



ONTARIO POLICE DEPARTMENT

444 SW 4TH STREET, ONTARIO, OR 97914

OFFICE: (541) 881-3225 DISPATCH: (541) 473-5125 FAX: (541) 889-3026

Chief of Police

Lieutenant
(541) 881-3214

Application for Noise Variance for the City of Ontario (OMC:6-1-6.1)

Applicant Name _____ Date Requested _____

Address for Variance _____ Phone () _____ - _____

Time Duration for Variance (Be Specific) ___ sec to ___ Min Sound Source: _____

Time of day for Noise Variance _____ to _____.

If the applicant is not the owner of record of the subject property, written authorization from the owner to act as his/her agent must be provided. No sound shall exceed 127dBA (NIOSHA standards).

Reason of request:

Date/Time Received _____ Received by: _____

Approved ___ Denial ___

Fee: \$ _____

Police Chief - Signature

Date: _____

Reason for Denial:

Applicant may appeal to City Council: OMC 6-1-6.1 (E)(5)

“Commitment-Openness-Respect-Efficiency”