

COMMUNITY NOISE INFORMATION SHEET

REQUIREMENTS

- Community Noise Application (Attached)
- Proof of Identity (i.e. State issued Driver's License/I.D. Card, Military I.D., Passport)
- Noise Petition

(Required only if you intend to operate within 1,000 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)

PRICING

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

OFFICE LOCATION & HOURS

4252 Groves Road
Columbus, OH 43232

Monday - Friday
8:00 a.m. to 3:30 p.m.

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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:

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(s):

Purposed Time(s):

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 petition 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:
<p>All information contained in this application is subject to disclosure as a matter of public record. Any false statement made or given in this application shall result in denial, revocation, or future revocation of the license under Columbus City Code Chapters 501 and 540, and may be referred for criminal prosecution under Ohio Revised Code Chapter 2921.13 (A-3).</p>	
<p>State of Ohio, County of Franklin</p> <p>I, _____, being duly sworn, affirm and swear that I am the <small>(Print Applicant's Name)</small></p> <p>individual making the foregoing application; that he or she is knowledgeable with respect to that which is to be licensed and to the information contained in the application; that the answers, statements, and allegations made in this application are true and accurate to the best of my knowledge and belief; and that I am an owner/operator/applicant of that which is to be licensed by this application.</p> <p style="text-align: right;">_____</p> <p style="text-align: right;"><small>(Applicant's Signature)</small></p> <p>Sworn to before me and subscribed in my presence this ____ day of _____, 20____.</p> <p style="text-align: center;">_____ Notary or Agent of Director of Public Safety</p> <p style="text-align: center;">The application must be signed, dated and notarized.</p>	

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:

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

