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CITY OF SAINT PAUL

Signature of responsible person:

AUG 0 5 2021

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

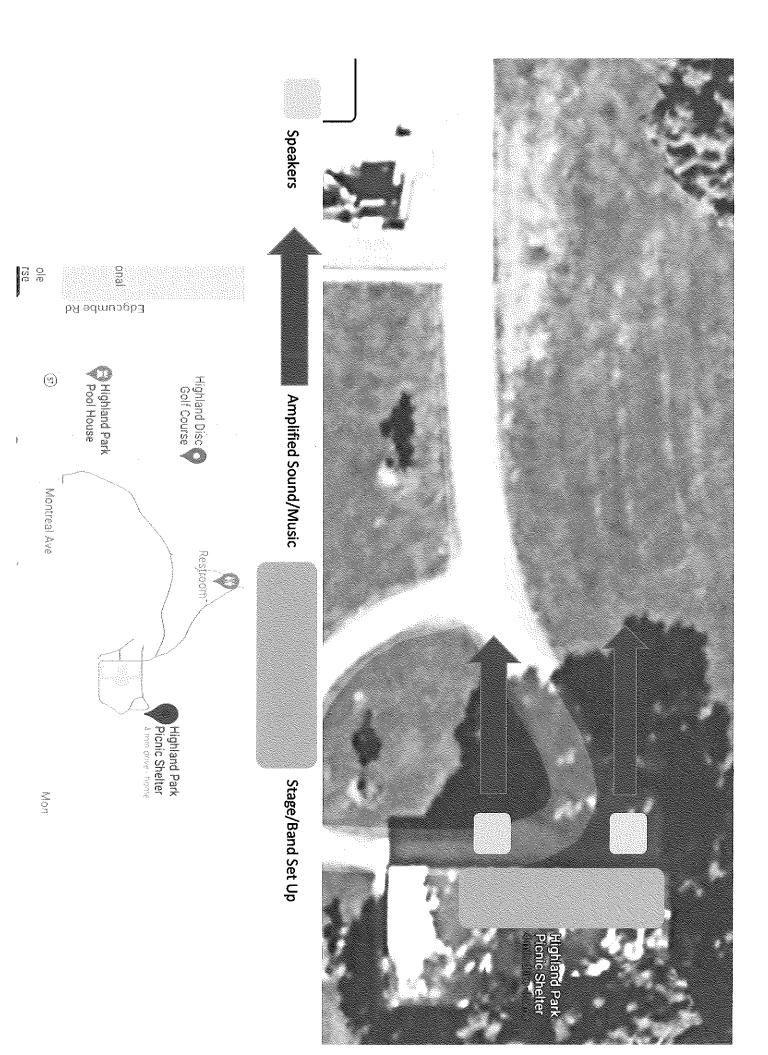
Legislative Code Chapter 293. - Noise Regulations

Application and \$175 fee should be submitted a minimum of sixty (60) days prior to the event date to allow ample time for required public notification period and scheduling of a Council public hearing. Applications submitted within sixty (60) days of the event date may not satisfy the processing timeline requirements.

1.	Organization/person seeking variance: Laura K. LeFebvre				
	Event Name: Highland Park Harmonies				
	Address and physical description of noise source location (Event, Worksite): 1227 Montreal Ave. Saint Paul, MN 55116				
	Highland Park Picnic Shelter				
4.	Responsible person: Laura LeFebvreTitle:Event Organizer				
5.	Telephone: 419-309-2220 E-Mail: laurakwik@gmail.com				
6. .	Date(s) variance requested: Saturday, October 16, 2021				
7.	Noise source - Time(s) of operation: 1:00-6:30pm				
	- Time(s) of pre-event sound check: 12:00pm				
8. .	Sound level requested (dBA/Decibels): 120 dB				
9.	9. Mailing address w/zip code: 1338 Bayard Ave, Suite B, Saint Paul, MN 55116				
10.	Briefly describe the noise source and equipment involved: Speakers, sound equipment, microphones				
11. (Describe the steps that will be taken to minimize the noise levels: Hired a professional sound guy to control levels and run the sound board				
12.	State reason for seeking variance (example - music, announcements, construction, etc.): Music/Concert				
13. /	Maximum number of attendees: ²⁵⁰				
14. [Describe steps that will be taken to prevent COVID-19 virus spread:				
	Signs posted to encourage social distancing, masks and sanitizer provided at event				
15. <i>i</i>	A <u>site diagram & map</u> must be attached showing location of noise source(s), streets, stages, tents, etc. (If				
there	e will be amplified sound, indicate location and direction that all speakers will be facing). Multiple				
locat	tions may require more than one application.				
16 . :	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				
Lunc	lerstand that any social gathering associated with this variance must be managed in full compliance				
	all applicable Governor Walz COVID-19 orders relating to distancing, masks and attendance limits.				

AA-ADA-EEO Employer

February 2020





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: 08/05/2021

Received From: LAURA LEFEBVRE

1338 BAYARD AVE STE B ST PAUL MN 55116

Description:

Invoice Details Invoice Amount Paid

1110761

Noise Variance \$175.00

TOTAL AMOUNT PAID: \$175.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	1713	08/05/2021	\$175.00