

CITY OF MORGANTOWN
APPLICATION - SPECIAL WAIVER (Noise Code 527)



Applicant's Name _____ Phone: _____

Address: _____

Specific Reason for Activity and Code Violation:: _____

Location of Event: _____

Entertainment: _____
Please provide names of bands. NO BANDS ALLOWED IN SINGLE FAMILY RESIDENTIAL ZONING DISTRICTS

Date: _____ Time: From _____ TO: 10 P.M. or 12 MIDNIGHT

ZONING DISTRICT _____ or TO: _____ Circle One

Temporary Barricades Can Be Provided and Setup by Applicant

NOTE: No permanent barricades may be erected and access must not be denied to emergency vehicles.

I, _____, certify that all residents of properties within 400 feet were contacted (this includes other residents in the building, buildings to the side, rear, and front, or across the street), advised of the event and permission was given.

Signature: _____ Date: _____

(Attach any additional information or required permits)

NOTE: Waiver will expire at 10:00 p.m. (Sunday through Thursday) and 12:00 a.m. (Friday & Saturday).

Approved	Disapproved	Date	Signatures
			Police Dept.
			Fire Dept.
			City Manager

Conditions:

*** Landlord/Agent Signature

Date:

