

Permit No. <u>424-037</u>

APPLICATION FOR ANNUAL MOTOR VEHICLE PERMIT (ONE APPLICATION FOR EACH VEHICLE AT EACH PROPERTY LOCATION)

Applicant Name: The Inn at Stonecliffe	Permit Fee: \$50.00
Contact Name: Benjamin Horn	Date: _15 MAR 24
Address: 8593 Cudahy Circle	City:Mackinac Island
State: MI Zip: 49757 Fax#:	
Phone #:906-847-3355 Email Address:	ben@theinnatstonecliffe.com
Company Owned Property Location: The Inn at Stonecliffe	
Reason Vehicle is Needed:	
Vehicle Description: Kubota	Z01211
Make	Model/Description
Applicants Signature:	-
Applications will not be submitted to City Council for	approval until the fee is received.
THIS PERMIT WILL EXPIRE ON MARCH 31st	OF THE FOLLOWING YEAR
Mailing address: City of Mackinac Island, P. O. Box	455, Mackinac Island, MI, 49757
Phone: 906-847-3702	Email: clerk@cityofmi.org (12/28/2021)
City Use: Application Received: 3.18.24 Fee Received	ved: Ck #:
Date of Action on Application: 3.20.24 Approved: Der	nied: By: CounciO
Comments:	

	Permit Fee: #50.60
Contact Name: Benjamin Horn	Date:15 MAR 24
Address: 8593 Cudahy Circle	_City: Mackinac Island
State: MI Zip: 49757 Fax#:	
Phone #:906-847-3355	ben@theinnatstonecliffe.com
Company Owned Property Location: The Inn at Stonecliffe	
Reason Vehicle is Needed: Landscaping	
Vehicle Description: Toro	Workman MDX
Make	Model/Description
Applicants Signature:	Date: 15 MAR 24
Applications will not be submitted to City Council for	
	approval until the fee is received. OF THE FOLLOWING YEAR

Applicant Name:	he Inn at Stoneclif	fe		Permit Fee:	\$50.00
Contact Name: Benjar	nin Horn				15 MAR 24
Address: 8593 Cudah	ny Circle		City: _	Mackinac Isla	nd
State: MI	Zip:	49757 F	ax#:		
Phone #:906-847-335	55	Email Add	ress: ben@the	einnatstonecliffe.	.com
Company Owned Prop					
Reason Vehicle is Nee	eded: Landscapin	ng		v	
Vehicle Description: _				ng Mower lel/Description	
The submittal of this appleare based on the information uses and purposes or violation and will be purposed.	on provided on thation of any other	e application. Any local ordinances or	use or purpose state law consti	which is contrar tutes a violation	ry to approved
Applicants Signature:		My Man	Verified by PDFFiller 05/15/2024	Date: _	15 MAR 24
Applications will no	ot be submitted	l to City Counc	il for approv	al until the fe	e is received.
THIS PERMIT	WILL EXPIRI	E ON MARCH	31st OF THE	FOLLOWI	NG YEAR
Mailing address:	City of Mackin	nac Island, P. O.	Box 455, Ma	ckinac Island	, MI, 49757
Phone: 906-847-3702	2 Fax	: 906-847-6430		Email: clerk	(12/28/2021)
City Use: Application Re	ceived: 3.18	. 24 Fee	Received:	Cl	κ#:
Date of Action on Applica	tion: 3.20.2	4 Approved:	Denied:	By: Cou	ncio
Comments:					

Permit No. <u>424-040</u>

APPLICATION FOR ANNUAL MOTOR VEHICLE PERMIT (ONE APPLICATION FOR EACH VEHICLE AT EACH PROPERTY LOCATION)

Applicant Name: The Inn at Stonecliffe	Permit Fee: \$50.00
Contact Name: Benjamin Horn	Date:15 MAR 24
Address: 8593 Cudahy Circle	City:Mackinac Island
State: MI Zip: 49757	Fax#:
Phone #: 906-847-3355	dress:ben@theinnatstonecliffe.com
Company Owned Property Location: The Inn at Sto	onecliffe
Reason Vehicle is Needed: Landscaping	
Vehicle Description: Kubota	M62TLB
Make	Model/Description
uses and purposes or violation of any other local ordinances of conditions and will be punishable as a civil infraction and rev Applicants Signature:	vocation of the permit.
Applications will not be submitted to City Coun	
THIS PERMIT WILL EXPIRE ON MARCH	H 31st OF THE FOLLOWING YEAR
Mailing address: City of Mackinac Island, P. C	D. Box 455, Mackinac Island, MI, 49757
Phone: 906-847-3702	Email: clerk@cityofmi.or (12/28/2021
City Use: Application Received: 3.18.24 Fe	e Received: Ck #:
City Use: Application Received: 3.18.24 Fe Date of Action on Application: 3.20.24 Approved:	Denied:By: Council
Comments:	

Applicant Name:	The Inn at Stonecliffe	9		_ Permit Fee:	#50.00
Contact Name: Benja	min Horn			Date: _	15 MAR 24
Address: 8593 Cuda	hy Circle		City:	Mackinac Isla	and
State: MI	Zip:4	9757 Fax	x#:		
Phone #:906-847-33	55	Email Addre	SS: ben@th	einnatstonecliffe	.com
Company Owned Pro	perty Location:	The Inn at Stonec	liffe		
Reason Vehicle is Ne	eded: Landscaping	1			
Vehicle Description: Ditch Witch Make		Sk	C 1050		
	Make		Mod	del/Description	
Applicants Signature:		ffry May Ve	rified by PDFFiller /15/2024	Date:	
Applications will n	ot be submitted	to City Council	ior approv	al until the 16	ee is received.
THIS PERMIT	WILL EXPIRE	ON MARCH 31	1st OF THE	E FOLLOWI	NG YEAR
Mailing address:	City of Mackin	ac Island, P. O. B	ox 455, Ma	ackinac Island	, MI, 49757
Phone: 906-847-370	Pax:	906-847-6430		Email: clerk	(12/28/2021
City Use: Application Re	eceived: 3.18.	₹4 Fee Re	ceived:	C	k #:
Date of Action on Applica	ation: 3.20.24	Approved:	Denied:	By: Cour	nciQ
Comments:					

Applicant Name: The Inn at Stonecliffe	Permit Fee: #50.00
Contact Name: Benjamin Horn	Date:15 MAR 24
Address: 8593 Cudahy Circle	City: Mackinac Island
State: MI Zip: 49757 Fax#	·
Phone #: 906-847-3355 Email Address	ben@theinnatstonecliffe.com
Company Owned Property Location: The Inn at Stonecliff	fe
Reason Vehicle is Needed: Utility	
Vehicle Description: Golf Cart Make	Blue/2 Seat w/rack
Make	Model/Description
Applicants Signature:	-
Applications will not be submitted to City Council for	
THIS PERMIT WILL EXPIRE ON MARCH 31st	OF THE FOLLOWING YEAR
Mailing address: City of Mackinac Island, P. O. Bo	x 455, Mackinac Island, MI, 49757
Phone: 906-847-3702	Email: clerk@cityofmi.org (12/28/2021)
City Use: Application Received: 3.18.24 Fee Received:	eived: Ck #:
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Comments:	