

CITY OF MACKINAC ISLAND
PLANNING COMMISSION & BUILDING DEPARTMENT
APPLICATION FOR ZONING ACTION

www.cityofmi.org kep@cityofmi.org 906-847-6190 PO Box 455 Mackinac Island, MI 49757

APPLICANT NAME & CONTACT INFORMATION:

Perkins Coie LLP

3123248661

vjohnston@perkinscoie.com

Phone Number

Email Address

Please complete both sides of application.

The Fee and five (5) copies of the application, plans and all required documents must be submitted to the Zoning Administrator fourteen (14) days prior to the scheduled Planning Commission Meeting.

Property Owner & Mailing Address (If Different From Applicant)

GHMI Resort Holdings, LLC, 100 St. Paul St., Suite 800, Denver, CO 80206

Is The Proposed Project Part of a Condominium Association?

No

Is The Proposed Project Within a Historic Preservation District?

No

Applicant's Interest in the Project (If not the Fee-Simple Owner):

No

Is the Proposed Structure Within Any Area That The FAA Regulates Airspace?

Not Applicable

Is a Variance Required?

No

Are REU's Required? How Many?

Not Applicable /

Type of Action Requested:

___ Standard Zoning Permit

___ Appeal of Planning Commission Decision

___ Special Land Use

___ Ordinance Amendment/Rezoning

___ Planned Unit Development

___ Ordinance Interpretation

X Other Lot recombination/lot line adjustment

Property Information:

A. Property Number (From Tax Statement): 051-675-017-50; 051-675-017-35; 051-675-017-96

B. Legal Description of Property: See attached Exhibit A

C. Address of Property: Vacant Land

D. Zoning District: HB; ROS; R-1 (lot line adjustment affects R-1 only)

E. Site Plan Checklist Completed & Attached: Not applicable

F. Site Plan Attached: (Comply With Section 20.04 of the Zoning Ordinance) See attached survey

G. Sketch Plan Attached: Not applicable

H. Architectural Plan Attached: Not Applicable

I. Association Documents Attached (Approval of project, etc.): Not Applicable

J. FAA Approval Documents Attached: Not Applicable

K. Photographs of Existing and Adjacent Structures Attached: Not Applicable

Proposed Construction/Use:

A. Proposed Construction:

___ New Building

___ Alteration/Addition to Existing Building

___ Other, Specify _____

B. Use of Existing and Proposed Structures and Land:

Existing Use (If Non-conforming, explain nature of use and non-conformity):

N/A

Proposed Use: N/A

C. If Vacant:

Previous Use: Golf course

Proposed Use: Golf course

STATE OF MICHIGAN)
COUNTY OF MACKINAC) ss.

AFFIDAVIT

The applicant agrees that the permit applied for, if granted, is issued on the representation made herein and that the permit issued may be revoked without further notice on any breach of representation or conditions.

The applicant further understands that any permit issued on this application will not grant any right of privilege to erect any structure or to use any premises described for any purposes or in any manner prohibited by the Zoning Ordinance, or by other codes or ordinances or regulations of the City of Mackinac Island.

The Applicant further agrees to furnish evidence of the following before a permit will be granted:

- A. Proof of ownership of the property; and/or other evidence establishing legal status to use the land in the manner indicated on the application.
- B. Proof that all required federal, state, county, and city licenses or permits have been either applied for or acquired.
- C. Other information with respect to the proposed structure, use, lot and adjoining property as may be required by the Zoning Administrator in accord with provisions of the Mackinac Island Zoning Ordinance.

The Applicant further agrees to notify the Zoning Administrator when construction reaches the stage of inspection stated on the permit, if granted. Upon completion of construction to the structure(s) or land the Zoning Administrator shall inspect the premises for compliance with the Mackinac Island Zoning Ordinance and the terms of this permit. Upon determination of compliance, an occupancy permit may be issued. It is further understood that pursuant to the City of Mackinac Island Zoning Ordinance, No. 479 and amendments, adopted November 2013, unless a substantial start on the construction is made within one year, unless construction is completed within one and one-half years from the date of issuance of the permit, this permit shall come under review by the Planning Commission and may either be extended or revoked.

The undersigned affirms that he/she or they is (are) the applicant and the Attorney-in-fact (specify: owner, Lessee, Architect/Engineer, Contractor or other type of interest) involved in the application and that the answers and statements herein attached are in all respects true and correct to the best of his, her or their knowledge and belief. The applicant hereby further affirms that he/she or they has read the foregoing and understands the same. If the applicant is other than the owner, then a notarized affidavit from the owner, giving the applicant permission to seek the requested zoning action on their behalf, shall also be submitted with this application.

[Signature]
Signature

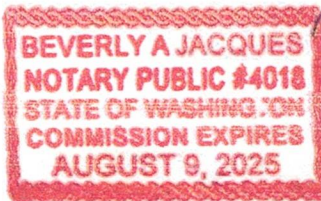
SIGNATURES

Signature

Nathan F. Fahrner
Please Print Name

Please Print Name

Signed and sworn to before me on the 26th day of February 2025



Beverly A. Jacques
Notary Public

King Washington
County, Michigan

My commission expires: 8/9/25

FOR OFFICE USE ONLY

Zoning Permit Issued: _____

Inspection Record:

	Inspection	Date	Inspector	Comments
1.				
2.				
3.				

Occupancy Permit Issued: _____

Revised October 2023

OFFICE USE ONLY

FILE NUMBER: HB25-050/97-011

FEE: \$400-

DATE: 2-26-25

CHECK NO: 2213409 INITIALS: KD

Revised October 2023