OFFICE USE ONLY

License No./Code _____

Date Issued: _____

Expiration Date: _____

CITY OF COLUMBUS
DEPARTMENT OF PUBLIC SAFETY
LICENSE SECTION
COMMUNITY NOISE PERMIT

Chapter 501, Columbus City Codes
Section 2329.11(D)(c) & 2329.11(F)(2) &
Rules & Regulations Vol. 24

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

USE INK OR TYPEWRITER ONLY

Circle One Please: PERMIT VARIANCE

Name: _____ Phone: _____
(Print your full name)

Social Security Number: _____

Address: _____
Street City State Zip Code

Business Address: _____
Street City State Zip Code

Sex _____ Race: _____ Height _____ Weight _____ Eyes _____ Hair _____

Date of Birth _____ Place of Birth _____

Are you: A Citizen of the United States? ____ A Legal Alien? ____ Alien Registration# _____
(If born outside of the United States, proof of citizenship or alien registration cards must be submitted.)

List all felony convictions, anywhere in the United States, within the past five years:
_____
_____
_____

Are you on felony probation or parole? _____

Have you or your company had a City of Columbus license revoked, suspended, or refused within the last three (3) years? _____

General Description of Gathering: _____
_____
_____
_____

Will noise be stationary or on a moving truck/vehicle? _____

If on moving truck/vehicle state:

a) Section(s) of city in which it will be operating: _____
b) License Plate Number: _____
c) General Description of Vehicle: _____
d) Proposed Time Equipment will be in operation: _____

If operated from a stationary position:

a) A general description as to the location and size of the area: _____
_____

Proposed date _____ and time _____ of the event that equipment will be in operation.

Approximate maximum distance sound would be thrown from the equipment during operation: ___
_____.

Will this equipment be used within a thousand (1000) feet of a residential area? _____
(If yes, please attach the written consent form, signed by at least 70% of the tenants or owners occupying such dwellings.)

REVERSE SIDE MUST BE SIGNED DATED AND NOTARIZED

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 or future revocation of this license, as well as criminal prosecution under Chapter 2321.13(A-3)(A5), Columbus City Codes.

STATE OF OHIO, COUNTY OF FRANKLIN:

_____, being duly sworn, deposes and
(Applicant Name - Print)

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

_____
Applicant Signature

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

_____
Notary or Agent of Director of Public Safety

PETITION

Application for Community Noise Permit
City of Columbus, Ohio
Section of Licenses, Department of Public Safety

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 or future revocation of this license, as well as criminal prosecution under Chapter 2321.13(A-3)(A5), Columbus City Codes.

Name:_____ Phone:_____
(Print your full name)
(Person responsible for organizing that, which is to be permitted, or issued a variance.)

Social Security Number:_____

Address:_____
Street City State Zip Code

Business Address:_____
Street City State Zip Code

Location of Gathering:_____

Proposed time the equipment will be in operation:_____

Approximate maximum distance sound would be thrown from the equipment during operation:___
_____.

Will this equipment be used within a thousand (1000) feet of a residential area? _____
(If yes, please attach the written consent form, signed by at least 70% of the tenants or owners occupying such dwellings.)

We, the undersigned, who reside within 1000 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 (dates/time)_____.
It is understood that this petition is for the above stated dates and times only.

NAME	ADDRESS