

1 vehicle + 1 trailer

Permit No. V25-007

APPLICATION FOR TEMPORARY MOTOR VEHICLE PERMIT
(ONE APPLICATION FOR EACH VEHICLE AT EACH JOB LOCATION)

CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Harbour View Inn / Action Services Corp. Permit Fee: _____
Contact Name: Sam Barnwell Date: 1/8/25
Address: PO Box 1207 City: Mackinac Island
State: MI Zip: 49757 Fax#: _____
Phone #: 906-430-7310 Email Address: sam@hishotels.com
Work Site: 6876 Main Street - Harbour View Inn
Reason Vehicle is Needed: Welding repairs at HVI
Vehicle Description: F350 with 16' trailer welding truck
Make Model/Description
Proposed Starting & Ending Date: 1/13 - 1/24 Total Days of Usage: 14 day
What Boat Line & Dock: N/A
Proposed Travel Route: As directed by MIPD escort Coal Dock to site

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: Sam Barnwell Date: 1/8/25

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

Please visit: cityofmi.org for council dates & times

Mailing address: 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: 1/8/2025 Fee Received: _____ Ck #: _____
Date of Action on Application: 1/8/25 Approved: ☐ Denied: ☐ By: Council
Comments: _____

Permit No. T25-004

APPLICATION FOR TEMPORARY TRAILER PERMIT

(ONE APPLICATION FOR EACH TRAILER AT EACH JOB LOCATION)

CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Harbour View Inn/Action Services Permit Fee: ~~\$\$\$~~ \$75.00
Contact Name: Sam Barnwell Date: 1/8/25
Address: PO Box 1207 City: Mackinac Island
State: MI Zip: 49757 Fax#: _____
Phone #: 906-430-7310 Email Address: sam@hishotels.com
Work Site/Destination: 6876 Main Street
Reason Trailer is Needed: Welding equipment for repair at Harbour View
Trailer Description: Welding trailer
Make _____ Model/Description _____ Weight _____
Proposed Starting & Ending Date: 1.13.25 - 1.24.25 Total Days of Usage: 14
What Boat Line & Dock: Arnold Freight
Proposed Travel Route: Coal dock to HVI

Trailers pulled by horse and dray CANNOT EXCEED 3000 pounds

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City Use: Application Received: <u>1/8/2025</u>	Fee Received: _____	Ck #: _____
Date of Action on Application: <u>1/8/25</u>	Approved: <input type="checkbox"/>	Denied: <input type="checkbox"/> By: <u>Council</u>
Comments: _____		