

Signature of responsible person:

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)
ANGIE WIESE, DIRECTOR

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

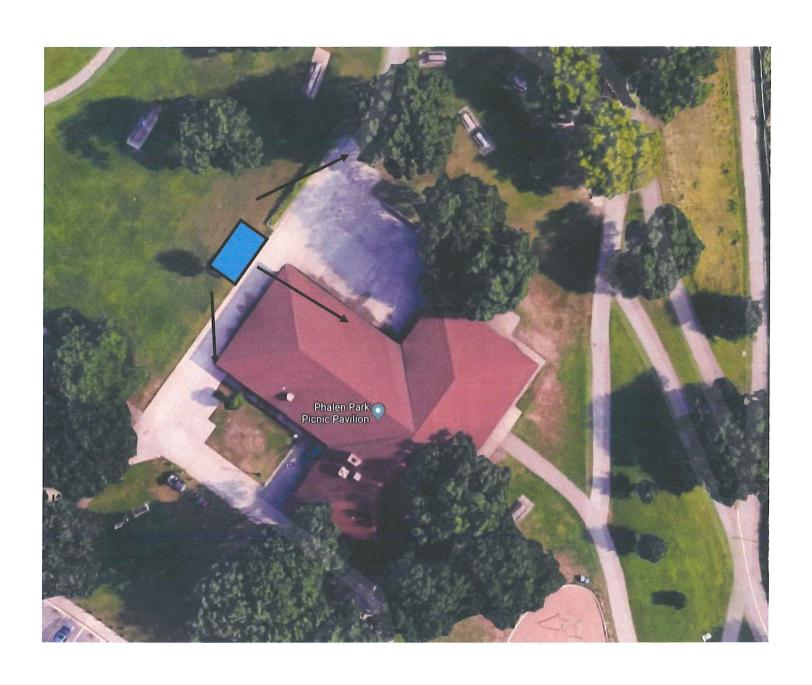
Sound Level Variance Application

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: Anderson Ra	ce Mana	agment/Jennifer Williams			
	Event Name: Miles for Melanoma					
	Address and physical description of noise source locatio alen Lake Pavillion	on (Event,	Worksite):			
4.	Responsible person: Jennifer Williams		tle: Director of Events			
<i>5.</i>	Telephone: 612-475-0600		jennifer@andersonraces.com			
<i>6</i> .	Date(s) variance requested: Saturday, August 17 202	24				
7.	Noise source - Time(s) of operation: 8 am - 12 pm	-				
	- Time(s) of pre-event sound check: $\frac{7:30}{}$		1			
8.	Sound level requested (dBA/Decibels): 100 decibels o	r lower				
9.	iling address w/zip code: ARM - 4047 Camberwell Dr N, Eagan, MN 55123					
<i>10</i> .	Briefly describe the noise source and equipment involve	ed: DJ So	ound system and microphone			
11. Describe the steps that will be taken to minimize the noise levels: Speakers away from houses and						
wa						
12. State reason for seeking variance (example - music, announcements, construction, etc.):						
	ce music and annoucements					
	Maximum number of attendees: 300					
14. A <u>site diagram & map</u> must be attached showing location of noise source(s), streets, stages, tents, etc.						
	f there will be amplified sound, indicate location and direction that all speakers will be facing). Inultiple locations may require more than one application.					
	Submit completed application, site diagram/map, and \$		0.			
40.	Submit completed application, site diagram, map, and q	sarojee t	<i>.</i> .			
	CITY OF SAINT PAUL					
	DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON					
	STREET, SUITE 220					
	SAINT PAUL, MN 55101-1806					

Jennifer Williams

Miles for Melanoma 5K Run/Walk August 17. 2024 8 am—12 pm Phalen Park 1600 Phalen Dr St. Paul, MN 55106





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: 07/17/2024

Received From: ANDERSON RACE MANAGEMENT

4047 CAMBERWELL DRIVE N EAGAN MN 55123

Description:

Invoice Details

Invoice Amount

Amount Paid

1163047

Noise Variance

\$178.00

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V5076	07/17/2024	\$178.00