

CITY OF PORT ARTHUR
TEMPORARY PERMIT
SOUND PRODUCING DEVICE 34-179;34-180 & 34-181

APPLICANT TO COMPLETE:

DATE: _____

NAME: _____

ADDRESS: _____

TELEPHONE NO. _____

KIND OF USE: (CHECK APPROPRIATE ITEMS)

____ **TRUCK EQUIPPED WITH LOUDSPEAKER**

____ **AUTO EQUIPPED WITH LOUDSPEAKER**

____ **MORE THAN TEN (10) PERSONS IN A PUBLIC OR SEMI-PUBLIC PLACE**

____ **AMPLIFIER PRODUCING SOUND, USING THE STREETS OF CITY FOR PURPOSE
OF MAKING ANNOUNCEMENTS OR ADVERTISING**

____ **PERSON DESIRING PERMIT**

____ **GROUP OF PERSONS DESIRING PERMIT**

NAME OF GROUP: _____

NUMBER OF DAYS TO BE USE: _____

STARTING DATE: _____ **ENDING DATE:** _____

This temporary permit is issued provided that sound so permitted shall not be unreasonably loud, disturbing or obnoxious in nature so as to disturb the peace or injure the health of the people of the City.

This serves as your Permit upon proper validation and signature of Director of Community Services.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF DIRECTOR OF COMMUNITY SERVICES

DATE