	GENERAL APPLICATION FOR WORK LOCATE	D WITHIN A HISTORIC DISTRICT	
DECEIVE	Minor Work (Complete Section A and refer to General D New Construction (Complete Section B and refer to General D Demolition (Complete Section B and refer to General Direction B and refer to General D	irections) ral Directions and Item B)	
SEP - 8 2025	Application Deadline: Application and materials must be completusiness days before each Commission Meeting. Late application will most necessarily application materials are first received.	ons will be placed on the agenda for the	
	A) MINOR WORK	A SHORT STANDARD	
	PROPERTY LOCATION: 7435 MAIN St. (Number) (Street)	051-550-019-00	
	(Number) (Street)	05/-550-019-00 (Property Tax ID#)	
	PROPERTY OWNER		
	Name: Peter Deckert Email Address: Address: Po Box 514 MARICINAR ISL. (Street) (City) Telephone: 810-543-1812	s. feterdeckerto vahoo.com	
	Address: POBOX 514 MARKINAR ISL.	MRh 48757	
	(Street) (City) Telephone $9/0$, $5437/8/2$	(State) (Zip)	
	(Home) (Business)	(Fax)	
	APPLICANT/CONTRACTOR		
	Name: Bloxsom Roofing Email Address	saww.bloxsonroofing.com	
	Name: BLOKSOM ROOFING Email Address Address: 3733 BLAIR TOWNHALL ROAD (Street) (City) Telephone: 231-943-8781 (Heme) (Business)	TRAVERSECITY MI. 49685	
	Telephone: 231-943-8786	(State) (Zip)	
	(Home) (Business)	(Fax)	
	Attach a brief description of the nature of the minor work pro Attach one or more photograph(s) of the whole building inclusions the area, item or feature proposed to be repaired or replace Commission may require additional information necessary to determ	uding façade and any relevant elevations d. The Building Official or Historic District mine the work to be Minor Work.	
	If the Building Official determines that the proposed work is not Minor Work, the Building Official shall direct the applicant to complete an Application for New Work and/ or Application for Demolition or Moving work which will then be referred to the HDC.		
	I certify that the information provided in this Application and the dot true to the best of my information, knowledge and belief; and that the or will have before the proposed project completion date, a fire alarm system requirements of the Stille-DeRossett-Hale single state construction code at the No. SIGNATURES Signature Please Print Name Date Please Print Name	the property where work will be undertaken has, the em or a smoke alarm complying with the ct, 1972 PA 230, MLC 125.1501 to 125.1531 (25.019.079(H) A 9.8.25	
	NOTE: All photos, drawings and physical samples, etc., become the proper may be returned to the applicant upon request after they are no longer need	erty of the HDC/City of Mackinac Island. These led by the Commission/City.	
	RETURN THIS FORM AND SUPPORTING MATERIALS TO: MACKINAC ISLAND BUILDING OFFICIAL 7358 MARKET STREET, MACKINAC ISLAND, MI 49757 PHONE: (906) 847-4035		
1	File Number: C35 019.079(H) Date Received: 9 8 Received By: Perery Work	Fee: 35 -	

Replace rubber membrem Roof.

File No.	Ca5.019.079(1	+)
Exhibit	В	
Date	9.8.25	
Initials	KQ	

File No. <u>Ca5.</u> 019. 079 (H)

Exhibit C

Date 9.8.25

Initials KP





