



Application for a Noise By-law Exemption

Town of The Blue Mountains
Enforcement Services Department
32 Mill Street, Box 310, Thornbury, ON N0H 2P0
519-599-3131 ext. 249

For use by Principal Authority

Application Number: _____ Exemption Number: _____

Date Received: _____ Roll Number: _____

Event Location (location of the event relief is being requested)

Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Applicant Information

Applicant is (check one): Owner _____ or, Authorized Agent of Owner ☒

Name: Amanda Jerome

Address: _____

Telephone Number: _____ Fax: _____ Cell Number: _____

Owner Information (if different from Applicant)

Name: Robert Ketchin

Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Telephone Number: _____ Fax: _____ Cell Number: _____

Event Type (other events may be considered at the sole discretion of Council)

(check one): Charitable Event _____ Wedding/Family Gathering: ☒ Construction Related _____ Other _____

Event Details

Event Name (if applicable): Meg & Sean's Wedding

Date of Event: Saturday, July 17, 2021

Time Range of Event: 4pm to 12am

Check Yes or No to the Following:

Does the Event promote charitable, educational or community objectives?:

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Does the Event support the community provincially, nationally or internationally?:

Is the Event financially supported by the Town?

Have there been any prior Noise By-law infractions associated with this Event?:

Description of the source of sound: DJ Music until 12am

Proposed Provisions to mitigate the impact of noise to affected residential premises:

Will have DJ turn down bass and volume by 11pm. Music to play until 12am

Reasons the Noise By-law Exemption should be supported (in the applicant's opinion):

The couple wishes to extend their wedding celebrations by 1 hour to enjoy their wedding safely with friends and family.

Declaration of Applicant (Note: if owner is not the applicant attach the “Authorization to Act as Agent” form)

I Amanda Jerome certify that: the information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.


Digitally signed by Amanda Jerome
Date: 2021.05.11 09:12:30 -04'00'

Signature of Applicant

May 11, 2021

Date

Note:

1. Every application for an exemption shall be submitted a minimum of eight (8) weeks in advance of the proposed event.
2. Every person who contravenes any provision of the Noise By-law No. 2002-09, as amended is guilty of an offence and on conviction is liable to a penalty as provided in the Provincial Offences Act.



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Applicant Information

Applicant is (check one): Owner _____ or, Authorized Agent of Owner ☒

Name: Amanda Jerome

Address: _____

Telephone Number: _____ Fax: _____ Cell Number: _____

Owner Information (if different from Applicant)

Name: Robert Ketchin

Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Telephone Number: _____ Fax: _____ Cell Number: _____

Event Type (other events may be considered at the sole discretion of Council)

(check one): Charitable Event _____ Wedding/Family Gathering: ☒ Construction Related _____ Other _____

Event Details

Event Name (if applicable): Kristina & Andrew's Wedding

Date of Event: Friday, July 23, 2021

Time Range of Event: 4pm to 12am

Check Yes or No to the Following:

Does the Event promote charitable, educational or community objectives?:

Yes ☐ No ☒

Does the Event support the community provincially, nationally or internationally?:

Yes ☐ No ☒

Is the Event financially supported by the Town?

Yes ☐ No ☒

Have there been any prior Noise By-law infractions associated with this Event?:

Yes ☐ No ☒

Description of the source of sound: DJ Music until 12am

Proposed Provisions to mitigate the impact of noise to affected residential premises:

Will have DJ turn down bass and volume by 11pm. Music to play until 12am

Reasons the Noise By-law Exemption should be supported (in the applicant's opinion):

The couple wishes to extend their wedding celebrations by 1 hour to enjoy their wedding safely with friends and family.

Declaration of Applicant (Note: if owner is not the applicant attach the “Authorization to Act as Agent” form)

I Amanda Jerome certify that: the information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

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Date: 2021.05.11 09:02:20 -04'00'

Signature of Applicant

May 11, 2021

Date

Note:

1. Every application for an exemption shall be submitted a minimum of eight (8) weeks in advance of the proposed event.
2. Every person who contravenes any provision of the Noise By-law No. 2002-09, as amended is guilty of an offence and on conviction is liable to a penalty as provided in the Provincial Offences Act.



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Applicant Information

Applicant is (check one): Owner _____ or, Authorized Agent of Owner ☒

Name: Amanda Jerome

Address: _____

Telephone Number: _____ Fax: _____ Cell Number: _____

Owner Information (if different from Applicant)

Name: Robert Ketchin

Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Telephone Number: _____ Fax: _____ Cell Number: _____

Event Type (other events may be considered at the sole discretion of Council)

(check one): Charitable Event _____ Wedding/Family Gathering: ☒ Construction Related _____ Other _____

Event Details

Event Name (if applicable): Jennifer & Will's Wedding

Date of Event: Saturday, July 24, 2021

Time Range of Event: 4pm to 12am

Check Yes or No to the Following:

Does the Event promote charitable, educational or community objectives?:

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Does the Event support the community provincially, nationally or internationally?:

Is the Event financially supported by the Town?

Have there been any prior Noise By-law infractions associated with this Event?:

Description of the source of sound: iPod Music until 12am

Proposed Provisions to mitigate the impact of noise to affected residential premises:

Will turn down bass and volume by 11pm. Music to play until 12am

Reasons the Noise By-law Exemption should be supported (in the applicant's opinion):

The couple wishes to extend their wedding celebrations by 1 hour to enjoy their wedding safely with friends and family.

Declaration of Applicant (Note: if owner is not the applicant attach the “Authorization to Act as Agent” form)

I Amanda Jerome certify that: the information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

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Date: 2021.05.11 09:02:20 -04'00'

Signature of Applicant

May 11, 2021

Date

Note:

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Applicant Information

Applicant is (check one): Owner _____ or, Authorized Agent of Owner ☒

Name: Amanda Jerome

Address: _____

Telephone Number: _____ Fax: _____ Cell Number: _____

Owner Information (if different from Applicant)

Name: Robert Ketchin

Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Telephone Number: _____ Fax: _____ Cell Number: _____

Event Type (other events may be considered at the sole discretion of Council)

(check one): Charitable Event _____ Wedding/Family Gathering: ☒ Construction Related _____ Other _____

Event Details

Event Name (if applicable): Julia & Matt's Wedding

Date of Event: Saturday, August 14, 2021

Time Range of Event: 4pm to 12am

Check Yes or No to the Following:

Does the Event promote charitable, educational or community objectives?:

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Does the Event support the community provincially, nationally or internationally?:

Is the Event financially supported by the Town?

Have there been any prior Noise By-law infractions associated with this Event?:

Description of the source of sound: DJ Music until 12am

Proposed Provisions to mitigate the impact of noise to affected residential premises:

Will have DJ turn down bass and volume by 11pm. Music to play until 12am

Reasons the Noise By-law Exemption should be supported (in the applicant's opinion):

The couple wishes to extend their wedding celebrations by 1 hour to enjoy their wedding safely with friends and family.

Declaration of Applicant (Note: if owner is not the applicant attach the “Authorization to Act as Agent” form)

I Amanda Jerome certify that: the information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

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Date: 2021.05.11 09:02:20 -04'00'

Signature of Applicant

May 11, 2021
Date

Note:

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Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Applicant Information

Applicant is (check one): Owner _____ or, Authorized Agent of Owner ☒

Name: Amanda Jerome

Address: 79 Lockerbie Cres. Collingwood, ON L9Y 0Y8

Telephone Number: _____ Fax: _____ Cell Number: _____

Owner Information (if different from Applicant)

Name: Robert Ketchin

Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Telephone Number: _____ Fax: _____ Cell Number: _____

Event Type (other events may be considered at the sole discretion of Council)

(check one): Charitable Event _____ Wedding/Family Gathering: ☒ Construction Related _____ Other _____

Event Details

Event Name (if applicable): Angela & Yves's Wedding

Date of Event: Friday, August 20, 2021

Time Range of Event: 4pm to 12am

Check Yes or No to the Following:

Does the Event promote charitable, educational or community objectives?:

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Does the Event support the community provincially, nationally or internationally?:

Is the Event financially supported by the Town?

Have there been any prior Noise By-law infractions associated with this Event?:

Description of the source of sound: DJ Music until 12am

Proposed Provisions to mitigate the impact of noise to affected residential premises:

Will have DJ turn down bass and volume by 11pm. Music to play until 12am

Reasons the Noise By-law Exemption should be supported (in the applicant's opinion):

The couple wishes to extend their wedding celebrations by 1 hour to enjoy their wedding safely with friends and family.

Declaration of Applicant (Note: if owner is not the applicant attach the “Authorization to Act as Agent” form)

I Amanda Jerome certify that: the information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

 Digitally signed by Amanda Jerome
Date: 2021.05.11 09:02:20 -04'00'

Signature of Applicant

May 11, 2021

Date

Note:

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Applicant Information

Applicant is (check one): Owner _____ or, Authorized Agent of Owner ☒

Name: Amanda Jerome

Address: 79 Lockerbie Cres. Collingwood, ON L9Y 0Y8

Telephone Number: _____ Fax: _____ Cell Number: _____

Owner Information (if different from Applicant)

Name: Robert Ketchin

Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Telephone Number: _____ Fax: _____ Cell Number: _____

Event Type (other events may be considered at the sole discretion of Council)

(check one): Charitable Event _____ Wedding/Family Gathering: ☒ Construction Related _____ Other _____

Event Details

Event Name (if applicable): Bailey & Doug's Wedding

Date of Event: ~~Friday, June 25, 2021~~ Friday, September 17, 2021

Time Range of Event: 4pm to 12am

Check Yes or No to the Following:

Does the Event promote charitable, educational or community objectives?:

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Does the Event support the community provincially, nationally or internationally?:

Is the Event financially supported by the Town?

Have there been any prior Noise By-law infractions associated with this Event?:

Description of the source of sound: DJ Music until 12am

Proposed Provisions to mitigate the impact of noise to affected residential premises: _____

Will turn down volume and bass at 11am. Music to be off by 12am.

Reasons the Noise By-law Exemption should be supported (in the applicant's opinion): _____

The couple wishes to extend the wedding celebration by 1 hour to enjoy their wedding safely, with friends and family.

Declaration of Applicant (Note: if owner is not the applicant attach the "Authorization to Act as Agent" form)

I Amanda Jerome certify that: the information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

A small red rectangular stamp with the word "SIGNATURE" in white capital letters.

Signature

May 11, 2021

Date

Note:

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Applicant Information

Applicant is (check one): Owner _____ or, Authorized Agent of Owner ☒

Name: Amanda Jerome

Address: 79 Lockerbie Cres. Collingwood, ON L9Y 0Y8

Telephone Number: [REDACTED] Fax: [REDACTED] Cell Number: [REDACTED]

Owner Information (if different from Applicant)

Name: Robert Ketchin

Address: 496350 Grey County Rd 2, Clarksburg, ON N0H 1J0

Telephone Number: [REDACTED] Fax: [REDACTED] Cell Number: [REDACTED]

Event Type (other events may be considered at the sole discretion of Council)

(check one): Charitable Event _____ Wedding/Family Gathering: ☒ Construction Related _____ Other _____

Event Details

Event Name (if applicable): Liisa & Joshua's Wedding

Date of Event: Saturday, September 25, 2021

Time Range of Event: 4pm to 12am

Check Yes or No to the Following:

Does the Event promote charitable, educational or community objectives?:

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Does the Event support the community provincially, nationally or internationally?:

Is the Event financially supported by the Town?

Have there been any prior Noise By-law infractions associated with this Event?:

Description of the source of sound: DJ Music until 12am

Proposed Provisions to mitigate the impact of noise to affected residential premises:

Will have DJ turn down bass and volume by 11pm. Music to play until 12am

Reasons the Noise By-law Exemption should be supported (in the applicant's opinion):

The couple wishes to extend their wedding celebrations by 1 hour to enjoy their wedding safely with friends and family.

Declaration of Applicant (Note: if owner is not the applicant attach the “Authorization to Act as Agent” form)

Amanda Jerome certify that: the information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

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Date

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