#### LICENSE SECTION



### 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.



OFFICE USE ONLY
License #
Issue Date
Expiration Date

# COMMUNITY NOISE APPLICATION



Issue Date			, (i i Li)	<i>37</i> (110)			DEPART	MENT OF BUILDING
Expiration Date						NING SERVICES		
			EDMIT [	7. / A D. A A	105			
		ШР	ERMIT _	_VARIAN	ICE			
THIS APPLICATION	ON FOR PERMIT/\	/ARIANCE	SHALL BE CO	MPI FTFD BY	/ THE PE	RSON	I RESPONSIBI	F FOR
THIS 7 II TEIG/TH		NIZING T	HAT, WHICH IS	TO BE PERM	ЛІТТЕD, С			
		AP	PLICANT IN	IFORMAT	ION			
Full Name:								
Residential Address:	•							
City:				State:			Zip:	
Phone:			Email:					
Business Address (I	f applicable):							
City:				State:			Zip:	
Race:	Sex:	Heigh	nt:	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 explair	า:							
Have you been con	victed 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:								

- · ·	n a thousand (1,000) feet of a residential at least 70% of the tenants or owners occu		Yes No dwellings)		
Will noise be emitting from a stati	onary 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 station	nary vehicle, give a general description	as to the lo	ocation and size of the area	: (If applicable)	
	VEHICLE INFORMATION	Ⅵ (If applid	cable)		
Year:	Make:		Model:		
VIN:		Color:			
statement made or given ir	d in this application is subject to disc n this application shall result in deni le Chapters 501 and 540, and may Revised Code Chapter 29	al, revoca be referre	ation, or future revocation ed for criminal prosecutio	of the license	
State of Ohio, County of Frank	klin				
I,(Print Applicat	, being duly s	worn, affi	rm and swear that I am tl	he	
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.					
			(Applicant's Signature)		
Sworn to before me and subs	scribed in my presence this	day(	of	, 20	
	Notary or Agent of Director of <b>Building</b>	and Zoning	Services		
	The application must be signed, da	_			

#### LICENSE SECTION

## 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 Tin	ne:			
Estimate the maximum distance the	he sound will be heard from during	operation of the	e equipment:			
We, the undersigned,	who reside within 1,000	) feet of th	e lot or p	arcel of	ground located	
at			_, hereby	state th	at we have no	
objections to the opera	ation of the sound equip	ment to b	e used a	t the abo	ove location on	
(date/time)			_•			
It is understood that th	is petition is for the abou	ve stated o	lates and	times o	nly.	
Full Name	Street Address		Signatui	re	Date/Time	

Full Name	Street Address	Signature	Date/Time

Full Name	Street Address	Signature	Date/Time

Full Name	Street Address	Signature	Date/Time