## VILLAGE OF NEW AUBURN AMPLIFIED DEVICE PERMIT APPLICATION

130 E ELM ST | NEW AUBURN WI 54757 | 715-237-2223

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Villaga Ordinanaa	Ch. 24 Sec. 24 01 stat	res it shall be unlowful for any person to me	aka santinus ar sausa ta ba mada
Primary Purpose	for Permit:		
Time(s) Request	ed:		a.m. / p.m.
Date(s) Requeste	ed:		
Device Will Be Lo	ocated At:		
Type of Device: _			
Description of D	<del></del>		
		RMITTED BETWEEN THE HOURS OF 12	2:00 A.M. TO 7:00 A.M.
umber			
wner Phone		Address	
roperty Owner		Op/Agent	
		Op/Agent Phone Number	
, , , , , , , , , , , , , , , , , , ,		Uperator/Agent	
ocation/Address		Operator/Agent	