



Deputy City Clerk's Office
230 W. Hickman Rd.
Waukeee, IA 50263
(515) 987-4522
(515) 987-1845 FAX

NOISE PERMIT APPLICATION

PERMIT FEES: \$50.00 in residential zoning
\$100.00 in all other zoning districts
DEPOSIT: \$100.00

Date of Application: _____
Name of Applicant: _____
Address of Applicant: _____ Phone #: _____

Mailing Address of Applicant: _____

Date(s) of Event: _____ Hours of Event: _____
Start Time: _____
End Time: _____

Address of Event: _____
Contact Person for Event: _____ Home Phone #: _____
Business Phone #: _____
Cell Phone #: _____

Type of Event (describe in detail): _____

Description of sound equipment to be used during Event (radio remote, live band, amplified music, etc.): _____

Hours during which sound equipment will be used:
Start Time: _____
End Time: _____

Number of persons anticipated to attend Event: _____
Will adequate parking be provided? Explain in detail:

Number of off-duty police scheduled to be at Event: _____
Number of EMS persons scheduled to be at Event: _____

I understand and agree to abide by the rules and regulations set forth in Waukeee Municipal Code §228 "Noise Control Ordinance."

Applicant's Signature _____

Approval:

City Administrator/Clerk