

COMMUNITY NOISE INFORMATION SHEET

REQUIREMENTS

- Community Noise Application (Attached)

Petition (Attached)

- This is required **ONLY** if you intend to operate within 1000 feet of a residential area, with the exception of Lane Ave, until 10:00 p.m., between Olentangy River Rd on the west and N High St on the east during Ohio State University home football games.
- BCI Background Check
Conducted at an authorized WebCheck agency. Results must be directly mailed to the License Section.

All applications must be submitted in person at:

License Section
4252 Groves Road
Columbus, OH 43232

PRICING

- Application fee - \$20.00
- Community Noise License fee - \$150.00 per day

OFFICE HOURS

Monday 9:00 a.m. - 3:30 p.m.

Tuesday - Friday 8:00 a.m. - 3:30 p.m.

OFFICE USE ONLY

License # _____

Issue Date _____

Expiration Date _____

DEPARTMENT OF PUBLIC SAFETY
LICENSE SECTION



DEPARTMENT OF
PUBLIC SAFETY

**COMMUNITY NOISE
APPLICATION**

PERMIT VARIANCE

THIS APPLICATION FOR PERMIT/VARIANCE SHALL BE COMPLETED BY THE PERSON RESPONSIBLE FOR ORGANIZING THAT, WHICH IS TO BE PERMITTED, OR ISSUED A VARIANCE.

APPLICANT INFORMATION

Full Name:

Residential Address:

City:

State:

Zip:

Phone:

Email:

Business Address: (If applicable)

City:

State:

Zip:

Race:

Sex:

Height:

Weight:

Hair:

Eyes:

All applicants will be required to provide Proof of Identity.

Have you had a City of Columbus license and/or permit refused, revoked or suspended within the past three (3) years?
Yes No

If yes, please explain:

Have you been convicted of a felony? Yes No

If yes, list all felony convictions that occurred in the United States within the past five (5) years:

Are you on felony probation or parole? Yes No If yes, date began:

EVENT INFORMATION

Name of Event: (If applicable)

Proposed Location of Gathering:

Proposed Date:

Purposed Time:

Please give a general description of the gathering:

Estimate the maximum distance the sound will be heard from during operation of the equipment:

Will this equipment be used within a thousand (1,000) feet of a residential area? Yes No
(If yes, attach written consent form, signed by at least 70% of the tenants or owners occupying such dwellings)

Will noise be emitting from a stationary or moving vehicle? Yes No

If yes, what area(s) of the city do you plan to operate in? (If applicable)

If you are operating from a stationary vehicle, give a general description as to the location and size of the area: (If applicable)

VEHICLE INFORMATION (If applicable)

Year:

Make:

Model:

VIN:

Color:

PER REGULATIONS SET IN COLUMBUS CITY CODE 501.05(E), THE LICENSE SECTION HAS THE POWER TO MAKE RULES REGARDING THE "QUALIFICATIONS OF THE APPLICANTS AND THE CONDITIONS PRECEDENT THE APPLICANTS MUST MEET PRIOR TO THE ACQUISITION OF LICENSES." FOLLOWING THIS DIRECTION, ALL APPLICANTS MUST BE ABLE TO READ, SPEAK, AND COMPREHEND THE ENGLISH LANGUAGE IN ORDER TO OBTAIN A VALID LICENSE. BY INITIALING ON THE LINE BELOW YOU AGREE THAT YOU ARE ABLE TO FULFILL THIS REQUIREMENT.

_____ INITIALS

ALL INFORMATION CONTAINED IN THE APPLICATION IS SUBJECT TO DISCLOSURE AS A MATTER OF PUBLIC RECORD. ANY FALSE STATEMENT MADE OR GIVEN IN THE APPLICATION SHALL RESULT IN THE DENIAL OR FUTURE REVOCATION OR SUSPENSION OF THIS LICENSE UNDER COLUMBUS CITY CODE, CHAPTER 501 AND 504. APPLICANT MAY ALSO BE REFERRED FOR CRIMINAL PROSECUTION UNDER CHAPTER 2312.13 (A-3).

State of Ohio, County of Franklin

_____, being duly sworn, deposes and says he or she is the
(Print Applicant's Name)

individual making the foregoing application; that he or she is knowledgeable with respect to that which is to be license; and that the answers to the foregoing questions and other statements contained herein are true of his or her own knowledge and belief.

(Applicant's Signature)

Sworn to before me and subscribed in my presence this _____ day of _____, 20_____.

Notary or Agent of Director of Public Safety

Must be SIGNED, DATED, and NOTARIZED.

COMMUNITY NOISE PETITION

WHILE PETITIONING, THE APPLICANT IS RESPONSIBLE FOR NOTING THE ADDRESS, TIME, AND DATE FOR ANY UNOCCUPIED RESIDENCES.

Full Name:

Residential Address:

City:

State:

Zip:

Business Address:

City:

State:

Zip:

Name of Event: (If applicable)

Proposed Location of Gathering:

Proposed Date:

Proposed Time:

Estimate the maximum distance the sound will be heard from during operation of the equipment:

Will this equipment be used within a thousand (1,000) feet of a residential area? Yes No
(If yes, attach written consent form, signed by at least 70% of the tenants or owners occupying such dwellings)

We, the undersigned, who reside within 1,000 feet of the lot or parcel of ground located at _____ hereby state that we have no objections to the operation of the sound equipment to be used at the above location on (date/time) _____. It is understood that this petition is for the above stated dates and times only.

Full Name	Street Address	Signature	Date/Time

Full Name	Street Address	Signature	Date/Time

Full Name	Street Address	Signature	Date/Time

