



SAINT PAUL
SAFETY & INSPECTIONS

E 4/23

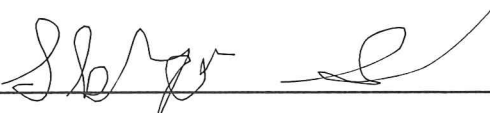
375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806
Tel: 651-266-8989 | Fax: 651-266-9124

Sound Level Variance Application

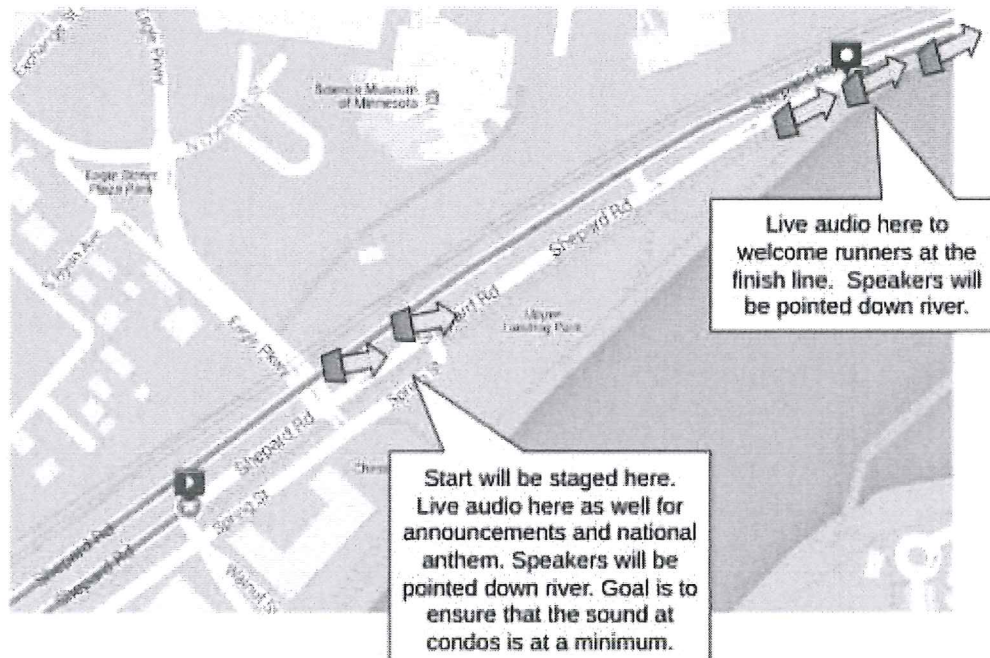
Legislative Code Chapter 293. - Noise Regulations Application and \$178 fee should be submitted a minimum of sixty (60) days prior to the event date to allow ample time for required public notification period and scheduling of a Council public hearing. Applications submitted within sixty (60) days of the event date may not satisfy the processing timeline requirements.

1. Organization/person seeking variance: Podium Sports Marketing
2. Event Name: Human Powered Health Half Marathon
3. Address and physical description of noise source location (Event, Worksite): 226 Spring St, St Paul, MN 55102
4. Responsible person: Skylar Swenson Title: Race Operations Manager
5. Telephone: 7634528326 E-Mail: skylar@mnrseries.com
6. Date(s) variance requested: June 1, 2024
7. Noise source - Time(s) of operation: 7:30am - 11:00am
- Time(s) of pre-event sound check: 7:00am
8. Sound level requested (dBA/Decibels): 85 dba
9. Mailing address w/zip code: 1835 5th ave, anoka, MN 55303
10. Briefly describe the noise source and equipment involved: 4-6 speakers set up at the start/finish line to announce runners at the beginning of the race and also at the end.
11. Describe the steps that will be taken to minimize the noise levels: We will actively work with our announcer to make sure nothing is too loud and we will adjust immediately as necessary.
12. State reason for seeking variance (example - music, announcements, construction, etc.): music and announcer
13. Maximum number of attendees: 2000
14. 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.
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

Signature of responsible person:  Date: 2/20/24

Human Powered Health Half Marathon
Saturday, May 6, 2023





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: 04/30/2024

Received From: PODIUM SPORTS MARKETING
1835 5TH AVE ANOKA MN 55303

Description:

Invoice Details

1160523

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	V3670	04/30/2024	\$178.00