



**NUISANCE NOISE BY-LAW #2024-02
SCHEDULE "A"**

NOISE PERMIT APPLICATION

APPLICANT NAME : _____

NAME OF ORGANIZATION : _____

ADDRESS : _____

PHONE NUMBER : _____

EMAIL ADDRESS : _____

DATE AND TIME OF EVENT : _____

LOCATION OF EVENT : _____

NUMER OF PEOPLE EXPECTED TO ATTEND EVENT : _____

BRIEF DESCRIPTION OF EVENT : _____

I certify that the information I have provided on this application is true to the best of my knowledge. I have read the Rural Municipality of Ste. Anne By-Law #2024-02 and request a temporary exemption from the provisions of this By-Law.

Applicant Signature **Date**

The personal information in this form will be collected and shared for the purposes in Section 36-47 of the *Freedom of Information and Protection of Privacy Act* (FIPPA), and for other legal requirements, where they are deemed consistent with FIPPA.

OFFICE USE ONLY / À USAGE INTERNE SEULEMENT

☐ Approved/Approuvé ☐ Refused/Refusé : _____

Expiry Date & Time: _____ at _____ am/pm

Date et heure d'expiration : le _____ à _____ h _____

Signature of CAO or Designate / signature de la DG ou de sa représentante

Date / date