

DEPARTMENT OF SAFETY AND INSPECTIONS  
Ricardo X. Cervantes, Director



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

### Sound Level Variance Application

City of Saint Paul Noise Ordinance (Chapter 293)

**Note:** A public hearing before the Saint Paul City Council is required. Application and fee must be received no fewer than forty five (45) days prior to the public hearing date that is before the requested Variance start date.

1. Organization/person seeking variance: Shakey Bones
2. Mailing Address w/zip code: 894 Bixwell St. WSP MN 55118
3. Responsible person: Mary Hane Title: N/A
4. Event Name: Shakey Bones Customer Appreciation
5. Telephone: 651-491-0366 E-Mail: mahane1@gmail.com
6. Date(s) during which the variance is requested: 7-28-18
7. Noise source - Time(s) of operation: 10:00am - 4:30pm  
- Time(s) of pre-event sound check: N/A
8. Address or legal description of Noise source: Raspberry Island ~~at Washburn~~  
~~Street~~ St Paul, MN 55107
9. Sound level requested: 90 decibels
10. Briefly describe the noise source and equipment involved: DJ Equipment

11. Describe the steps that will be taken to minimize the noise levels: Keeping the volume at 90 decibels or less

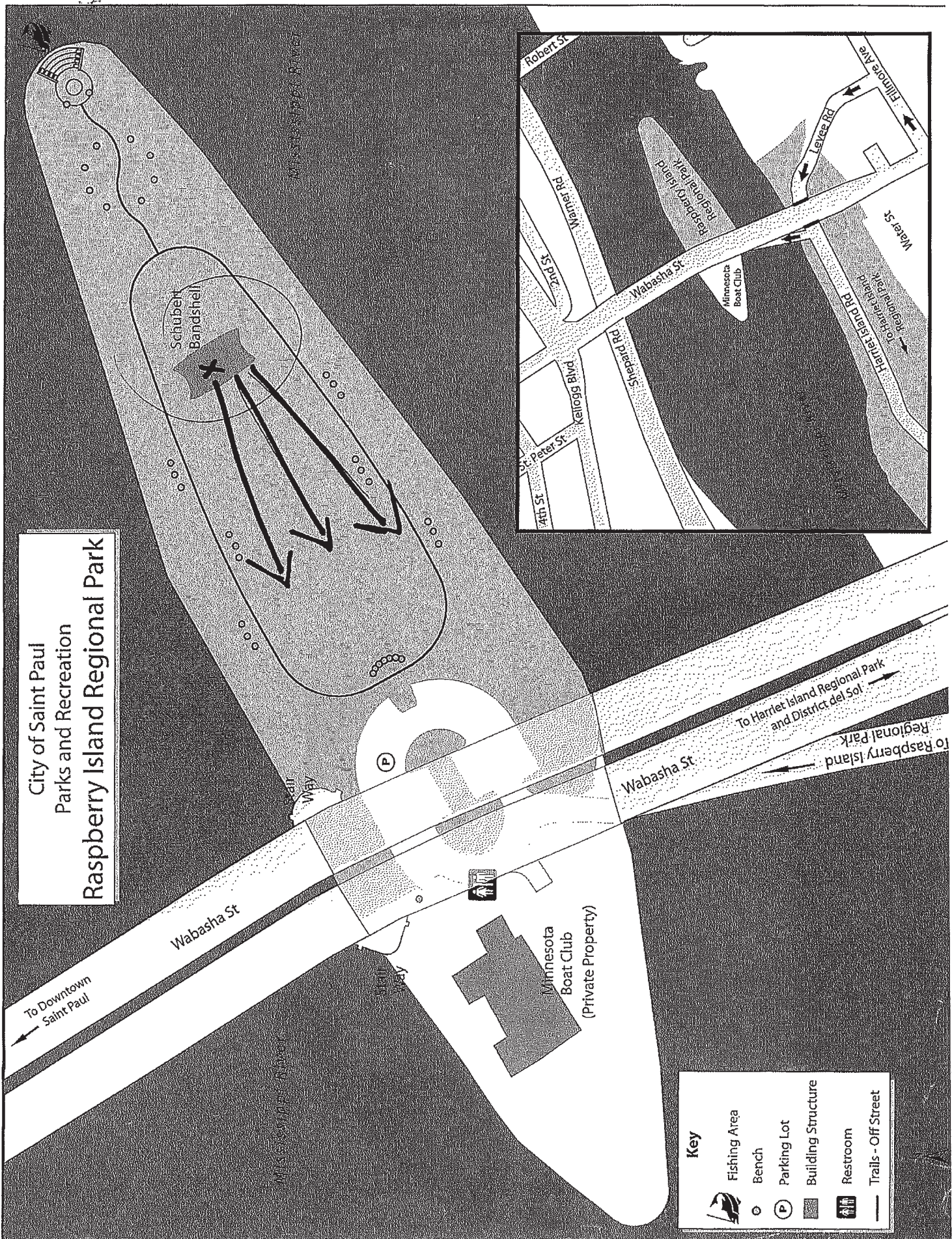
12. State reason for seeking variance (E.g. music, announcements, construction, etc.): music being played by DJ

13. Attach site diagram 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.

14. Return completed Application, Site Diagram, and \$172.00 fee to: CITY OF SAINT PAUL  
DEPARTMENT OF SAFETY AND INSPECTIONS  
375 JACKSON STREET, SUITE 220  
SAINT PAUL, MN 55101-1806

Signature of responsible person: [Signature] Date: 5-29-18

City of Saint Paul  
Parks and Recreation  
**Raspberry Island Regional Park**



**Key**

- Fishing Area
- Bench
- Parking Lot
- Building Structure
- Restroom
- Trails - Off Street



# 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)

Date: 06/01/2018

Received From: MARY A HANE dba: SHAKEY BONES  
 894 BIDWELL ST WEST ST PAUL MN 55118

Description:

Invoice Details	Invoice Amount	Amount Paid
1025183 Noise Variance	\$172.00	\$172.00
<b>TOTAL AMOUNT PAID:</b>		<b>\$172.00</b>

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	VISA- 8759	06/01/2018	\$172.00