



PERMIT APPLICATION FOR ADDITIONAL AMPLIFICATION

Sounds which may impact surrounding properties. Civil penalties pursuant to Matthews Town Ordinance 92-A, a permit, issued by the Matthews Police Department, is required for most types of amplified will be assessed for violations to this Ordinance. Applications for

Additional Amplified Sound must be submitted to the Matthews Police Department at least fifteen (15) days in advance of the event.

- 1. Applicant Full Name: Address / Phone #:
2. Organization represented, if any: Address / Phone #:
3. Date(s) / Times of Intended Use: Address of Intended Use:
4. Type of Event: Non-profit community event/entertainment Political event Public entertainment with commercial sponsor/advertiser Private event Other (explain):
5. Anticipated size of audience:
6. Number of amplified speakers: Planned Distance between speaker(s) and audience:
7. Person(s) who will be responsible for control of the sound amplification equipment during event: Name: Phone #:

NOTICE: If a permit is tentatively approved, the applicant is responsible for mailing, or otherwise delivering, to each property owner within a one-thousand (1000) foot radius for which the permit has been granted, a Notice stating the date and time of the event. The notice shall be delivered at least seventy -two (72) hours in advance of the event.

FOR OFFICE USE ONLY

Initial Review By: (For Matthews Police Department) Date With (Applicant)

The tentative application is denied for the following reason(s):

The tentative application is granted with the following conditions:

_____ a. Approved for placement of speakers at (location): _____

_____ b. Approved for amplification between the hours of _____ and _____ on _____ (dates)

_____ c. Approved for emission of sound not to exceed 70 db (A) anywhere within the boundary line of the nearest residentially occupied property.

_____ d. Verification of required Notice to be returned no later than _____ (date)

Review of Notice:

_____ (For Matthews Police Department) _____ Date _____ With (Applicant)

Final Approval:

_____ (For Matthews Police Department) _____ Date _____ With (Applicant)

Sound Check(s):

_____ (For Matthews Police Department) _____ Date _____ With (Applicant)

Sound Reading(s):

_____ dB(A) _____ (Date) _____ (Time) _____ dB(A) _____ (Date) _____ (Time)

For questions about form or Ordinance: Sgt. Michelle Archer: 704-841-6782
or to submit initial application: Soundpermits@matthewspolice.org

Police Records Office: 704-841-6701
Fax: 704-845-5824