## Received



AUG 23 2023

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)

ANGIE WIESE, DIRECTOR

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

## City of Saint Paul - DSI

## 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: Church of St. Mark					
	Event Name: St. Mark's Oktoberfest					
	Address and physical description of noise source location (Event, Worksite):					
1976-1983 Dayton Ave. Entertainment tent; Inflatables						
4.	Responsible person: Audrey Koval					
5.	Telephone: 571-345-6149 E-Mail: akoval@onestrongfamily.org					
6.	Date(s) variance requested: October 7, 2023					
7.	Noise source - Time(s) of operation: 11am - 5pm					
	- Time(s) of pre-event sound check: N/A					
8.	Sound level requested (dBA/Decibels):					
9.	Mailing address w/zip code: 1976 Dayton Ave, St. Paul, MN 55104					
10.	O. Briefly describe the noise source and equipment involved:					
Will	use hand-held microphone & speaker to announce events. Musicians may provide their own sound amplification					
11.	Describe the steps that will be taken to minimize the noise levels: Music will be limited to					
sho	ort periods of time or will not be amplified					
	State reason for seeking variance (example - music, announcements, construction, etc.):					
	usic & announcements					
	Maximum number of attendees: 300-400					
14.	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).					
	there will be amplified sound, indicate location and direction that all operators than 25 years, indicate location and direction.					
	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 (					

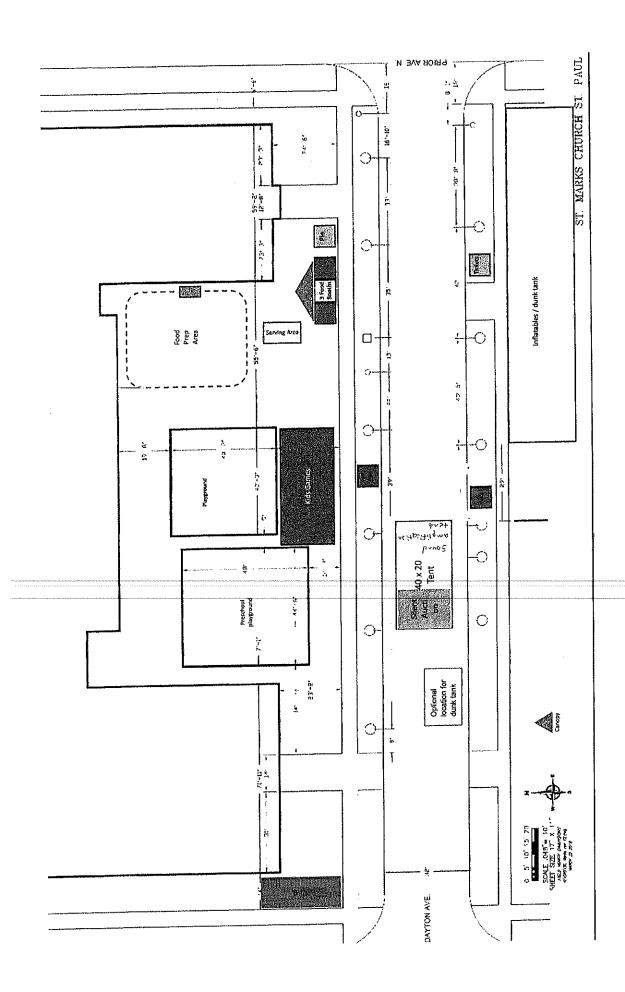
CITY OF SAINT PAUL MELVIN CARTER, MAYOR

Signature of responsible person:

AN AFFIRMATIVE ACTION & EQUAL OPPORTUNITY EMPLOYER

STPAUL.GOV

Date: 8. 15.2023





## **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: 08/24/2023

Received From: CHURCH OF ST MARK

1976 DAYTON AVE ST PAUL MN 55104

Description:

Invoice Details

Invoice Amount

**Amount Paid** 

1146945

Noise Variance

\$178.00

\$178.00

**TOTAL AMOUNT PAID:** 

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	010390	08/24/2023	\$178.00