



City of D'IBERVILLE Police Department



Marty Griffin
Chief of Police

Bobby Weaver
City Manager

Rusty Quave
Mayor

Application for Noise Ordinance Variance

ATTENTION APPLICANT: All applications must be typed or handwritten legibly. The \$10.00 permit fee must be submitted with this application. The permit fee and the application will be processed by the D'Iberville Police Department. If approved this variance must be available for review any time during the noise and sound making activity in question. This variance must be presented to any police officer or designated official upon request. If the variance is permitted this application will serve as the official permit for the noise and sound making activity. This permit will however be surrendered to any police officer or designated official if it has expired or if any restrictions contained therein have been violated.

Requesting Person or Organization: _____

Briefly describe the type of noise or sound making activity for which the variance is requested: _____

Address of noise or sound making activity: _____

Expected number of persons attending or participating in noise or sound making activity: _____

Proximity of noise or sound making activity to (indicate approximate distance):

Churches: _____ Public Library: _____ Hospitals: _____

Residential Area(s): _____ Nursing Homes: _____ Schools: _____

Type and number of sound amplification devices or equipment: _____

Anticipated direction of sound amplification devices or equipment: _____

Event Date: _____ Start Time: _____ a.m./p.m. End Time: _____ a.m./p.m.

The noise of sound making activity will be held: ☐ Indoors ☐ Outdoors ☐ Other: _____

Printed Name of Applicant

Signature of Applicant

Address of Applicant or Organization

Phone Number of Applicant of Organization

(228) 396-4252 Office
(228) 396-4262 Fax

11290 Lamey Bridge Road
D'Iberville, MS. 39540

(228) 865-7060 Dispatch
(228) 392-9726 City Hall



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DO NOT WRITE BELOW THIS LINE

In addition to the above listed criteria, the following conditions will also apply to the variance:

___ Approved ___ Denied

If denied, reason for denial: _____

This variance will expire on the ___ day of _____, 20__.

Date

Chief of Police

☐ Check for City Sponsored Event.

Captain of Operations
Captain of Administration
Captain of Investigation
Days Shift OIC
Evening Shift OIC
Records
Master File

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