

Permit No. T24-061

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: Bob Hoffman Permit Fee: \$15.00
 Contact Name: 11 Date: 4-9-2024
 Address: 1255 S. Hospital Rd. City: Waterford
 State: MI Zip: 48327 Fax#: 248-363-7494
 Phone #: 248-343-4554 Email Address: hoffm2521@comcast.net
 Work Site/Destination: Hoffman Haus - Stonecliffe - 8704 Stonecliffe Dr.
 Reason Trailer is Needed: del New windows & trim
 Trailer Description: Continental Cargo 7'x14' enclosed 1500#
Make Model/Description Weight
 Proposed Starting & Ending Date: 4-26 to 5-5-24 Total Days of Usage: 10
 What Boat Line & Dock: Starline - St. Ignace
 Proposed Travel Route: _____

Trailers pulled by horse and dray CANNOT EXCEED 3000 pounds

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: Bob Hoffman Date: 4-9-2024

Application Received - 4.10.24

Date of Application Action - 4.17.24

Fee Received -

CK# -

Approved _____

Denied _____

By - Council