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CITY OF SAINT PAUL

AUG 04 2021

Business Licensing
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

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: American Foundation for Suicide Prevention/Erik Arveseth
2. Event Name: Twin Cities Out of the Darkness Walk
3. Address and physical description of noise source location (Event, Worksite):
1199 Midway Parkway, amplified speaking and live music from mobile stage
4. Responsible person: Erik Arveseth Title: Chapter and Event Chair
5. Telephone: 612-568-6548 E-Mail: erik.arveseth@afspmn.org
6. Date(s) variance requested: Sunday September 19, 2021
7. Noise source - Time(s) of operation: 8:00 a.m. 2:00 p.m. (background music except for performances from 10-11:00)
- Time(s) of pre-event sound check: minimal on the 18th mid day and 8 day of show
8. Sound level requested (dBA/Decibels): 80-120 depending on moments in time
9. Mailing address w/zip code: 4120 Minnehaha Avenue, Minneapolis, 55406
10. Briefly describe the noise source and equipment involved: Spoken word, background fill, live rock and roll
11. Describe the steps that will be taken to minimize the noise levels: _____
All noise will be below talking levels except when performances are happening
12. State reason for seeking variance (example - music, announcements, construction, etc.): _____
audio levels will be higher during event than a non event day. we want to make sure the neighbors know we are approved
13. Maximum number of attendees: 2000
14. Describe steps that will be taken to prevent COVID-19 virus spread: Our COVID plan keeps changing as CDC
recommendations change. currently social distancing, masks when in close proximity in covered spaces and sanitizer
15. 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). **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: *Erik Arveseth*

Date: 08/04/21

Como Regional Park

T-SHIRTS

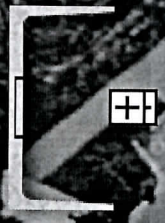
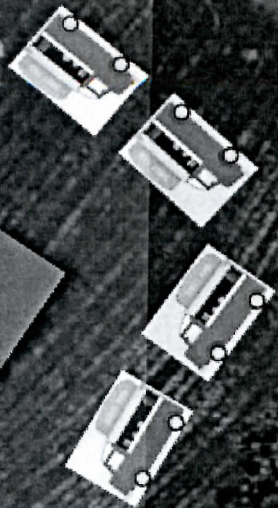
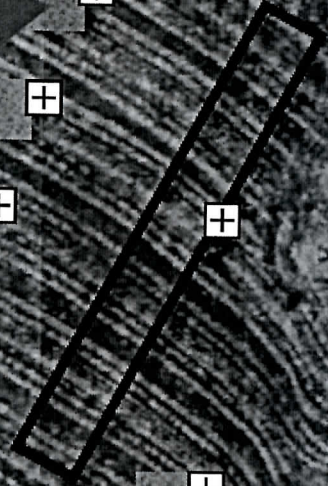
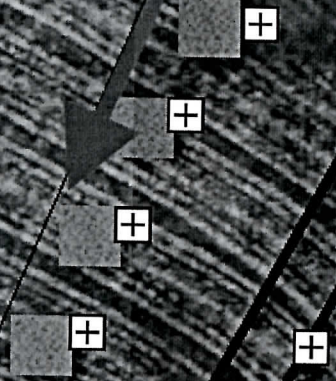
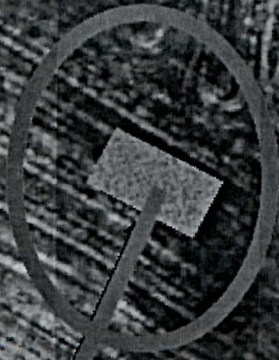
REGISTRATION
1189 Midway Pkwy

01

09

TITLE DROP OFF

Como Ave





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: 08/09/2021

Received From: AMERICAN FOUNDATION FOR SUICIDE PREVENT
4120 MINNEHAHA.AVE MINNEAPOLIS MN 55406

Description:

Invoice Details	Invoice Amount	Amount Paid
1110751 Noise Variance	\$175.00	\$175.00
TOTAL AMOUNT PAID:		\$175.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card		08/09/2021	\$175.00