

Proposed Travel Route: COAL DOCK TO EACH HOTEL BY HORSE AS NEEDED

If any of the following approvals are required for your project, an approved copy must be submitted

☐ Certificate of Appropriateness (Granted by the Historic District Commission)

☐ Building Permit (Granted by the Building & Zoning Department)

☐ Zoning Permit (Granted by the Building & Zoning Department)

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: 10/12/26

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

Please visit: www.cityofmi.org for Council 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: 10/12/2026 Fee Received: _____ Ck #: _____

Date of Action on Application: 10/14/26 Approved: _____ Denied: _____ By: Council

Comments: _____