Permit No. V26-123 Permit Fee: —

# APPLICATION FOR TEMPORARY MOTOR VEHICLE PERMIT

**CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE**

**Applicant Name:** City of M.I. / DPW **Contact Name:** Jason St. Onge

**Address:** 7358 Market St. **City:** Mackinac Island **State:** MI

**Zip:** 49757 **Phone:** — **Email:** —

**Work Site:** Solid Waste Facility

**Reason Vehicle is Needed:** Container too heavy for the dray

**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):**

Too heavy for the dray

**Vehicle Description:** Dodge (Make) Ram 1500 (Model/Description)

**Proposed Starting & Ending Date:** June 29, 2026 **Total Days of Usage:** 1

**Overnight Parking Location:** Not needed

**Docking Location:** State Dock

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

**Proposed Travel Route:** State Dock → Dump

**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:** Danielle Leach **Date:** 6/24/26

**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: 6/24/26 Fee Received: — Ck #: —

Date of Action on Application: 6/24/26 Approved: _____ Denied: _____ By: Council

Comments: _____

(11.18.2025)

**Permit No.** T26-077 **Permit Fee:** —

# APPLICATION FOR TEMPORARY TRAILER PERMIT

**CONDITIONS OF ALL TRAILER PERMITS ARE SUBJECT TO CHANGE**

**Applicant Name:** City of M.I. / DPW **Contact Name:** Jason St. Onge

**Address:** 7358 Market St. **City:** Mackinac Island **State:** MI

**Zip:** 49757 **Phone:** — **Email:** —

**Work Site:** Solid Waste Facility

**Reason Trailer is Needed:** Pull Storage Container

**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:**

Exceeds weight limit

**Trailer Description:** Connex container —

**Make** **Model/Description** **Weight**

**Proposed Starting & Ending Date:** 6/29/2026 **Total Days of Usage:** 1

**Overnight parking location:** Not needed

**Boat Line & Dock:** State Dock

**Proposed Travel Route:** State Dock → Dump

**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:** _____

**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.org

**City Use:** Application Received: 6/24/26 Fee Received: — Ck #: —

Date of Action on Application: 6/24/26 Approved: _____ Denied: _____ By: Council

Comments: _____

(11.12.2025)