

WAIVER REQUEST FORM

DATE OF EVENT:	04/24-05/0	TIME(S) OF EVENT:	5:30 PM
SUBJECT/REASON FOR	WAIVER REQUEST:	10 (llemotion LOCATION: 10 8	NW Rail YU
NOISE ORDINANCE WAS (All noise is to be in moder	ation) (Must provi	CLOSURE PARKING MALL CLOSUID PARKING PARKI	RE X
IF WAIVER IS FOR A CIT	TY PARK OR CITY PROP	ERTY: RESERVED NOT RESERVED	
CHECK IF NEEDED: ELE (Must notify at least a wee		ATER SERVICE BARRICADES	
a caveta, local close the youd cultivad are an sixell as the sa ading. We also to	in front of the tracks) - uthiside of the	cation, reason for the event, and request No reallwad Are, reg he refaurant W. Charles to place stage think be ne case de fresg parring se the city noise adinance, to	mests to
0001000 (12001010)	nsmarke and ca	eaning up the area requested for usage at the	as an ada
and to provide security of Sign acknowledgement	during the event,	saming up the area requested for usage at the	e end of the eve
REQUESTED BY:			
NAME & ORGANIZATION	: Kayli Day	ne + Rubio anterons	: 5
ADDRESS: 109 N	· late st.	Hammand, 1A 70401	
PHONE #: 995 ·	380.991ele	CELL #: 985-351-727	
EMAIL: Kayli, Pay	we I a gmain		1
can be submitted electronical If you have any questions ple	ly to mitchell ap@hammonc lase call (985) 277-5601. BELOW TO BE FILLE	City of Hammond to make any notifications or to supp submitted to Alma Mitchell in the Mayor & Administration or fax (985) 277-5602. DOUT BY CITY ADMINISTRATION	on Office, requests
		TIME RECEIVED:	
APPROVED:		(NO)	
REMARKS:			
		Authorized Signature	D-:
		, waterized signature	Date