## 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

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Applicant Name: Cummins Sales & Serve	Permit Fee: Walv &
Contact Name: MATT DGENZER	Date: 3-6-24
Address: 722 N. Outer Dr.	City: SagiNEW
State: Zip:	
Phone #: 989 752 - 5200 Email Address: _ (	B330 @ cummins . com
Work Site: City of Mackingu DPW AND Reason Vehicle is Needed: Island Generator	MEDICAL CENTER
Reason Vehicle is Needed: Island Generator	annual Maintenance
Vehicle Description: Dodge  Make  Proposed Starting & Ending Date: 4-8-24 - 4-11-24	RAM 4500  Model/Description
Proposed Starting & Ending Date: 4-8-44 - 4-11-14T	otal Days of Usage:
What Boat Line & Dock: ArNOLD FREWHT - CO	nal Dock
Proposed Travel Route: DOCK to WORKSITE Note  -	WURK SITE TO HOTEL
The submittal of this application does not imply approval from the City of are based on the information provided on the application. Any use or pureuses and purposes or violation of any other local ordinances or state law conditions and will be punishable as a civil infraction and revocation of the submitted provided in the conditions and will be punishable as a civil infraction and revocation of the conditions are submitted.	rpose which is contrary to approved constitutes a violation of permits
Applicants Signature:	
Applications will not be submitted to City Council for ap	proval until the fee is received.
Please visit: cityofmi.org for council dates & times  Mailing address: City of Mackinac Island, P. O. Box 455, M  Phone: 906-847-3702 Fax: 906-847-6430	ackinac Island, MI, 49757 Email: clerk@cityofmi.org
City Use: Application Received: 3.6.24 Fee Received: Date of Action on Application: 3.20.24 Approved: Denied: Comments:	

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

CONDITIONS OF ALL MOTOR VEHICLE PERMITS ARE SUBJECT TO CHANGE

Applicant Name: Cummins Sales & Service Permit Fee: Was WE  Contact Name: Matt Daenzer Date: 36-24	
Contact Name: MATT DOENZER Date: 36-24	
Address: 772 N. OUTEK DV City: Saginaw	
State: Mi Zip: 4860   Fax#: 989-759 - 4194	
Phone #: 989 752 5200 Email Address: CB 330 @ Cummins. LON	
Work Site: City of Mackingw, DPW AND MEDICA CENTER	
Work Site: City of Mackingw DPN AND MEDICA (ENTER Reason Vehicle is Needed: IS and JENERATOR ANNUAL Maintenance	
Vehicle Description: Lo AD Beny [OFT (ARA) Model/Description	
Proposed Starting & Ending Date: 4824-4-11-24 Total Days of Usage: 4	
Proposed Starting & Ending Date: 4824-4-11-24 Total Days of Usage: 4  What Boat Line & Dock: ALNOLD FREIGHT - COULDOCK	
Proposed Travel Route: DOCK to WOKKSITE WOKKSITE to hitel:	
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: 3-6-24	
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: 3.6.24 Fee Received: Waived Ck#:	
City Use: Application Received: 3.6.24 Fee Received: Waived Ck #:	
Comments:	
(11/8/2018)	