

5045 Stanley Road ~ Flint, Michigan 48506 810-736-7100 or 800-648-PARK geneseecountyparks.org

Noise Permit Application

Applicant Name:					
Applicant Address:					
Applicant E-mail Ac	ddress:				
Applicant Telephone Number:(Day)(Ever				ning)	
Name of Event:					
Location of Event:_					
Requested Date Pe	rmit is to be in Force	<u>:</u>			
Requested Time Pe	ermit is to be in Force	:			
	From:(a	m/pm) To:	(am/pm)		
Type of Sound at th	nis Event:				
PA System 🗌	Live Band 🗌	Stereo Equipme	nt 🗌 Ot	her:	
The Noise will Occu	ur: Inside 🗌	Outside 🗌	Under a P	avilion 🗌	
APPLICANT:					
I understand that I	by signing this form	I will be personally re	esponsible for t	he actions of those	
attending the even	t. This permit maybe	e revoked by any law	enforcement of	fficer if it is deemed	
necessary and I agi	ree to stop all noise a	associated with my e	vent immediate	ly upon revocation.	
This permit does r	not allow the noise	level to exceed the	decibel level al	lowed by the local	
municipality. I fur	ther understand tha	t I may be subject to	any Civil Infrac	ction and/or fine as	
defined by local ord	dinance if provisions	of the permit are viol	ated.		
Applicant/Represer	ntative			Date	
	arks and Recreation C	Commission		Date	