



**ADDENDUM C  
CITY OF MAPLE RIDGE  
NOISE RELAXATION FOR FILMING**

**Please include all relevant information and provide supporting documents if necessary.**

Date of Request	Project Name:
Production Company Name:	Location Manager Name:
Production Company Address:	
Location Manager E-mail:	Location Manager Phone:

**Noise Bylaw Relaxation Request for Film Production**

Site or Location Name if Applicable (Business name, Park, Facility, Residence):
Film Location Address:
Circus Site or Location Name if Applicable (Business name, Park, Facility, Residence):
Circus Address:
Description of Activities:
<input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="radio"/> Both

**Filming Details**

Start Date:	Start Time:
End Date:	End Time:

**Equipment Trucks and Circus Details**

Arrival Date:	Arrival Time:
Departure Date:	Departure Time:

**Office Use**

<input type="radio"/> Approved <input type="radio"/> Declined
Comments:



11995 Haney Place  
Maple Ridge, BC  
V2X 6A9  
Hours: M-F 8 am to 4 pm

FILM COORDINATOR  
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604-340-5197