



City of Seattle
Department of Construction and Inspections
Temporary Noise Variance Application

Project Address: _____ OR Location: _____

Description of Work:

In the fields below please enter the start date and time for the 14 day variance window including setup and traffic control. For the stop date use the ending day and time the variance will be needed including clean up.

Start Date: _____ Start Time: _____
Finish Date: _____ Finish Time: _____

Applicant Information

Name: _____ Company: _____ Position: _____
Address: _____ Phones: _____ E-mail: _____

Contractor Information

Name: _____ Company: _____ Position: _____
Address: _____ Phones: _____ E-mail: _____

Financially Responsible Party

Name: _____ Company: _____ Position: _____
Address: _____ Phones: _____ E-mail: _____