

## CITY OF SAINT PAUL

Business Licensing 375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806

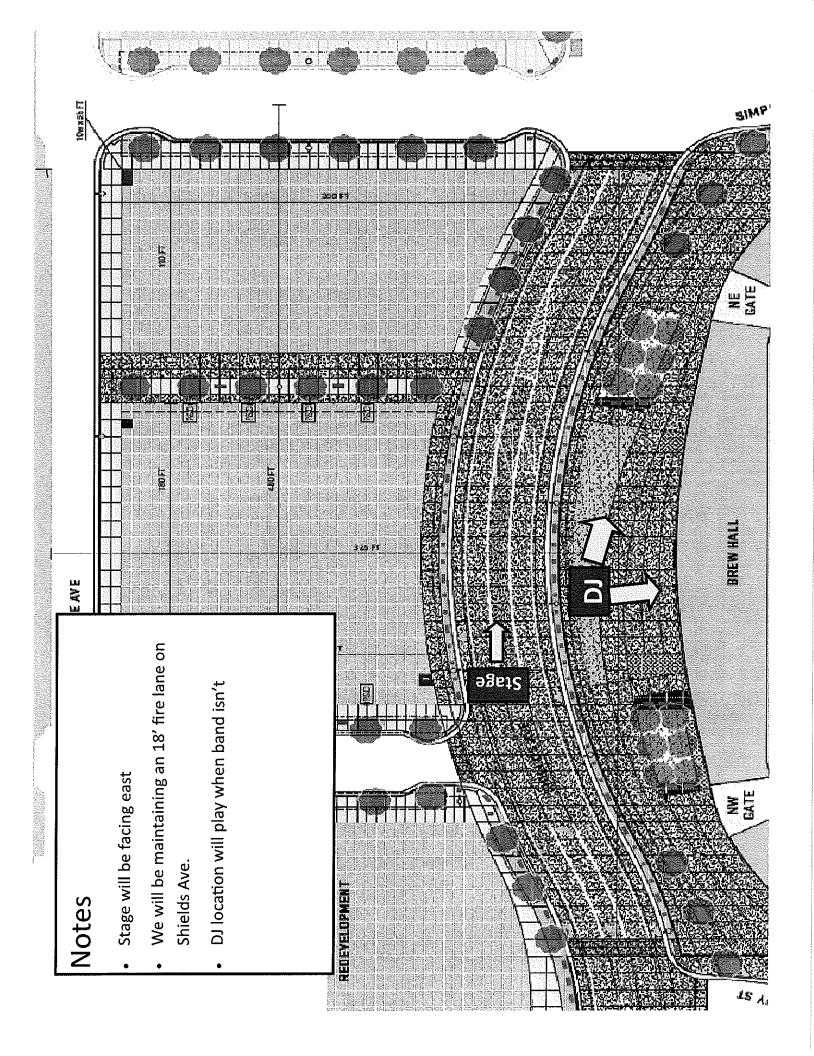
Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

## **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: Minnesot	ta United FC/ Allianz Field	
2. Event Name: MNUFC v LA Galaxy - MLS Regular Seas	on	
3. Address and physical description of noise source	e location (Event, Worksite	):
400 Snelling Ave. North - St. Paul, MN 55104		
4. Responsible person: Zacharia Litzelswope	Title: Director, Eve	nts & Guest Experience
5. Telephone: 612-928-6406	E-Mail: zacharia.l@mnufc	.com
6. Date(s) variance requested: Saturday, September	18, 2021	
7. Noise source - Time(s) of operation: 4:30PM - 7:0	00PM	
- Time(s) of pre-event sound chec	k: 3:30PM	
8. Sound level requested (dBA/Decibels): 95 dBA_		
9. Mailing address w/zip code: 400 Snelling Ave. Nor	th - St. Paul, MN 55104	
10. Briefly describe the noise source and equipmen	nt involved: Band Stage with s	peaker sound wings placed on Shields
Ave. and/or a DJ setup with stand speakers inside of the B	eer Garden on the Brew Hall pa	tio
11. Describe the steps that will be taken to minimize	e the noise levels: Every effo	ort will be made to aim speakers away
from residential areas and towards the stadium.		
12. State reason for seeking variance (example - mo	usic, announcements, cons	truction, etc.): MLS Soccer Game
13. Maximum number of attendees: 19,600		
14. Describe steps that will be taken to prevent CO	VID-19 virus spread: We will	follow all State and Local guidance as
well as highly encourage mask wearing for non-vaccinated		
15. A site diagram & map must be attached showing		
there will be amplified sound, indicate location and	d direction that all speakers	s will be facing).
NOTE: Multiple locations may require mo	re than one application.	
16. Submit completed application, site diagram/ma	ap, and \$175.00 fee to:	
CITY OF SAINT PAUL		
DEPARTMENT OF SAFETY AND INSPECTIONS		
375 JACKSON STREET, SUITE 220		
SAINT PAUL, MN 55101-1806		
I understand that any social gathering associated applicable Governor Walz COVID-19 orders relating		
Signature of responsible person : <u>Jackaria A</u>	Litzelswops	Date: 07/20/21
AA/	ADA-EEO Employer	April 2021





## **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: 07/22/2021

Received From: ZACHARIA LITZELSWOPE dba: MINNESOTA UNITED FC

400 SNELLING AVE N ST PAUL MN 55104

Description:

Invoice Details

**Invoice Amount** 

**Amount Paid** 

1110125

Noise Variance

\$175.00

\$175.00

**TOTAL AMOUNT PAID:** 

\$175.00

## Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V4511	07/22/2021	\$175.00