



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/itsl

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.

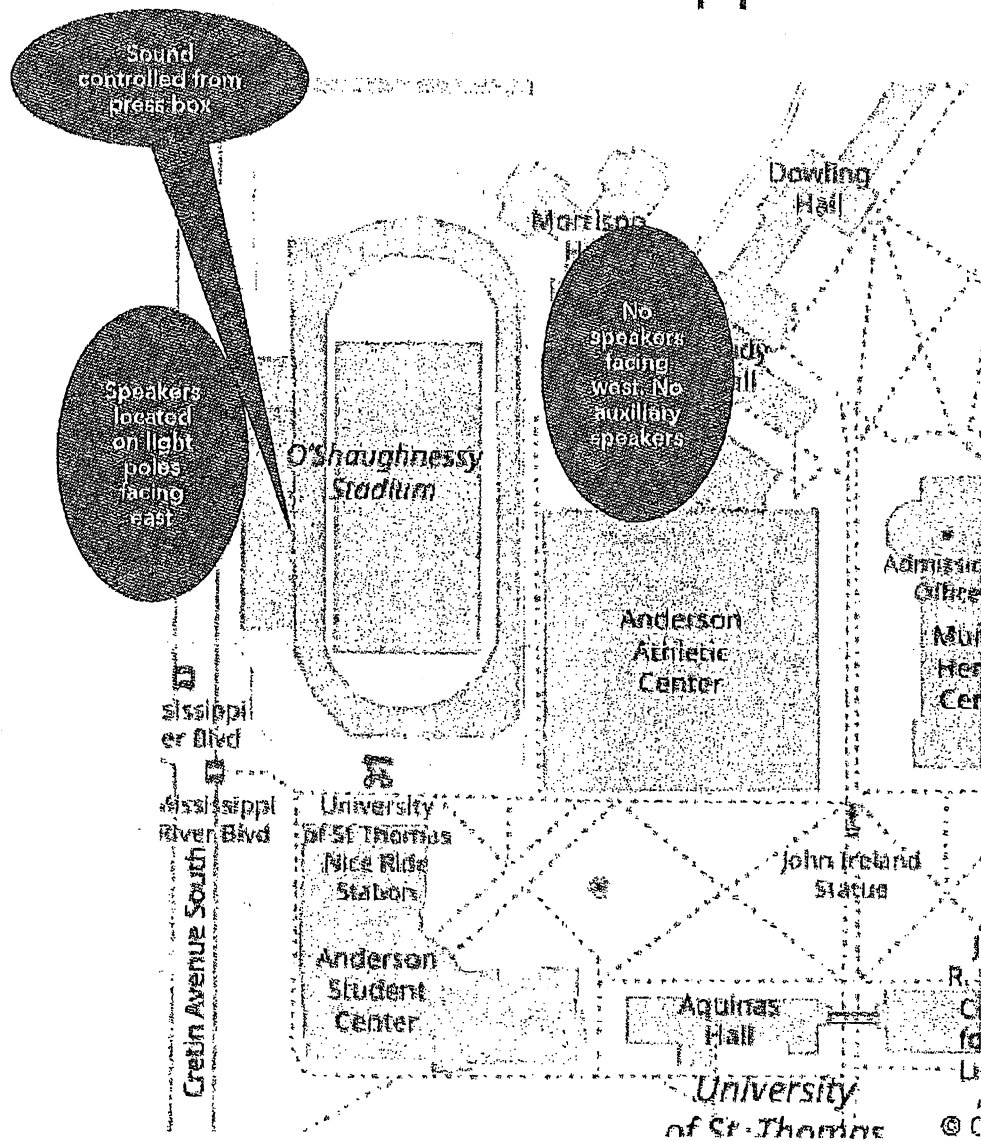
1. Organization/person seeking variance: *University of St. Thomas*
2. Event Name: *St. Thomas Football*
3. Address and physical description of noise source location (Event, Worksite): *O'Shaughnessy Stadium University of St. Thomas 2115 Summit Avenue, St. Paul MN 55105.*
4. Responsible person: *Zachary DuBois Title: St. Paul Campus Manager*
5. Telephone: *651-962-5105 E-Mail: dubo0018@stthomas.edu*
6. Date(s) variance requested: *9/10/2022, 9/24/2022, 10/8/2022, 10/15/2022, 10/29/2022, and 11/12/2022*
7. Noise source - Time(s) of operation: *10:00 AM to 04:30 PM*
- Time(s) of pre-event sound check: *09:00 AM*
8. Sound level requested (dBA/Decibels): *92dBA at 50 feet*
9. Mailing address w/zip code: *2115 Summit Avenue St. Paul Mn 55105 Mail: 4081*
10. Briefly describe the noise source and equipment involved: *Stadium Speakers*
11. Describe the steps that will be taken to minimize the noise levels: *Sound will be monitor in the area and neighborhood. Should be consistent with previous years of football games.*
12. State reason for seeking variance (example - music, announcements, construction, etc.): *There will be music and announcements during the game.*
13. Maximum number of attendees: *3000*
14. Describe steps that will be taken to prevent COVID-19 virus spread: *We will follow all state guidance and applicable rules/laws.*
15. A site diagram & map must be attached showing location of noise source(s), streets, stages, tents, etc. (If there will be amplified sound, indicate location and direction that all speakers will be facing). **Multiple locations 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

I understand that any social gathering associated with this variance must be managed in full compliance with all applicable Governor Walz COVID-19 orders relating to distancing, masks and attendance limits.

Signature of responsible person: _____ Date: _____

Layout Map for Sound Variance Application





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: 08/08/2022

Received From: ZACHARY DUBOIS dba: UNIVERSITY OF ST. THOMAS
2115 SUMMIT AVE ST PAUL MN 55105

Description:

Invoice Details

1128525

Noise Variance

Invoice Amount

\$178.00

Amount Paid

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V2848	08/08/2022	\$178.00