

CITY OF SAINT PAUL

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

Telephone: 651-266-398 Facsimile: 651-266-9124 Web: www.stpaul.govids

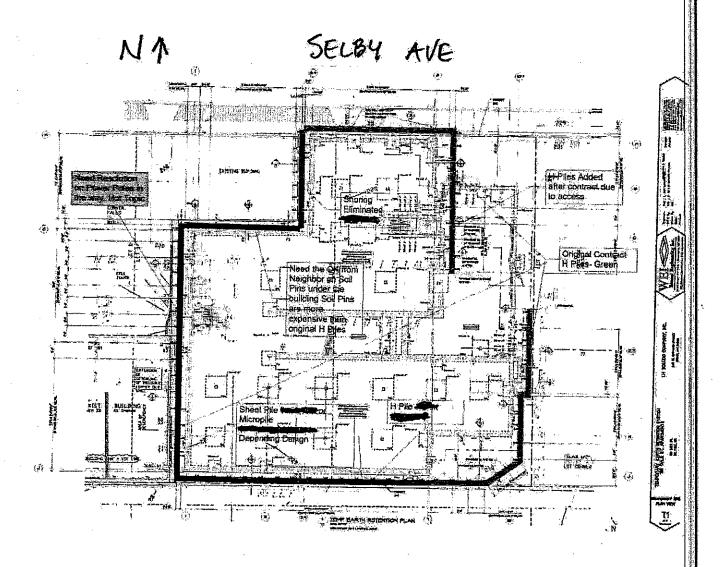
Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 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: 594 SELBY METLLE TIL DEVELOPMENT
2. Event Name: N/A CONSOPUCTION OF NEW APARTMENT BUILDING
3. Address and physical description of noise source location (Event, Worksite): 594 SECBY AVENT
The second secon
4. Responsible person: JIM LAVALLE Title: MEMBEL 5. Telephone: 0/2 751 1919 F-Mail: (AVALLE) IM @ CARCAST IN
6. Date(s) variance requested: \(\sqrt{BD} \)
7. Noise source - Time(s) of operation: T:00 A.M. TO 5:00 P.M.
- Time(s) of pre-event sound check: N/A
8. Sound level requested (dBA/Decibels): JALIES - 11 WILL BE LOUD
9. Mailing address w/zip code: 24/6 EDGCUMBE FD ST PAUL MN 55/16
10. Briefly describe the noise source and equipment involved: STEEL BEAMS WILL BE
DRIVEN INTO SOILS WITH A CRANE HAMMER
11. Describe the steps that will be taken to minimize the noise levels: ONLY PHIVE AS
SPACEOW AS POSSIBLE WITH MINIMUM NUMBER REDUIRED
12. State reason for seeking variance (example - music, announcements, construction, etc.): CONSTRUCTION & FOUNDATIONS
13. Maximum number of attendees: VIA
14. Describe steps that will be taken to prevent COVID-19 virus spread: CONSTRUCTION
PROYOCALS - DISTANCING - HOND SANTTIZERS - MASES
15. 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.
16. Submit completed application, site diagram/map, and \$175.00 fee to: CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220
SAINT PAUL, MN 55101-1806
I understand that any social gathering associated with this variance must be managed in full compliance
with all applicable Governor Walz COVID-19 orders relating to distancing, masks and attendance limits.
Signature of responsible person:
AA-ADA-EEO Employer

February 2020





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: 10/08/2021

Received From: JIM LAVALLE dba: TJL DEVELOPMENT

2416 EDGCUMBE ROAD ST PAUL MN 55116

Description:

Invoice Details

Invoice Amount

Amount Paid

1118837

Noise Variance

\$175.00

\$175.00

TOTAL AMOUNT PAID:

\$175.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V8152	10/08/2021	\$175.00