

**CITY OF PACIFIC GROVE
APPLICATION FOR SOUND AMPLIFICATION PERMIT**

Name of Applicant: _____

Date of Birth: _____

Address: _____

City/Zip _____

Telephone Number: _____

Type of Event: _____ Estimated Attendance: _____

Location: _____

Date(s) & Hours of Use: _____

Approximate Distance to
Nearest Residence: _____

Type of Sound Equipment: _____

Name of Professional D.J. (or operator) _____

Operator's Address: _____ Zip Code _____

Phone Number of Operator: _____

Alcohol being served? YES NO Alcohol being sold? YES NO

I hereby agree that the permit, if issued, may be revoked forthwith by the police should another person or persons complain of a disturbance from the sound, or should interference with traffic or general public use of public areas result from the event. I understand the City Manager and/or the City Council and/or Police or Public Works may deny the permit upon finding that operation of the device/s is likely to be audible and disturbing to a person or persons on another property, or would contribute to traffic or health hazards, or would tend to preempt normal public use of a public area. I further understand the City Manager and/or City Council may impose such conditions on a permit, as they may deem appropriate, including hours of use, levels of audibility and numbers of persons attending the event.

Note: NO Sound Permits will be issued for Berwick Park during the Harbor Seal Pupping season (March – May). Additionally, No Permits for the Cypress Cove area of Berwick Park will be issued during March, April & May.

Signature of Applicant

Date of Application

CITY USE ONLY:

Reviewed by: _____

Application Approved: YES NO

Date Paid: _____ Signature of City Official: _____

Amount Paid: _____ Dated: _____