

Permit No. _____

Permit Fee: _____

APPLICATION FOR TEMPORARY MOTOR VEHICLE PERMIT

CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Pete Badour Contact Name: Pete Badour

Address: 6966 MAIN ST

City: Mackinac Island State: MI Zip: 49757 Phone: 906-430-4245

Work Site: Island House Hotel

Reason Vehicle is Needed: Pool Deck reinforcement

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): Pumps and materials are part of an enclosed vehicle system.

Vehicle Description: ²⁰²² Chevrolet Utility
Make Model/Description

Proposed Starting & Ending Date: 11/2/2026 Total Days of Usage: 1

Overnight Parking Location: NONE, ONLY ONE DAY JOB.

Docking Location: Coal Dock

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

Proposed Travel Route: Coal Dock, Down Main to Island House Hotel and back after a job.

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:  Date: 9/15/2026

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: _____