

## ALTO POLICE DEPARTMENT

Chief of Police: Josh Ivey
Jivey@altopolice.com

Integrity • Courage • Commitment • Honor

## **NOISE VARIANCE REQUEST**

Must be submitted at least 5 days prior to event.

Applicants must have read and understand the city noise ordinance.

911 Address:	Phone:	
Application Date:	Noise variance date(s):	
Owner's Name:	Phone:	
Applicant's name:	Phone:	
Applicant's address: remain on scene during event times and date	s or be accessible at all tim	_ Applicant is responsible and must nes while equipment is on scene.
Emergency Contact:	Phone:	<del></del>
Describe in detail Variance Needed:_		

Phone: (706) 778-8028 Fax: (706) 778-6908

Describe work to be completed (Construction):				
Distance from neighbors: Neighbors been advised:				
Will there be road blockage: (Traffic control required if yes)				
When will blockage occur:				
Is alcohol being served: Will you have a band: Tents:				
Will equipment be left overnight: Will equipment be secured:				
Are extra patrols needed: Number of people expected:				
Scene lights: Are any other City permits needed:				
Have other permits been obtained:				
Permits are nontransferable and must be left on scene at all times. The permit covers only the activities described. This is not a permit to generate excessive noise. If this permit was issued for sound amplifying equipment, the police department or designee has the authority to determine the appropriate volume for the area listed. Failure to provide a permit upon request will result in immediate revocation.  Applicant signature: Date:				
STAFF ONLY				
Received By: Date: Time:				
Decision: Explanation:				
Chief of Police Signature: Issue Date: Permit #				

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## **INDEMNITY AGREEMENT**

event and property listed in Do herby agree to defend, employees, from and again of or caused by the use of	n permit # indemnify and hold harmles nst any and all claims for inj such property. <b>The Town d</b>	Salto, Georgia the undersigned for the described as the Town of Alto, its agents, officers and any or damages to persons or property arising out oes not offer safety inspections for special ons are the sole responsibility of the applicant
expense the Town of Alto Town of Alto, its agents, of undersigned agrees that a any action by the Town, it the undersigned's cause of employees to the plaintiff Town of Alto, its agents, of recover the amount of the officers and employees in I HAVE READ THE IND INDEMNITY AGREEMI AND I AM SIGNING THE THAT WITH THE ISSUA ALTO OR ANY DESIGN	its agents, officers and empofficers, or employees arising judgement obtained in any set agents, officers or employ fringers or damage, as to the in the first named action, an officers, and employees may judgment together with all to the action.  EMNITY AGREEMENT, I ENT, I AM AUTHORIZED IS IMDEMNITY AGREEMENT, IS IMDEMNITY AGREEMENT, IN AUTHORIZED IS IMDEMNITY AGREEMENT, IN AUTHORIZED IS IMDEMNITY AGREEMENT, IN AUTHORIZED IS IMDEMNITY AGREEMENT THE TO ENTER ONTO THE	from the Town of Alto to defend at its own cloyees from any action or proceeding against the gout of or caused by the use of such property. The uch action or proceeding shall be conclusive in ees against the undersigned, when so notified as to liability of the Town, its agents officers and d as to the amount of the damage or injury. The maintain an action against the undersigned to the expenses incurred by the Town, its agents,  UNDERSTAND THE EFFECTS OF THIS TO SIGN THIS INDEMNITY AGREEMENT, MENT VOLUNTARILY. I UNDERSTAND HAT I AM AUTHORIZING THE TOWN OF E PREMISES DESCRIBED IN THE PERMIT E OF DETERMINING COMPLIANCE WITH
Signature:	Date:	
Witness:	Date:	

4086 Gainesville Hwy. Alto Ga. 30510 Phone: (706) 778-8028 Fax: (706) 778-6908