



# City of New Berlin Loudspeaker Permit Application



Submit this application to the New Berlin Police Department, 16300 W. National Ave., New Berlin, WI 53151, not less than 14 days prior to the event. If you have any questions, call the New Berlin Police Department at (262)782-6640.

**Background Information:**

Organization/Individual Name: \_\_\_\_\_

Address: \_\_\_\_\_

Applicant representing this event:

Name: \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_

**Event Information:**

Name of Event: \_\_\_\_\_

Address of Event: \_\_\_\_\_

Dates of Event (no more than 3 days in a row): \_\_\_\_\_

Estimated Number of Participants: \_\_\_\_\_

Hours of Loudspeaker Operation:

Start: \_\_\_\_\_ a.m./p.m.

Finish (no later than 10p.m.): \_\_\_\_\_ a.m./p.m.

\* All city parks with the exception of Malone Park close at dusk\*

Number of Loudspeakers to be used: \_\_\_\_\_

Please check the type of sound to be emitted:

Speech       Recorded Music       Live Music       Other \_\_\_\_\_

**Applicant's Statement of Agreement:**

I hereby affirm that the above information is true and correct in describing the intent of this application. I, \_\_\_\_\_, the undersigned, agree to use the loudspeaker in a careful and prudent manner so as not to cause complaints from neighbors and I agree to lower or terminate the amplification levels when requested by neighbors or police.

Applicant Signature: \_\_\_\_\_

FOR OFFICE USE ONLY	
<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved. Reason for denial: _____
Issued by: _____	