



OFFICE USE ONLY	
DATE FILED: _____	
INITIALS: _____	
ADVERSE: Yes No	
LP: _____	CC: _____
ALD: _____	

RESTRICTION WAIVER
CLK223 (rev. 11/17)

OUTDOOR AREA – WAIVER OF PROHIBITION OF MUSIC PAST 10:00 PM IN AN OUTDOOR AREA WITHIN 750' OF RESIDENTIAL PROPERTY*
**If licensed outdoor area is greater than 750' of any residentially zoned property, amplified music and/or cabaret licensed activity is already permitted until 1:00 am and the waiver is not required.*

Fee: \$50.00/Application (NONREFUNDABLE) Date(s): _____ Hours: _____

Licensee Name: _____ District #: _____
(NOTE: Must Be Same Name As Beer/Liquor License)

Trade Name: _____ Trade Address: _____
STREET ZIP

If license is in the name of a Corporation or LLC, Agent Name: _____

Contact Person: _____
FIRST M.I. LAST

Phone: _____ Email: _____
(Correspondence Will Be Via Email If Address Is Given)

1. Purpose/Event: _____

2. **REQUIRED:** Applicant **must have been granted or application is pending** for one of the following:

- Permanent Outdoor Extension
- Temp. Outdoor Extension
- Temp. Class “B” / “Class B” License

3. Applicant is applying for the following (**Check All That Apply**):

- Live music or entertainment after 10:00 PM, until _____ PM. (Time between 10:00 PM & 1:00 AM)
- Speakers or amplifiers with or without live music or entertainment after 10:00 PM, to _____ PM. (Time between 10:00 PM and 1:00 AM)

4. **REQUIRED:** If having LIVE ENTERTAINMENT, the applicant **must have been granted or application is pending for** one of the following:

- Yearly Cabaret License
- Daily Cabaret License
- Probationary Cabaret License
- N/A: No live entertainment-music through speakers or amplifiers (EXAMPLE: SPEAKERS CONNECTED TO IPOD)

 Individual/Partner/Member Signature Date

SPEEDY APPROVAL <small>(LICENSE MUST BE FILED AT LEAST 24 HOURS IN ADVANCE)</small>	
Speedy approval requires your district Alderperson’s signature, or if Alderperson is unavailable, a member of L/P Committee’s signature is acceptable.	
District Alderperson Signature: _____	Date: _____
Member of L/P Committee Signature: _____	Date: _____