

Received

AUG 2 3 2022

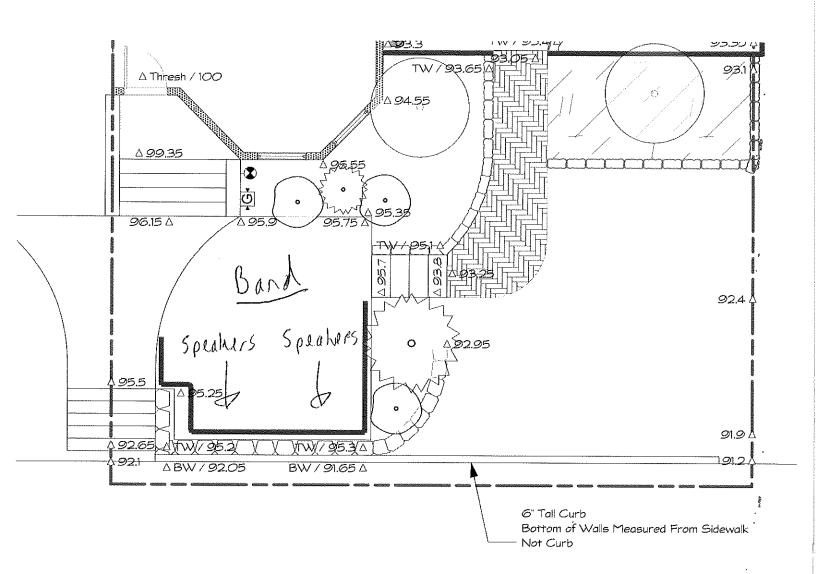
375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806 Tel: 651-266-8989 | Fax: 651-266-9124 · mAtt

City of Saint Paul - DSI

Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations Application and \$178 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: < O > L O > L V Y
2. Event Name: _ Twin Cilies Monthson Porty
3. Address and physical description of noise source location (Event, Worksite): 587 Summil Avt
St Paul, 55102. Band on Pront lawn during the marathon
4. Responsible person: ROSW COOLINY Title: NA
5. Telephone: 651-338-3880 E-Mail: rv. codly @ 1 mail: com
6. Date(s) variance requested: $10/2/22$
7. Noise source - Time(s) of operation: 11:00 on -1:00 pm
- Time(s) of pre-event sound check: 10:30 α ~
8. Sound level requested (dBA/Decibels): 403, based on Way search on outhor convers 10-100
9. Mailing address w/zip code: 587 Summit Aul, St Paul MN 55102
10. Briefly describe the noise source and equipment involved: WE Flor or hiring A
bond, they will have amplifiers
11. Describe the steps that will be taken to minimize the noise levels: We can have the bank for talk!
12. State reason for seeking variance (example - music, announcements, construction, etc.): Mard Mon
13. Maximum number of attendees: <u>3 0</u>
14. A <u>site diagram & map</u> 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.)
15. Submit completed application, site diagram/map, and \$178 fee to: CITY OF SAINT PAUL, DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220 SAINT PAUL, MN 55101-1806
understand any social gathering associated with this variance must be managed in compliance with any applicable Mayor Carter executive order regarding vaccinations, distancing, masks and attendance limits.
Signature of responsible person: $1000000000000000000000000000000000000$







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: 08/23/2022

Received From: ROBERT COOLEY

587 SUMMIT AVE ST PAUL MN 55102

Description:

Invoice Details

Invoice Amount

Amount Paid

1128868

Noise Variance

\$178.00

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	1498	08/23/2022	\$178.00