

# Instruction Sheet for Sound Amplifying Device Permit (Commercial Activity)

Phone: (216) 664-2264

Hours of Operation: 8:00 a.m. to 4:30 p.m. Weekdays

DALLicenses@clevelandohio.gov

### When is a permit required?

A Sound Amplifying Device permit is required for the use, set up, or operation of a sound amplifying device on the outside of a structure or building. A permit is also required for any person who desires to play or use any drum, loudspeaker, radio, audio system or other instrument or sound amplifying device for the purpose of creating noise to attract attention to any performance, show or any sale or display of merchandise.

The playing of such devices shall not be conducted in such a manner or at such volume as to annoy or disturb the quiet, comfort or repose of neighboring inhabitants.

Except for organized events which have received any type of permit from the City in conjunction with the event, no person shall play any radio, music player, television or audio system upon a public right-of-way or upon other public property in such a manner or at such a volume as to disturb the quiet, comfort or repose of other persons.

#### **Regulations Governing Sound Amplifying Devices Which Promote Commercial Activities**

- 1. A permit can't be issued for more than fourteen (14) consecutive days;
- 2. No permit or combination of permits can exceed a total of thirty (30) days in any calendar year for a specific location.
- 3. The operation of devices is prohibited in the following areas and during the following dates and times:
  - On Sunday;
  - On any day between the hours of 8:00 p.m. and 10:00 a.m.; and
  - Within five hundred (500) feet of any school, church or hospital.
- 4. No device shall operate with a power output in excess of twenty (20) watts nor with maximum distortion of sound and volume in excess of two percent (2%) at full volume

City of Cleveland Codified Ordinance Chapter §683, Sound Devices

City of Cleveland employees may not provide legal advice to the public. The information provided is for informational purposes only and is not legal advice. For questions regarding the application of a city ordinance or regulation, you should consult an attorney regarding your specific situation.

In Person/By Mail:	You may apply for this license in person, by mail or email Cleveland City Hall, Division of Assessments and Licenses, 601 Lakeside Avenue, Room 122, Cleveland, OH 44114. Applications are accepted Monday-Friday, 8:00 a.m. – 4:30 p.m.
Email:	Complete, scan and email the application <u>and</u> required secondary documentation to <u>DALLicenses@clevelandohio.gov</u> . For email submissions, an Automatic Payment Authorization form must be completed and submitted <u>via secured fax</u> to (216) 420-7804 <u>prior</u> to the application being processed.

#### What to bring or submit to the Division of Assessments and Licenses

- 1. Completed and signed application.
- 2. Copy of Owner's Manual/Device Packaging indicating **Power Output** and **Serial Number of Device**.
- 3. Permit Fee: **\$25.00** for each device. Payable by cash, check, or credit card. All fees are non-refundable. Make checks payable to the City of Cleveland.



# Sound Amplifying Device Permit (Commercial Activity)

City of Cleveland Division of Assessments and Licenses 601 Lakeside Avenue, Room 122 Cleveland, Ohio 44114

# Application

Phone: (216) 664-2264

Hours of Operation: 8:00 a.m. to 4:30 p.m. Weekdays

 $\underline{DALLicenses@clevelandohio.gov}$ 

DATE:

FEE: \$25.00 - PER DEVICE (NON-REFUNDABLE)

SECTION A – DATES/TIMES OF OPERATION						
Date: Monday <b>Start/End</b>			Date: Friday <b>Start/End</b>	Date: Saturday Start/END	SUNDAY'S ARE PROHIBITED	
AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	
AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	

Attach additional sheets if necessary

SECTION B - APPLICANT INFORMATION				
Name:				
Address:				
City:		State:	Zip:	
Telephone:	Email:			
Date of Birth:	Federal ID or Social Security Number:			

SECTION C - CORPORATION INFORMATION (IF APPLICABLE)					
Name of Authorized Agent:					
Address:					
City:		State:	Zip:		
Telephone	Email:				
Federal ID Number:					

SECTION D – DEVICE INFORMATION					
Device Type (drum, loudspeaker, keyboard, audio system, etc.):					
Make:	Model:	Serial Number:			
Power Output:					

#### SIGNATURE OF APPLICANT

OFFICE USE ONLY						
	<b>SIGNATURE DATE</b>					
PUBLIC SAFETY						
	APPROVED		YES			No