



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.

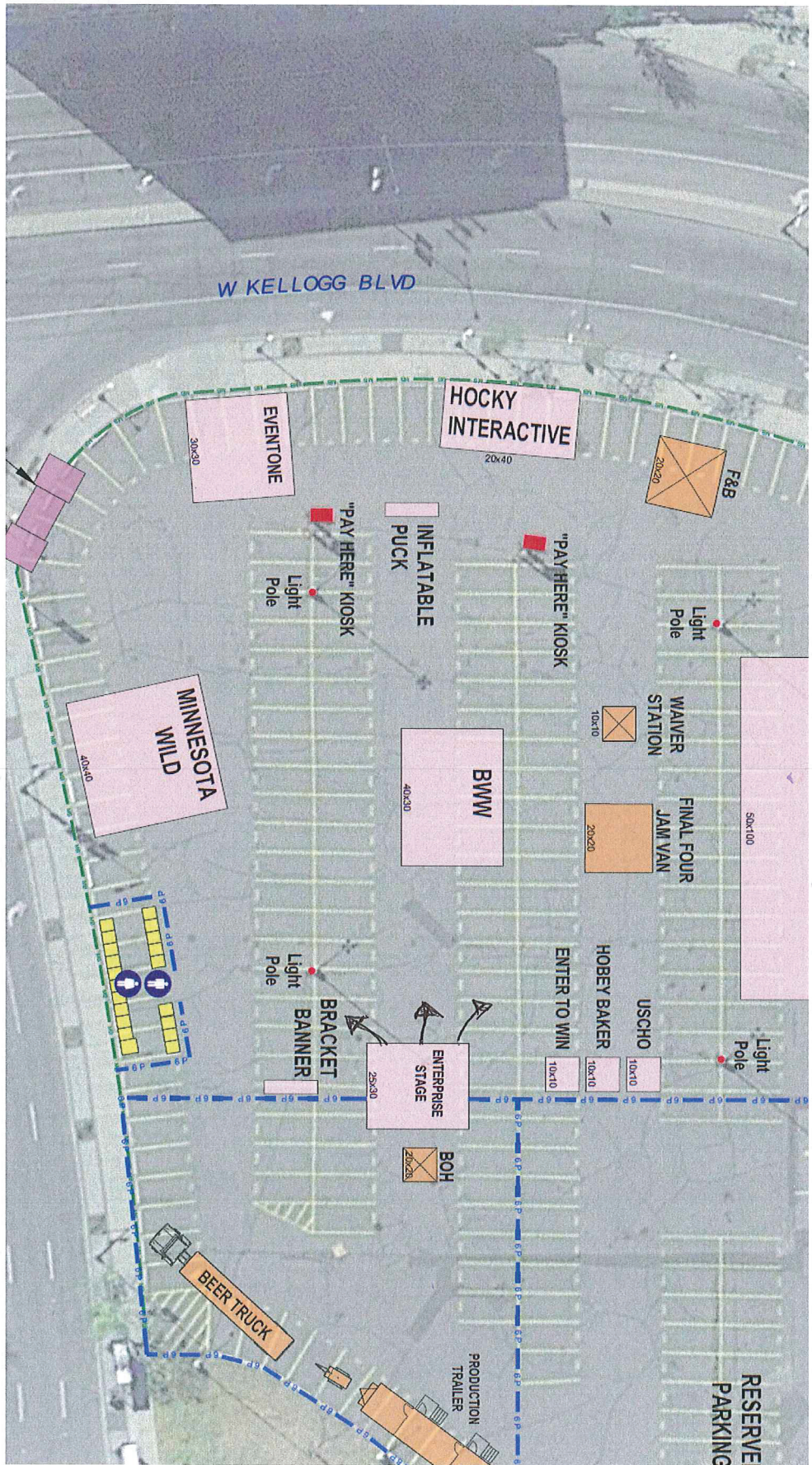
1. Organization/person seeking variance: VISIT SAINT PAUL
2. Mailing Address w/zip code: 175 KELLOGG BLVD WEST SAINT PAUL MN 55102
3. Responsible person: Adam Johnson Title: VP Marketing
4. Event Name: NCAA FROZEN FOUR FAN FEST
5. Telephone: 651.265-4904 E-Mail: AJohnson@VISITSAINTPAUL.COM
6. Date(s) during which the variance is requested: April 5 and 7
7. Noise source - Time(s) of operation: April 5 - 2:30 - 8:30 and April 7 - 3 - 7pm
- Time(s) of pre-event sound check: April 5 2pm and April 7 2:30
8. Address or legal description of Noise source: Enterprise stage in 7 corners parking lot (see diagram)
9. Sound level requested: 90 DB at 50 ft
10. Briefly describe the noise source and equipment involved: Basic sound system for medium outdoor concert, announcements, etc
11. Describe the steps that will be taken to minimize the noise levels: Decibal reader will be on hand for use during musical acts
12. State reason for seeking variance (E.g. music, announcements, construction, etc.): Music for fanfest
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: _____

Date: _____

2/28/18





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: 03/02/2018

Received From: VISIT SAINT PAUL
175 KELLOGG BLVD W STE 502 ST PAUL MN 55102

Description:

Invoice Details

1018678

Noise Variance

Invoice Amount

\$172.00

Amount Paid

\$172.00

TOTAL AMOUNT PAID:

\$172.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	VISA- 8061	03/02/2018	\$172.00