

City of Sherwood

Noise Ordinance Variance Application



PROCESS: Within five business days of the submission of an application for a variance, the City Manager (or designee) will determine if the requested variance could have a substantial impact on the surrounding areas and require public notification. The City Manager must consider such factors as the potential impacts on businesses and noise sensitive properties within four-hundred feet, the time of day, the day of the week, the proposed type and amount of amplification, and any secondary noise consequences. If such notification is required, the decision will not be made until ten business days after the completion of the public notice and required documents are submitted to the Event Coordinator.

NOTIFICATION DOCUMENT: If the City Manager determines that the requested variance may have a substantial impact on the surrounding areas the required public notification document must include the following;

- ☐ The nature and substance of the variance being requested, including the provision(s) of this Ordinance from which the variance is being requested
- ☐ The location, date(s), and time(s) for which the variance is being requested
- ☐ The name of the event to which the variance relates, if applicable
- ☐ The name and contact information of the applicant
- ☐ The name and contact information for the Special Event Permit Coordinator for the City of Sherwood (*Mary Weggeland, WeggelandM@SherwoodOregon.gov*)
- ☐ A statement that all interested persons may file written comments on the application with the City Manager and stating a deadline for such comments which is ten business days after the date of the notice

NOTIFICATION: The applicant must;

- ☐ Post notice along the nearest public road at the boundaries of the property containing the sound source so that the notice is visible from the public road
- ☐ **Provide a copy of the notice to the City for publication on the City's website**
- ☐ Deliver written notice to the owner or occupant of each property that is located within three-hundred feet of the property line of the property containing the sound source
- ☐ **Provide a list to the City of the owner or occupant addresses to which the written notice was delivered**

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APPLICANT

NAME:

ADDRESS:

PHONE NUMBER:

E-MAIL ADDRESS:

EVENT

NAME:

DATE:

LOCATION:

Date(s) and Time – When the involved sound will be emitted

	Between (Start Time)	And (End time)
	Between (Start Time)	And (End Time)
	Between (Start Time)	And (End Time)

What is the physical characteristic of the involved sound? (*i.e. live band, boom box, microphone, DJ, location of amplification*)

(ALSO REQUIRED: Map showing the exact location of the involved sound that includes the surrounding areas)

Why is a variance being sought?

Areas within 400 feet of the source of the involved sound:

☐ Residential

☐ Commercial

☐ Industrial

CONSENT AND LIABILITY

I, THE UNDERSIGNED, ACKNOWLEDGE AND UNDERSTAND THAT I AM RESPONSIBLE TO COMPLY WITH THE INFORMATION, RESTRICTIONS AND CONDITIONS OF THE PERMIT WHEN ISSUED. I HEREBY ACKNOWLEDGE RESPONSIBILITY FOR PENALTIES ASSOCIATED WITH NON-COMPLIANCE WITH THE PERMIT CONDITIONS, WHETHER OR NOT I AM PRESENT AT THE TIME OF THE VIOLATION. _____ (INITIALS)

I hereby certify the foregoing statements to be true and correct, and agree to defend, indemnify and hold harmless the City of Sherwood, its City Council, officers, agents, employees and volunteers from and against any and all loss, claims, damages, liability, such claim or suit arising from or in any manner connected to the requested activity. I also agree, if approved, to comply with all permit conditions, and understand that failure to comply with any condition, or any violation of law, may result in the immediate cancellation of the event, revocation of the permit, forfeiture of deposit, denial of future events, criminal prosecution and/or administrative citation (s), fines.

Print Your Name _____

Signature _____ Date _____

Please submit your completed form and all additional required materials to: City of Sherwood Community Services Department

ATTN: Event Coordinator 22689 SW Pine Street Sherwood, OR 97140

Please make a copy of all submitted materials for your records

Notification Required?

☐ Yes

☐ No

City Manager Signature: _____

Date _____