

Permit No.

T26-071

Permit Fee:

\$30.00**APPLICATION FOR TEMPORARY TRAILER PERMIT****CONDITIONS OF ALL TRAILER PERMITS ARE SUBJECT TO CHANGE**Applicant Name: Chippewa HotelContact Name: Roy ShryockAddress: 7221 103 Main StreetCity: Mackinac IslandState: MIZip: 49757Phone: 231 881 6860Work Site: Hoban Hill HousingReason Trailer is Needed: Adjust yard lights on buildings

If application is for a trailer to be pulled by a vehicle - Explanation of why the work cannot be reasonably performed, accommodated, or accomplished by a horse drawn dray. Documentation and / or photos may be required. The Mackinac Island Service Company enforces a 3,000 pound weight limit: _____

Trailer Description: Haulotte 4527A

Man Lift

2500

Make

Model/Description

Weight

Proposed Starting & Ending Date: 6/11/26Total Days of Usage: 5Overnight parking location: Hoban Hill PropertyBoat Line & Dock: Arnold FreightProposed Travel Route: Astor, Market, Cadotte**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: 6/5/2026**Applications will not be submitted to City Council for approval until the fee is received.**Please visit: www.cityofmi.org for Council 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.orgCity Use: Application Received: 6.8.26

Fee Received: _____

Ck #: _____

Date of Action on Application: 6.10.26 Approved: _____

Denied: _____

By: Council

Comments: _____