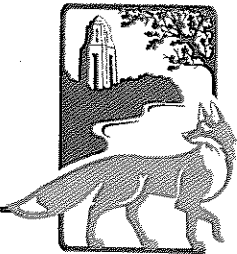


**For Office Use**  
Received:  
Fee Paid: \$  
Receipt #

**NON-REFUNDABLE**  
**CITY OF ST. CHARLES**  
TWO EAST MAIN STREET  
ST. CHARLES, ILLINOIS 60174-1984



**APPLICATION FOR CITY OF ST. CHARLES**  
**LOUDSPEAKER/AMPLIFIER LICENSE**

1. License Term: FROM \_\_\_\_\_ TO \_\_\_\_\_ NUMBER OF DAYS \_\_\_\_\_
  
2. Applicant is a \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual
  
3. Applicant's Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
D/B/A: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_
  
4. Device Owner's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_
  
5. Area where device(s) is/are to be used: \_\_\_\_\_  
\_\_\_\_\_
  
6. Time of day device(s) is/are to be used: \_\_\_\_\_

By signing this application, the applicant agrees to all the provisions of Chapter 9.24 of the St. Charles Municipal Code.

Applicant \_\_\_\_\_  
Signature

The fee for such a license will be \$5.00 per day, payable when application is made. The city's police chief will reserve the right to review application, and in conjunction with the Public Health and Safety Committee, either approve or deny license.

Approved: \_\_\_\_\_

Denied: \_\_\_\_\_ by: \_\_\_\_\_  
Chief of Police