Loudspeaker & Amplified Sound Permit Application

City of Galveston Municipal Code Chapter 24-5, as amended.

Please return this permit application to: City of Galveston Parks and Recreation Department (409-797-3700)
by mail to 2222 28th Street, Galveston, TX 77550 or via E-mail to ACollins@GalvestonTX.gov and/or MPierce@GalvestonTX.gov

Permit Information

A Loudspeaker & Amplified Sound Permit is $75.00 for a single day of use and $150.00 for multiple days of use, per Quarter.
Applications MUST be received by the City at least 10 working business days in advance of the requested date(s).
Applications received after this timeframe will not be accepted.

For the purpose of this application, a Quarter is defined as:
Quarter 1: January 1 – March 31 | Quarter 2: April 1 – June 30 | Quarter 3: July 1 – September 30 | Quarter 4: October 1 – December 31

This Permit is in effect until 10:30 P.M. if in the Central Business District or 8:00 P.M. if anywhere else in the City.
For the purpose of this application, the Central Business District is defined as the geographic area north of Broadway, south of Harborside Drive, west of 19th Street, and east of 26th Street.

The City Manager, City Marshal or Law Enforcement Officer may revoke this Permit upon a finding that the permit holder:

1. Violated decibel level or hours restrictions of Galveston Municipal Code 24;
2. Is causing an imminent breach of the peace;
3. Used "fighting words" or obscene language;
4. Directed amplified speech at a specific person in a manner likely to harass, abuse or torment that person.

Permits may only be used by the permit holder and are non-transferrable. Permit holders using non-stationary or hand-held amplification devices may only use those devices at the address listed on the permit. For street corners, non-stationary or hand-held amplification devices may only be used within a 16-foot radius of that corner. This permit does not permit the use of stationary, un-manned amplification devices.

For additional information please reference Galveston City Code Chapter 24-5(c), as amended. A copy is available upon request.

Applicant Information

Date(s) Requested: _____

Time Requested: _____

Location / Address*: _____

**If a street corner or intersection is requested, please identify the specific corner - i.e. NW corner of 23rd and Strand*

Applicant Name:** _____

***Please list name of Permit Holder if different from Applicant Name*

Business Name: _____
(If Applicable)

Day Time Phone: _____ **Alternative Contact # or Email:** _____

Principal Use: ***please specify type and size of live band/musician performance, if applicable***

- ☐ Wedding and/or Reception
- ☐ Speech Activity
- ☐ Live Band/Musician Performance → _____
- ☐ Music D.J., Radio, or Stereo
- ☐ Other _____

Applicant Signature & Date: _____

PLEASE DO NOT WRITE BELOW THIS LINE. STAFF ONLY		
Date & Time App Received	**Permit Number**	**Time Extension Requested?**
Date & Time of Expiration		**Payment Method**

☐ _____ _____ _____
City Manager Designee (If Applicable) Date Remarks