# NOISE ORDINANCE VARIANCE APPLICATION

*City of Walterboro, SC 29488*

**Applicant to complete all numbered spaces.**

1. **Event Location:** _____
2. **Event Date(s):** _____
3. **Name:** _____
4. **Mailing Address:** _____
5. **Phone Number(s):** _____
6. **Description of Event:** _____
7. **Single event** _____ **Recurring event** _____
8. **Types of Noise:** _____
9. **Public thoroughfares abutting event location:** _____

   _____

**REQUIRED DATES NOTICE OF VARIANCE SHALL BE DISPLAYED:**

_____

**SPECIAL CONDITIONS**

**Notice of Variance Signs provided by the City Codes Enforcement Office shall be displayed a minimum of 10 days prior to the issuance of the Variance. Person Signing Application is <u>Required</u> to Return Notice of Variance Signs to the Codes Enforcement Office following the event. Additional conditions to be met for approval are as follows:**

_____

_____

_____

**Application Approved by:**

_____ _____

**Date**

## NOTICE

**VARIANCE SHALL ONLY BE VALID AT THE SPECIFIC LOCATION LISTED ABOVE & LIMITED TO NO EARLIER THAN 7:00am & NO LATER THAN 11:00pm.**

**I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF EVENT WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF THIS VARIANCE DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW.**

_____ _____

**Signature of Applicant** **Date**

_____ _____

**Signature of Owner or Authorized Agent, if other than Applicant.** **Date**