

RECEIVED IN D.S.I.



CITY OF SAINT PAUL  
Christopher B. Coleman, Mayor

APR 27 2015

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

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

4/29/15  
pd 001 CLK# 7805 #1189  
22

### 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.

- Organization/person seeking variance: Kelly O'Shaughnessy
- Mailing Address w/zip code: 702 Fairmount Ave St Paul 55105
- Responsible person: Kelly O'Shaughnessy Title: \_\_\_\_\_
- Event Name: Wedding
- Telephone: (651) 592-4480 E-Mail: Kellyjeano@gmail.com
- Date(s) during which the variance is requested: June 13 2015
- Noise source - Time(s) of operation: 4:00 - 11:00 pm  
- Time(s) of pre-event sound check: \_\_\_\_\_
- Address or legal description of Noise source: 702 Fairmount Ave
- Sound level requested: \_\_\_\_\_
- Describe the noise source and all equipment involved: Sonos speakers in backyard
- Describe the steps that will be taken to minimize the noise levels: only using Sonos
- State reason for seeking variance: (E.g. music, announcements, construction, etc.) music for wedding
- 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 \$164.00 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: [Handwritten Signature] Date: 4.22.15



# 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: 04/29/2015

Received From: **KELLY O'SHAUGHNESSY**  
702 FAIRMOUNT AVE ST PAUL MN 55105

Description:

Invoice Details

925923

Noise Variance

Invoice Amount

\$164.00

Amount Paid

\$164.00

**TOTAL AMOUNT PAID:**

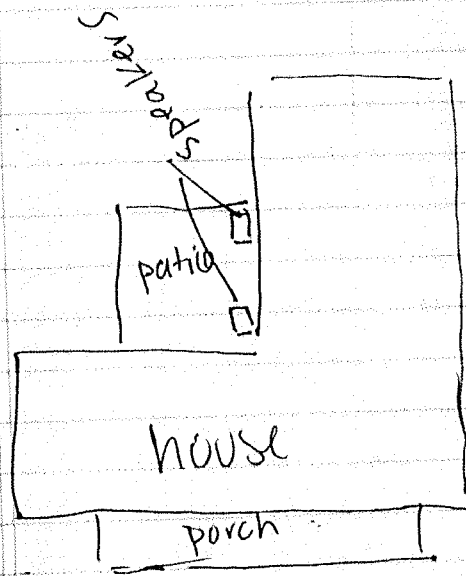
**\$164.00**

Paid By:

Payment Type	Check #	Received Date	Amount
Check	7805	04/29/2015	\$164.00

# DIAGRAM

alley



Fairmount ave