

TOWN OF SCHLESWIG

Application for Permit
For Outdoor Use of Sound Amplification System or Device

Type of event _____
(Examples: band concert, community picnic)

Date(s) of event _____
(Note: Each day of an event requires a permit)

Time event will begin _____ and end _____
(Note: Permits will be issued for times between 7 a.m. and 10 p.m. only)

Address of event _____

Responsible person _____

Phone Number or Email _____

Signature of responsible person

_____/_____/_____
Date of application

*****FOR TOWN USE ONLY*****

Date approved by Town Board _____

Clerk _____

Fee _____

Exceptions noted _____