

## COMMUNITY DEVELOPMENT DEPARTMENT BUSINESS LICENSE DIVISION

1700 W. 162nd Street, Gardena CA 90247 TEL: (310) 217-9518 FAX: (310) 217-9698

## **Amplified Sound Equipment Application**

Print or type information and return to: Business License Division, 1700 W. 162<sup>nd</sup> Street Rm #101, Gardena, CA, 90247

Name of Applicant		Phone No.	
Address of Applicant			
Name of Organization			
Location of Event			
Date of Event	Hours of Event		
Description of Amplified Equip (speakers, microphone, etc)			
Hours of equipment use	Method of Operation		
Describe Event's Activities			

# I hereby certify and declare under penalty of perjury that the foregoing is true and correct and that I, the Applicant,

agree to comply with all conditions imposed with the issuance of this permit.

Applicant Signature	Date

### For Office Use Only

Amount of Fee	Date	Received By

#### For Police Department Use Only

I approve of the above subject to the following conditions:	
I disapprove of the above:	
Chief of Police	Date