

**TOWNSHIP OF WELLINGTON NORTH
BY-LAW 5001-05**

**Application for Noise Exemption
To Noise Control By-law 5001-05
TOWNSHIP OF WELLINGTON NORTH**

Applicant Name	Last	First
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Applicant Address	Street	Postal Code
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Applicant's Phone Number

Group or Organization

Event Title

Date of Event	Time of Event
(If event is being held over more than one day, specify times for each day)	

Description of Event – include the source of sound or vibration in respect of which the exemption is being sought:

State the particular provision or provisions of the By-law from which the exemption is being sought
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Date

Signature

Title

**Submit to:
Clerk's Office
Township of Wellington North
7490 Sideroad 7 West
P.O. Box 125
KENILWORTH, ON N0G 1P0
(519) 848-3620**