



**Township of Huron-Kinloss
Exemption to By-Law No. 2005-101
Being the Noise By-Law**

Name: _____

Address: _____

Phone: _____

Email: _____

Noise Exemption Request Date/Time: _____

Event: _____

Event Location: _____

Noise Occurrence: _____

Internal Use Only

Roll Number: _____

Circulation and comments:

Clerk _____

Building and Planning _____

CAO _____

Fire Chief _____

Treasurer _____

Community Services _____

By-Law Enforcement Officer _____