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

ST. CHARLES
SINCE 1834

DEPARTMENT: BUILDING & CODE ENFORCEMENT **PHONE: 630.377.4406** **FAX: 630.443.4638**

LOUDSPEAKER/AMPLIFIER LICENSE APPLICATION

Important: this application must be fully and accurately complete.

1. License term: FROM_____ TO_____ Number of Days_____

2. Applicant is: ☐ Corporation ☐ Partnership ☐ Individual

3. Applicant's Name _____ Telephone #_____

   D/B/A_____

   Address _____ City/State/Zip _____

4. Device Owner's Name_____ Telephone #_____

   Address _____ City/State/Zip_____

5. Device(s) to be used, specific to power amplification (wattage) and output:

   _____

   _____

   _____

6. Area where device(s) is/are to be used:

   _____

   _____

   _____

7. Amplification system will be used for:
   - ☐ Music
   - ☐ Public Speaking
   - ☐ Other (describe) _____

8. If used for music, what type (include name of artist/band if applicable):

   _____

   _____

   _____

9. 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 City of St. Charles Municipal Code.

Applicant_____
Signature

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

Approved: _____

Denied:_____ by:_____
Chief of Police

For Office Use

Date Received_____ **Fee Paid**_____ **Receipt No.**_____ **Permit No.**_____