



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220
Saint Paul, Minnesota 55101-1806

Telephone: 651-266-8989
Facsimile: 651-266-9124
Web: www.stpaul.gov/dsi

Public Hearing
May 2

Application for Sound Level Variance
City of Saint Paul Noise Ordinance
Chapter 293 of the Saint Paul Legislative Code

- Organization or person seeking variance: Ordway Center for the Performing Arts
- Mailing Address with Zip Code: 345 Washington St. ; St Paul MN 55102
- Responsible person: Julia Erickson
- Title or position: Assistant Production Manager
- Telephone: 651-282-3039
- Briefly describe the noise source and equipment involved: 6 L-Acoustics AV-Doxe speakers ;
4 L-Acoustics sub high output subwoofer ; dance panels
- Address or legal description of noise source: Market street between west 5th street
and west 6th street in landmark Plaza
- Noise source time of operation: 5:30pm-10:30pm
- Briefly describe the steps that will be taken to minimize the noise levels: Music is for dancing
which is the focus of the event. Ordway Management will be on-site
to monitor at all times
- Briefly state reason for seeking variance: some band noise may carry
- Date(s) during which the variance is requested: June 14, 21, 28 ; July 12, 19, 26 ; Aug 2 & 9, 2012

Signature of responsible person: Julia Erickson Date: _____

Return completed Application and \$164.00 fee to:
CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806
(651) 266-8989

Office Use Only	
Date Rec'd.	_____
Reviewed	_____
Date Public Notice Sent	_____
Referred to Council	_____

NOTE: APPLICATION MUST BE RECEIVED NO FEWER THAN 30 (THIRTY) DAYS PRIOR TO THE EVENT DATE



DSI RECEIPT

CITY OF SAINT PAUL
Department of Safety and Inspections
375 Jackson Street Suite 220
Saint Paul, Minnesota 55101-1806
Phone: (651) 266-8989 Fax: (651) 266-9124
www.stpaul.gov/dsi

Date: 04/10/2012

Received From: ORDWAY CENTER FOR THE PERFORMING ARTS
345 WASHINGTON ST ST PAUL MN 55102-1419

Description:

Invoice Details

804747

Noise Variance

Invoice Amount

\$164.00

Amount Paid

\$164.00

TOTAL AMOUNT PAID:

\$164.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	214968	04/10/2012	\$164.00