GENERAL APPLICAT	TION FOR	WORK LOCATE	ED WITHIN	A HISTOR	CONTRICT
<ul><li>☐ Minor Work ( Comple</li><li>☐ New Construction (Complete</li><li>☐ Demolition (Complete</li></ul>	mplete Secti	ion B and refer to Gene	eral Directions		EIVE
Application Deadline: Application Deadline: Application Business days before each Confollowing month. Decision by application materials are first respectively.	<b>mmission</b> In the Commis	Meeting. Late applica	tions will be pl	aced oh the a	renda for the
A) MINOR WORK					K
PROPERTY LOCATION:	<b>8309</b> (Number)	(Street)	VE O	51 · 650 (Property T	0.025.00 (ax ID#)
PROPERTY OWNER					· · · · · · · · · · · · · · · · · · · ·
Name:ENNIFER .	SULKOW.	SK/ Email Addre	ss:		
Address: P.O Box		MARKINA	SLAND	M)	4975
(Street)	1717	(City)		(State)	(Zip)
Telephone: (134)94/- (Home)	VIF!	(Business)		(Fax)	
APPLICANT/CONTRACTO	R			(1 4.1)	
Name: CHAD RUDDLE		Email Addres	s: roldled	had @	Jahn. rom
Address: 62 TRUCKE				11 1	49781
Address: 62 TRUCKE (Street)		57, (GNACE (City) (906) 430-5		(State)	(Zip)
Telephone: (906)643-85	97	(906)430-5	361		
(Home)		(Business)		(Fax)	
Attach a brief description Attach one or more photos showing the area, item or feature Commission may require addition If the Building Official determine the applicant to complete an App which will then be referred to the	graph(s) of the proposed to contain the proposed to contain the proposed that the proposed that the proposed to contain the pr	the whole building incles to be repaired or replace tion necessary to deter roposed work is not M	uding façade ar ed. The Buildin mine the work inor Work, the	nd any relevang Official or to be Minor V	nt elevations Historic District Work.
I certify that the information pro- true to the best of my information or will have before the proposed pro- requirements of the Stille-DeRosset	n, knowledg oject completi	e and belief; and that the condate, a fire alarm system state construction code a	ne property when	e work will be	undertaken has,
Signature (		Signature	NO.CD	0-00c	0.050
Please Print Name		Please Print Non	DIT_A		
		Please Print Nam	7.0	15-23	5
NOTE: All photos, drawings and phray be returned to the applicant upo	nysical sample on request afte	es, etc., become in the	of the HDC	/City of Mackin	) nac Island. These
M.	ACKINAC RKET STR	A AND SUPPORTIN ISLAND BUILDING REET, MACKINAC I IONE: (906) 847-403	OFFICIAL SLAND, MI 4		
File Number CD23 · 03	25.053	Date Received: 7.5	5.23	Fee: <b>\$/00</b>	

Work Completed Date: