

## **Development Services Department**

320 E Jefferson Blvd, Dallas TX 75203 (214) 948-4480

#### NOISE ORDINANCE WAIVER (N.O.W.) REQUEST

THE FOLLOWING INFORMATION IS **REQUIRED** IN ORDER TO REQUEST A NOISE ORDINANCE WAIVER IN ADDITION TO ANY SUPPORTING DOCUMENTS. PLEASE NOTE THAT INSUFFICIENT INFORMATION MAY ADD ADDITIONAL TIME TO PROCESS. **PLEASE SUBMIT YOUR REQUEST TWO WEEKS IN ADVANCE.** 

APPLICANT'S NAME:				PHONE:			
COMPANY NAME:							
COMPANY ADDRESS:	COMPANY PHONE:						
CITY:	STATE:	ZI	P:	E-MAIL:			
PROJECT MANAGER (PM)	NAME:	1					
PM PHONE NUMBER:			PM EMAIL:				
WORK ADDRESS/LOCATION:			BUILDING PERMIT#:				
SPECIFIC DATE(S) AND HOURS OF ACTIVITY:							
SUMMARY OF OVERALL DEVELOPMENT:							
SUMMARY OF WORK PERF	ORMED DURING WA	AIVE	ER PERIOD:				
WHY CAN'T THIS WORK BE CONDUCTED DURING THE APPROVED HOURS FOR CONSTRUCTION RELATED NOISE?							
WHAT IS THE IMPACT TO PUBLIC SAFETY IF THE NOISE ORDINANCE WAIVER IS NOT GRANTED?							
ARE LANE CLOSURES REQUING CLOSURES ASSOCIATED WAS NUMBER.			•				
WHAT STEPS WILL BE TAK	EN TO MITIGATE N	OIS	E?				



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#### NOISE ORDINANCE WAIVER (NOW) REQUEST

### FOR STAFF USE ONLY

COUNCIL DISTRICT:			
DATE REQUEST RECEIVED:		_	
REQUEST:   APPROVED	□ DENIED	DATE:	
ADDITIONAL			