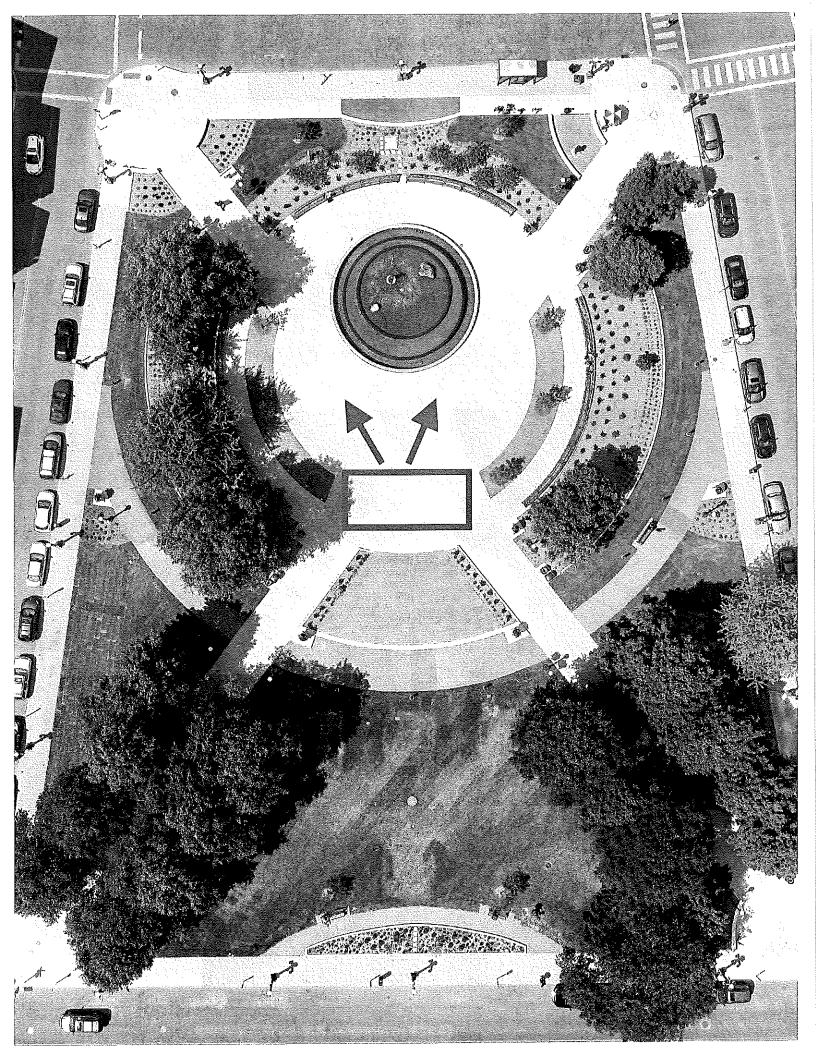


375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806 Tel: 651-266-8989 | Fax: 651-266-9124

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: Ruck B Media/Kyle Rucker				
	Event Name: St. Paul Pride Festival & Parade				
	3. Address and physical description of noise source location (Event, Worksite): Rice Park Will have a stage for live music at Rice park for St. Paul Pride Festival Parade Launch Party				
4.	Responsible person: Kyle Rucker	Title: Owner, Ruck B Media			
5.	Telephone: 612-298-6651	E-Mail: ruckbmedia@gmail.com			
<i>6</i> .	Date(s) variance requested: June 15, 2024				
	Noise source - Time(s) of operation: 11am-10pm				
	- Time(s) of pre-event sound check: 8 am sound check				
8.	Sound level requested (dBA/Decibels): 95dba				
	Mailing address w/zip code: 6 W 5th St, Suite 300F, St. Paul MN 55102				
	Briefly describe the noise source and equipment involved: Live music at the park				
11. Describe the steps that will be taken to minimize the noise levels: We will have a sound technician					
on hand to minimize unnecessary noise levels.					
12.	State reason for seeking variance (example - music,	announcements, construction, etc.): Live music			
13.	Maximum number of attendees: <u>1500</u>				
14.	14. A <u>site diagram & map</u> must be attached showing location of noise source(s), streets, stages, tents, etc.				
(if t	here will be amplified sound, indicate location and	direction that all speakers will be facing).			
Multiple locations may require more than one application.					
<i>15</i> .	Submit completed application, site diagram/map, a	nd \$178 fee to:			
	CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND INSPECTIONS 375 STREET, SUITE 220 SAINT PAUL, MN 55101-1806	JACKSON			
Sign	ature of responsible person:	4/1/2024 Date:			





DSI RECEIPT

CITY OF SAINT PAUL

Department of Safety and Inspections 375 Jackson Street Suite 220 Saint Paul, Minnesota 55101-1806 Phone: (651) 266-9899 Fax: (651) 266-9124 www.stpaul.gov/dsi

Date: 04/19/2024

Received From: RUCK B MEDIA

6 5TH ST STE 300F ST PAUL MN 55102

Description:

Invoice Details

Invoice Amount

Amount Paid

1160263

Noise Variance

\$356.00

\$356.00

TOTAL AMOUNT PAID:

\$356.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V9710	04/19/2024	\$356.00