

## REQUEST FOR AMPLIFIED MUSIC/NOISE

City of Kaukauna 144 W Second St Kaukauna, WI 54130

## **Applicant Information**

Name: <u>Carol Fing</u>	Date of Birth: <u>4-/5-58</u>
Address: 1313 Augustine Strut, Kaukauna	Phone number: 970 - 766 - 6100
Organization Name, if applicable: friends Of +	n Grignon Mansion
Email address: SUN Kissed_76@yahoo.com	
Event Information	
Name of Event: Little Chute Community	y Band Concert
Event location (s): Grignon Mansion	Date of Event: 4 11 25
Event Start time- End time: 7:00 PM - 8:00 PM	
Number of people attending:OO	•
This application will be formally reviewed by the Heal Please allow up to 3 weeks for a response. If you do rapproved.	th and Recreation Committee. not hear from City staff: request is