

**MAXIMUM SOUND LEVEL
PERMIT APPLICATION**

DATE APPLICATION FILED: _____

SPONSOR OF EVENT

TELEPHONE NUMBER OF SPONSOR OF EVENT

NAME(S) OF CONTACT PERSON(S) OF EVENT

NAME(S) OF OWNER(S) / OCCUPANT(S) OF PROPERTY WHERE EVENT TO TAKE PLACE

ADDRESS OF PROPERTY

TELEPHONE NUMBER OF OWNER(S) / OCCUPANT(S)

DATE(S) OF EVENT

TIME(S) OF EVENT

PURPOSE OF EVENT

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THIS SECTION COMPLETED BY BOROUGH OFFICIAL

DATE PERMIT ISSUED: _____

DATE PERMIT DENIED: _____

COMMENTS/CONDITIONS: _____

BY: _____
BOROUGH OFFICIAL

P.c.: File
Bedford Police Department