

Permit No. V26-080

Permit Fee: \$250.00

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

Applicant Name: BELONGA EXCAVATING Contact Name: CHAD BELONGA

Address: 903 CHURCH ST. PO BOX 93 City: ST. IGNACE State: MI

Zip: 49781 Phone: 906-643-7660 Email: belongaexcavating@outlook.com

Work Site: STONECLIFFE - 2172 ANNEX ROAD

Reason Vehicle is Needed: INSTALL SEWER GRINDER

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):

Vehicle Description: BACKHOE

Make _____ Model/Description _____

Proposed Starting & Ending Date: 5/11/26 Total Days of Usage: 1-3 DAYS

Overnight Parking Location: _____

Docking Location: EQUIPMENT IS ON ISLAND

British Landing State Dock requires additional permits from the State Park Commission

Proposed Travel Route: FROM BRITISH LANDING TO JOB SITE

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: *TR Johnston* Date: 4/27/2026

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: _____	Fee Received: _____	Ck #: _____
Date of Action on Application: _____	Approved: _____	Denied: _____
By: _____		
Comments: _____		