

# 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](http://www.stpaul.gov/dsi)

13  
m: THE FRIENDS OF ST PAUL PUBLIC LIBRARY  
325 CEDAR ST UNIT 555 ST PAUL MN 55101

on:

ce Details

57

oise Variance

Invoice Amount

Amount Paid

\$164.00

\$164.00

**AMOUNT PAID:**

**\$164.00**

	Check #	Received Date	Amount
	3465	08/05/2013	\$164.00



CITY OF SAINT PAUL **RECEIVED IN D.S.I.**  
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

AUG 05 2013

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

1. Organization or person seeking variance: The Friends of the Saint Paul Public Library
2. Mailing Address with Zip Code: 325 Cedar Street #555, St Paul 55101
3. Responsible person: Elizabeth R. Boyd
4. Title or position: Director of Individual and Planned Giving
5. Telephone: 651-366-6490
6. Briefly describe the noise source and equipment involved: We will have three bands playing 45 mins each using sound equipment with speakers
7. Address or legal description of noise source: Central Library - 90 West 4th Street St Paul 55102 - #0N Kellogg Blvd Terrace
8. Noise source time of operation: 1 to 5pm - September 15, 2013
9. Briefly describe the steps that will be taken to minimize the noise levels: \_\_\_\_\_

10. Briefly state reason for seeking variance: Hosting a music event for our members and donors
11. Date(s) during which the variance is requested: September 15, 2013

Signature of responsible person: Elizabeth R. Boyd Date: 7/29/2013

**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**