JEAN ISOM GRANDE
City Clerk

ERIC R. SEELIG
Deputy City Clerk

ROME NY
the copper city

OFFICE OF THE CITY CLERK
Rome City Hall, 198 N. Washington Street
Rome, New York 13440-5815
Tel.: (315) 339-7659 Fax: (315) 838-1160
www.romenewyork.com

SOUND AMPLIFICATION PERMIT APPLICATION

PLEASE PRINT OR TYPE. Answer all questions completely.

If a question is not pertinent, write N/A in the accompanying space. Do not leave any question unanswered. Incomplete or unanswered questions shall result in a denial of the application. Falsification of answers in this application shall result in the revocation of the Sound Amplification Permit and forfeiture of any fees or bond, and potential criminal prosecution. **APPLICATIONS MUST BE RECEIVED AT LEAST 10 BUSINESS DAYS PRIOR TO EVENT.**

***** PLEASE INCLUDE A PHOTOCOPY OF YOUR DRIVER LICENSE *****

This application for a Sound Amplification Permit is made pursuant to the provisions of Chapter 26, Article IV of the Rome Code of Ordinances.

BACKGROUND

Name of Applicant: (Individual): _____

Address: _____

Phone: _____ Email: _____

Company Name (if applicable): _____

Event Address: _____

Zone District: _____

Date of Event(s): _____

Time of day the permit is needed: _____

Event Description (including equipment and its use):

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

- **An amplified sound permit shall not have a start time before 7:00 a.m. or an end time past 9:00 p.m. Sunday through Thursday, or 11:00 p.m. Friday through Saturday.**
- **An amplified sound permit shall only be issued for a property located in a commercially zoned district.**
- **Full requirements are outlined in the City of Rome Code of Ordinances Chapter 26, Division 3.**

SIGNATURE

I certify under penalty of perjury that I have personally answered all the questions contained herein and that the information provided by me is true and complete to the best of my knowledge.

I have read the foregoing and understand that FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210. of the NEW YORK STATE PENAL LAW.

In the event of inclement weather, the permit fee will not be reduced, pro-rated or refunded.

_____
Signature

Sworn to and subscribed before me this _____ day of _____, 20____.

_____
Notary Public /Commissioner of Deeds

.....

FOR INTERNAL USE ONLY

CITY TREASURER VERIFICATION

The applicant (person and/or business) is not delinquent in any taxes owed to the City of Rome.

☐ Approved ☐ Disapproved

The applicant was not approved for the following reason(s):

_____

_____

_____
Signature Title Date

CODE ENFORCEMENT VERIFICATION

The applicant is located in a permissible zone district and is not otherwise in violation of the City of Rome Code of Ordinances.

☐ Approved ☐ Disapproved

The applicant was not approved for the following reason(s):

_____

_____

_____

Signature Title Date

.....

POLICE DEPARTMENT VERIFICATION

The credentials of the applicant have been checked by the Rome Police Department, and based upon the information provided, the permit is:

☐ Approved ☐ Disapproved

The applicant was not approved for the following reason(s):

_____

_____

_____

Signature Title Date

.....

CITY CLERK LICENSING INFORMATION

Permit Fee: **$25.00 (per each day)**

Total Fee Paid: $_____ Permit Number: _____

Date Permit Issued: _____

Date(s) Permit Valid For:

_____

_____

_____ _____

City Clerk Date