NOISE VARIANCE REQUEST

APPLICATION DATE: 3-18-25

REQUESTING PERSON:

NAME: Joe Disalvo / The Dock Bar & Grill

MAILING ADDRESS: 401 Vets Memorial Hiway

PHONE NUMBER: 402 - 917 - 0115

EMAIL: TheDockCB@Gmail.Com

ORGANIZATION/EVENT: Dock Summer Series

EVENT LOCATION: 401 Veterans Memorial Hiway

EVENT DATE: May 1st — Oct 5th

EVENT TIME: 5:pm — 11:30 pm

EXPLAIN SOURCE OF NOISE AND SPECIFIC HOURS OF NOISE:

Live music & people talking

Please return to the City Clerk's Office, 209 Pearl Street, Ste. 102, Council Bluffs, IA 51503
Phone Number: 712-890-5261

Please Note: This application is approved/disapproved by the City Council. Applications **MUST** be received 15 days before the event, to ensure enough time to be reviewed by City Council.

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City Council met on_____, 20___, regarding this application requesting noise variance as described above.

- ☐ DENIED
- ☐ APPROVED
- ☐ APPROVED WITH FOLLOWING STIPULATION

The Police have the authority to cease music or require reduction of volume for the remainder of event if complaints are received.

City Clerk

Date