



**OFFICE OF THE CITY CLERK**  
ROME CITY HALL, 198 N. WASHINGTON ST.  
ROME, NEW YORK 13440-5815  
TEL.: (315) 339-7659 FAX: (315) 838-1160  
WWW.ROMENEWYORK.COM

**SOUND AMPLIFICATION PERMIT APPLICATION**

Please 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.

***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: \_\_\_\_\_

***Business 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):***

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**IMPORTANT NOTES**

- ***Applications must be received at least ten (10) business days prior to the event(s).***
- ***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

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**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 \_\_\_\_\_

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**CODE ENFORCEMENT VERIFICATION**

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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**

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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**

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**Permit Fee:**            **\$25.00 (per event)**

Total Fee Paid:        \_\_\_\_\_

Permit Number: \_\_\_\_\_

Date Permit Issued:    \_\_\_\_\_

Date(s) Permit Valid For: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
City Clerk

\_\_\_\_\_  
Date