



NOISE EXEMPTION APPLICATION FORM

Name:	
Address:	Email:
Telephone No:	Cellphone No:
Address of Property Seeking Exemption:	Number of Previous Exemption Requests:
Date and Time of Proposed Event:	Character of Particular Part of Municipality Request is For:
Proposed Sound and/or Event:	Zoning of the Lands:
Duration of the Sound and/or Event:	Number of Attendees/Participants:
Proposed Methods of Control Over the Kind and Level of Sound:	Proposed Methods of Onsite Parking:

Site plan: Sketch plot plan below, show all buildings and the clearly mark location of the property line.



Signature: _____

Date: _____

Personal information on this form will be used to investigate the noise complaint pursuant to Section 27 of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.56, as amended. Questions about this collection should be directed to Kerstin Vroom CAO/Clerk, 4304 Highway 520, Magnetawan, ON POA 1P0, Telephone: (705) 387-3947 or Email: kvroom@magnetawn.com

For Office Use Only

☐ **FEE PAID**, as per the current fees and charges by-law