

**CITY OF MACKINAC ISLAND
APPLICATION FOR PERMIT FOR
TEMPORARY STREET/SIDEWALK OBSTRUCTION**

APPLICANT NAME: _____

ADDRESS: _____

PHONE NO: _____ FAX NO: _____

SPECIFIC LOCATION OF THE PROPOSED OBSTRUCTION: _____

DESCRIBE THE PROPOSED OBSTRUCTION: _____

DESCRIBE YOUR REASON FOR REQUESTING THE OBSTRUCTION: _____

PROVIDE THE TIMES/DATES/DURATION OF THE PROPOSED OBSTRUCTION: _____

The city reserves the right to terminate or revoke this permit at any time, and for any reason. This permit is personal in nature and shall not be assigned by the Permittee to anyone else. The Permittee hereby agrees to pay the city for any and all damage that may be caused to city property by Permittee's temporary obstruction of the street/sidewalk. The Permittee hereby agrees to indemnify and hold harmless the City of Mackinac Island for any and all injuries, losses and/or damages arising out of the Permittee's temporary obstruction of the street/sidewalk allowed by this permit, including actual attorney fees and costs incurred by the city.

Applicant's Signature

Date

Fee Received: _____ **Ck#/Cash:** _____ **Date Permit Issued:** _____

Approved: _____ **Denied:** _____ **Clerk or Mayor Signature:** _____

(Upon approval of the City Council)

Conditions of Permit Approval: _____

