Received

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)

ANGIE WIESE, DIRECTOR

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AUG 0 3 2023

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.

The state of the s
1. Organization/person seeking variance: SAINT PAUL YACHT CLUB-SPE
2. Event Name: SPYC WALL
3. Address and physical description of noise source location (Event, Worksite): 5PTC Lower
HARBOT ON Harriet ISLAND, BAND ON docks/BOAT.
4. Responsible person: DIANE SCOVILL Title: SOCIAL Chair
5. Telephone: 6/2:719.9769 E-Mail: diane Scottle St paul Machtly
6. Date(s) variance requested: SATURDAY, AUDUST 26th, 2023
7. Noise source - Time(s) of operation: MUSIC - LISE BAND 600-900 AM
- Time(s) of pre-event sound check: 5:00-6:00-8M
8. Sound level requested (dBA/Decibels):
9. Mailing address w/zip code: 584C 375 WATER STREET, SATINT RAID, WIN. 55102
10. Briefly describe the noise source and equipment involved: 4 person Band, deums,
electric quiter, Burn and Amplified Singer.
11. Describe the steps that will be taken to minimize the noise levels: Concernsed time
music must allow for reople to talk to each other.
12. State reason for seeking variance (example - music, announcements, construction, etc.): RE QUO. WO
of lower Harbor After Historic deedging, Musicand Announcements
13. Maximum number of attendees: 47
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
OCHT 1 AGE, 1914 93101-1000

Signature of responsible person: <u>Maule M Ga</u>

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