



**Noise Exemption
Application**
By-law Services 365-282-6100
BylawServices@ajax.ca

Application Type
New ☐
Renewal ☐

To be completed by the Applicant - Fill in all information and please print neatly
Name of Applicant:
Telephone:
Address:
Email Address:

Contact Information of Person Responsible for the Event or Activity:
Name:
Telephone:
Address:
Email Address:

Exemption Request Details for the Event or Activity
Date:
Time:
Location:
of People in Attendance (if applicable):
Describe the type of event or activity and expected source of noise:
Provide reason(s) why an exemption should be granted:

