

AUG 22 2014



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 of the Saint Paul Legislative Code

Note: A public hearing before the Saint Paul City Council is required. Application and fee must be received no fewer than thirty (30) days prior to the public hearing date that is nearest the variance start date. Public hearings are only held on the first and third Wednesday of each month. Variance start dates must be after the public hearing date.

1. Organization/person seeking variance: The ALS Association - MN/ND/SD Chapter
2. Mailing Address w/zip code: 333 Washngeton Ave N., Suite 105, MPLS, MN 55401
3. Responsible person: Chris Hinnenkamp
4. Title or position: Special Events Coordinator
5. Telephone: (612) 672 0484 E-Mail: chris@alsmn.org
6. Briefly describe the noise source and equipment involved: A couple of small speakers to play music and make announcements to Runners.
7. Address or legal description of noise source: 1600 Phalen Dr.
Saint Paul, MN 55106
8. Noise source time of operation: 9:00 AM - 1:00 PM
9. Date(s) during which the variance is requested: October 11, 2014
10. Describe the steps that will be taken to minimize the noise levels: Volume levels will be monitored and adjusted. Speakers will be pointed toward the pavillion and away from lake to minimize sound travel.
11. Briefly state reason for seeking variance: We would like to respect the neighbors around Lake Phalen and surrounding community
12. 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.
13. 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

Signature of responsible person: Chris Hump Date: 08/19/14

6/18/14



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: 08/26/2014

Received From: THE ALS ASSN MN ND SD CHAPTER
333 WASHINGTON AVE N STE 105 MINNEAPOLIS MN 55401

Description:

Invoice Details

902292

Noise Variance

Invoice Amount

\$164.00

Amount Paid

\$164.00

TOTAL AMOUNT PAID:

\$164.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	16849	08/26/2014	\$164.00