



6000 Heritage Trail, Clayton, CA 94517
 925-673-7300 www.claytonca.gov

FOR OFFICE USE ONLY
File No:
Fees/Deposit:
Credit Card Approval Code:
Date Received:

Noise Permit Application

1. GENERAL INFORMATION

Please complete the items listed below. Application and processing fees must be paid when the application is submitted.

Applicant	Name:	
	Address:	
	Phone:	Email:

Property Owner	Name:	
	Address:	
	Phone:	Email:

2. REQUIRED INFORMATION

Please fill out the information below regarding your Noise Permit request.

ADDRESS REQUIRING PERMIT:	
DATES EQUIPMENT WILL BE USED:	HOURS OF OPERATION:
From: _____ To: _____	From: _____ To: _____

3. STATEMENT OF OPERATION

Will the event be open to the public? ___ Yes ___ No	Maximum wattage:
Will the equipment be used for commercial or non-commercial purposes:	
The approximate distance the sound will be audible from:	
If a sound truck is used, please include the Vehicle License Number:	
Describe the measures to be taken to reduce noise affecting neighbors:	

Please complete the section below.

<p>Describe the sound-amplification equipment. Attach separate sheets as needed:</p>
--

4. Certification:

The applicant hereby agrees to comply with all the applicable sections of the City of Clayton Municipal Code.

<p>I (We):</p> <ul style="list-style-type: none"> • Consent to the submission of this application • Understand that an incomplete application may be denied • Hereby declare under penalty of perjury under the laws of the State of California that the information in this application and its attachments are true, complete, and correct. • Certify to have read and understand Title 15, Chapter 15.70, found in the City of Clayton’s Municipal Code. 	
<p>I (We):</p> <ul style="list-style-type: none"> • Understand that following receipt of a complete application, staff will review the application and that recommendations will be provided by the Chief of Police, the Maintenance Department, and the Community Development Department. The City Manager may approve the application, subject to conditions. • Understand that the decision of the City Manager may be appealed to the Planning Commission within five days of the note. 	
<p>APPLICANT SIGNATURE:</p>	<p>DATE:</p>
<p>PROPERTY OWNER SIGNATURE:</p>	<p>DATE:</p>

FOR OFFICE USE ONLY			
<p>_____ Approved</p>	<p>_____ Denied</p>	<p>_____ Community Development Director</p>	<p>_____ DATE</p>
<p>_____ Approved</p>	<p>_____ Denied</p>	<p>_____ Police Chief</p>	<p>_____ DATE</p>