



# Noise Permit

\* Not valid as an alcohol permit\*

Applicant/Organization Name:	
Address:	
Contact Name:	Contact Phone:
Contact Email:	
Contact: Day of Event:	Contact Cell: Day of Event:
Name of Event:	Event Location:
<b>Event Date(s):</b>	
Start Date:	End Date:
Start Time:	End Time:
<b>Event Info:</b>	
# of Participants:	Will there be a band?      Yes      No
What type of noise will be generated: Music Speeches Other:	Will there be a DJ or speaker with mic? Yes No
If music, what type will be played? Classical Country Rock Other:	Are you hiring an audio professional? Yes No Company Name: _____
How many sound speakers will be used?	How big are the speakers?

Event Layout: To assist us in understanding processing your request, please attach or draw in the provided space below a diagram of the general location, showing surrounding streets, note location of any road closures, the location of any sound equipment, and where your audience will be situation.

Permit Conditions:

- 1) Emergency vehicle access must be maintained at all times.
- 2) Any temporary directional pavement markings needed shall be made with temporary tape and not paint.
- 3) **In the sole judgment of any police officer, City Manager, or Assistant City Manager, exercised in good faith, that the sound level becomes excessive, said police officer or City Manager or Assistant City Manager shall have authority to modify this permit and require that the sound source be adjusted. This adjustment may include, but is not limited to, its immediate cessation, re-directing speaker placement, limiting volume output, or any other similar requirement.**

Other Permit Conditions:

**The City of Millersburg has the right to revoke this permit at any time.**

I attest that I will abide by all City, County, State, and Federal applicable ordinances, statutes, and regulations. **I further agree and accept that any police officer or the City Manager or Assistant City Manager may require immediate sound adjustments or cessation if they determine, in their sole judgment, that the sound level is excessive.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

City:

Approved

Denied

Date