

Permit No. \_\_\_\_\_

**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**

Applicant Name: \_\_\_\_\_ Permit Fee: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax#: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Work Site: \_\_\_\_\_

Reason Vehicle is Needed: \_\_\_\_\_

Vehicle Description: \_\_\_\_\_

Make

Model/Description

Proposed Starting & Ending Date: \_\_\_\_\_ Total Days of Usage: \_\_\_\_\_

What Boat Line & Dock: \_\_\_\_\_

Proposed Travel Route: \_\_\_\_\_

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:** [cityofmi.org](http://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](mailto:clerk@cityofmi.org)

**City Use:** Application Received: \_\_\_\_\_ Fee Received: \_\_\_\_\_ Ck #: \_\_\_\_\_

Date of Action on Application: \_\_\_\_\_ Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ By: \_\_\_\_\_

Comments: \_\_\_\_\_