Ann Spofford, Town Clerk Town Hall - 60 McAlpin Avenue Mahopac, NY 10541 845.628.1500

Applicant Name:		
Applicant Address:		
Applicant Telephone Number:		
Name and Address of Owner of Premises:		
Location of Premises for which Permit is Sought:		
Date of Event: Hours:	: From: To:	
Identify Type of Sound System:		
Volume of Sound to be used (measured by decibels o	r other efficient method):	
Type of Event:	Date of Application:	
No permit can be issued for any location within 500 fe hours of such institutions nor within 500 feet of a hosp		of worship during the
Issuance of this permit shall not be construed to reliev lessee of any premises wherein the same is used, fror		
Operation of any loudspeaker or similar device is p through Thursday; before 10:00 a.m. or after 11:59 p 11:59 p.m. on Federal Holidays or any other day as de	o.m. on Friday and Saturday; before	10:00 a.m. or after
Each permit issued by the Town Clerk shall be valid for	or a period not to exceed three (3) cal	lendar days.
Subsequent to the issuance of any permit by the Cle issued for the same parcel or property, regardless of celapsed since the expiration of the prior permit issued	ownership thereof, prior to thirty (30)	•
I hereby acknowledge receipt of a copy of Chapter 19 Amplifying and Reproducing Equipment, regulating the		
I have complied with the provisions §104-6(C) of this (each improved parcel or property located within fifty (each a sound amplification permit is being sought for said p	50) feet of any boundary of my prope	erty, that issuance of
Signature:		
Sworn to before me this day of		
Notary Public		
Police Department Review:Signature		
Approved by: Town Clerk, Town of Carmel		
Date:	Fee Sched	ule
License No.:	Residential	\$ 50.00
Cash / Check:	Commercial	\$100.00

Cc: Police Department