

CITY OF SAINT PAUL

Business Licensing 375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806 Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

February 2020

Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 fee payment should be submitted a minimum of sixty (60) days prior to the scheduled event start date. A public notification period is required prior to scheduling the application's Public Hearing before the Saint Paul City Council. Applications received fewer than sixty (60) days prior to the event may not satisfy the ordinance's processing timelines for placement on the Council's agenda.

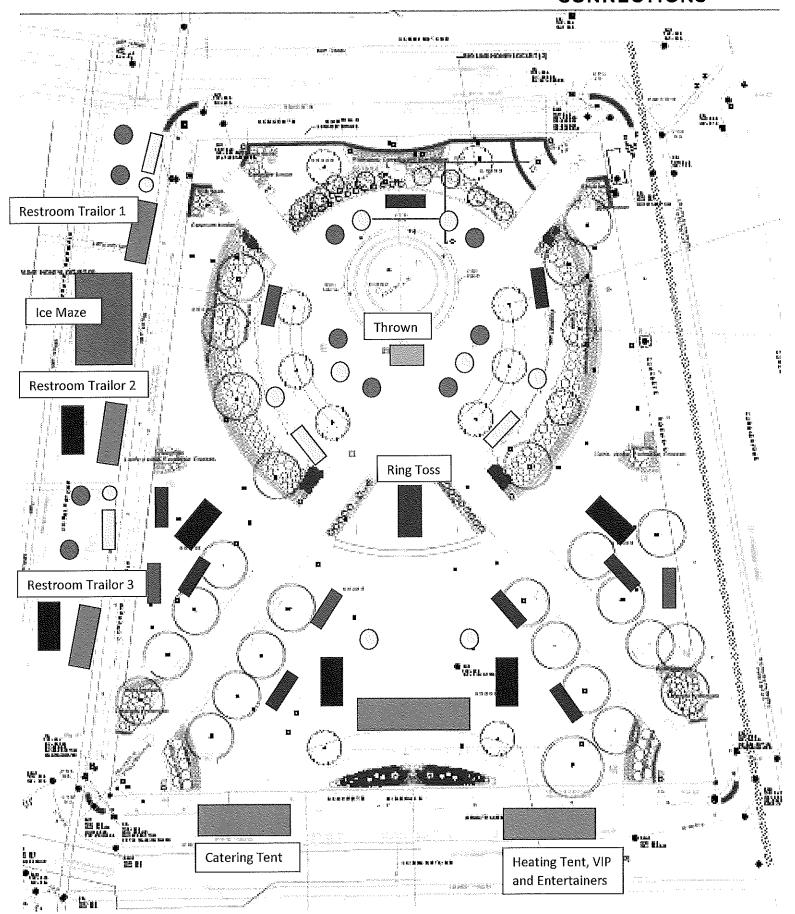
1.	Organization/person seeking variance: <u>Fcolab</u>					
2.	Event Name: Ecolab Centennial Celebration					
3.	Address and physical description of noise source location (Event, Worksite):					
	Rice Park - 109 W 4th St, St. Paul, MN					
4.	Responsible person: Madalyn WordenTitle: _Event Coordinator					
5.	Responsible person:Madalyn WordenTitle:Event CoordinatorTelephone:507.696.9605E-Mail:mworden@metroconnections.com					
6.	Date(s) variance requested: 3/12/23					
7.	Noise source - Time(s) of operation: <u>11 AM - 2 PM</u>					
	- Time(s) of pre-event sound check: 9 AM					
8.	Sound level requested (dBA/Decibels): 100 - 125 dBA					
9.	Mailing address w/zip code: 407 Cliff Rd E, Burnsville, MN 55337					
10.	Briefly describe the noise source and equipment involved:					
	There will be a stage with a couple of speakers spread throughout the park to play music throughout the					
	event					
11.	Describe the steps that will be taken to minimize the noise levels: Limited hours where noise will be amplified. Follow city regulations on noise variance.					
<i>12.</i>	State reason for seeking variance (example - music, announcements, construction, etc.): Speeches from Mayor and CEO of Ecolab and a live band					
13.	A <u>site diagram & map</u> must be attached showing location of noise source(s), streets, stages, tents, etc. (If					
the	re will be amplified sound, indicate location and direction that all speakers will be facing).					
	Multiple locations may require more than one application.					
14.	Submit completed application, site diagram/map, and \$175.00 fee to:					
	CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806					
Sig	nature of responsible person:Madalyn Worden Date:Date:					
AA-ADA-EEO Employer						



	(10) Igloos, 12' round
	(3) Restroom Trailors, 20'
	(1) Ice Maze
	Ice Thrown
	Ring Toss
	Bags (I didn't see these in the deck. If these need added I would recommend them going on Washingting by maze and igloos
	Putt Putt Golf Holes, 5'x10' (I need to confirm this measurement with our warehouse team) o This spacing doesn't include impact ice sculptures that would be around or over o The two in the street could have less ice impact
0	Fire Pits with Benches
	Heating lamps (these will not take up much room so didn't place)
	Seating Tables (do we need? Seating will be in igloos and around fire pits)
	Cocktail Tables (do we need? Seating will be in igloos and around fire pits)
	(4) Snack Station, each (2) 8' Tables
40.000	(4) Gourmet S'mores, each (2) 8' Tables
	(4) Mini Donuts, eacj (2) 8' Tables
	(4) Hot Beverages, (2) 8' Tables
	Catering & Storage Tent, 30'x60'
	Heating tent for VIP and Entertainers, 30'x40'
	Stage, not sure what size this will be yet
	Other items that will need placed • (2) Genorators

- o (1) Catering Tent
- o (1) for Stage and Restroom Trailors
- Ecolab Brand Ice Blocks

metro CONNECTIONS





DSI RECEIPT

CITY OF SAINT PAUL
Department of Safety and Inspections
375 Jackson Street Suite 220
Saint Paul, Minnesota 55101-1806
Phone: (651) 266-8989 Fax: (651) 266-9124
www.stpaul.gov/dsi

Date: 01/23/2023

Received From: ECOLAB dba: ECOLAB CENTENNIAL CELEBRATION

407 CLIFF ROAD E BURNSVILLE MN 55337

Description:

Invoice Details

Invoice Amount

Amount Paid

1140565

Noise Variance

\$178.00

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V6230	01/23/2023	\$178.00