



**APPLICATION FOR TEMPORARY NOISE PERMIT**

Pursuant to the Town of Blind River Noise Control By-law

**NOTE: APPLICATION MUST BE RECEIVED AT LEAST THIRTY (30) DAYS PRIOR TO THE EVENT/ACTIVITY**

Description of the Event/Activity: \_\_\_\_\_

Address/Location of the Event/Activity – **site plan and layout to be attached to Application:**

Name and Address of Applicant: \_\_\_\_\_

Phone Number: (Home) \_\_\_\_\_ (Business) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email address: \_\_\_\_\_

No. of people expected to attend: \_\_\_\_\_

Date(s) of the Event/Activity: \_\_\_\_\_

Time(s)/duration of the Event/Activity: \_\_\_\_\_

Description of Sound Equipment to be used: \_\_\_\_\_

Steps to be taken to minimize the noise or sound: \_\_\_\_\_

Steps taken to notify neighbours: \_\_\_\_\_

**Supervisors(s) of the Event/Activity**

(At least one person designated as supervisor shall be responsible for supervising the event or activity and must be on-site during the entire event or activity to ensure compliance with the terms and conditions of the permit.)

Name(s): \_\_\_\_\_

Address(es): \_\_\_\_\_

Phone Number: (Home) \_\_\_\_\_ (Business) \_\_\_\_\_ (Cell) \_\_\_\_\_

Fee required to be filed with the Application

Failure to comply with any conditions of the Permit may result in the Temporary Noise Permit being revoked.

I confirm I have read and understand the information contained in the attached Appendix A to this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date