Received



CITY OF SAINT PAUL

MAY 0 5 2025

Business Licensing 375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806 Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: <u>www.stpaul.gov/dsi</u>

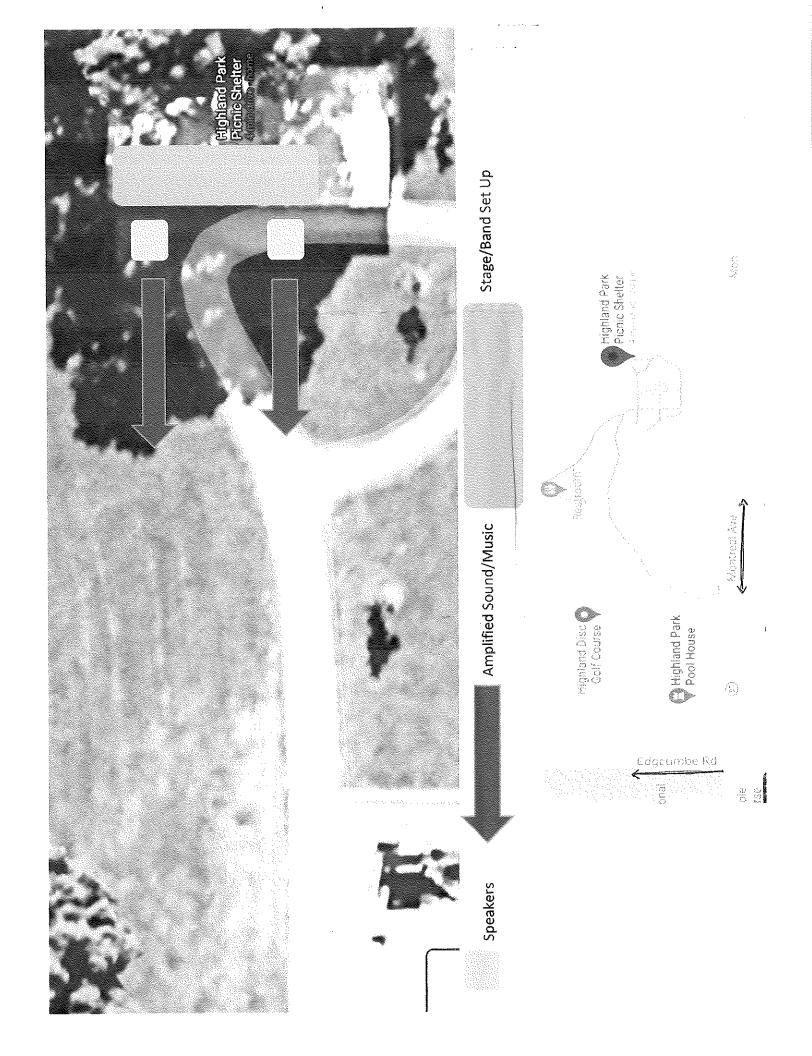
City of Saint Paul - D81

Sound Level Variance Application

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 fee payment should be submitted a minimum of sixty (60) days prior to the scheduled event start date. A public notification period is required prior to scheduling the application's Public Hearing before the Saint Paul City Council. Applications received fewer than sixty (60) days prior to the event may not satisfy the ordinance's processing timelines for placement on the Council's agenda.

	Organization/person seeking variance: Laura K. Letebree				
1.	Organization/person seeking variance:				
2.	Event Name: HIGHLAND PARK HARMONGS				
3.	Address and physical description of noise source location (Event, Worksite): Highland Park PKNK				
	1221 Montreal An. St. PAUL SSIIB				
4.	Responsible person: Laura K LeFebre Title: Grent Coordinator				
5.	Telephone: 49-389-2220 E-Mail: aura Kulk@gmail.com				
6.	Date(s) variance requested: Saturday OCTASER 249 W25				
7.	Noise source - Time(s) of operation: $\frac{12.00 - 6.00pm}{12.00}$				
	- Time(s) of pre-event sound check: <u>10:00 AM</u>				
8.	Sound level requested (dBA/Decibels): 90 100 depubels				
9.	Mailing address w/zip code: 1337 Bayard Ave. OTEB STPAUL, MN 55/16				
10.	Briefly describe the noise source and equipment involved: band instruments, vocals				
	peolers, microphones, sound board (I PAD)				
11.	Describe the steps that will be taken to minimize the noise levels: hired a professional				
12.	State reason for seeking variance (example - music, announcements, construction, etc.): New Yorkord mulicular went y Bands				
	A <u>site diagram & map</u> must be attached showing location of noise source(s), streets, stages, tents, etc. (If				
the	re will be amplified sound, indicate location and direction that all speakers will be facing).				
	Multiple locations may require more than one application.				
14.	Submit completed application, site diagram/map, and \$175.00 fee to:				
	CITY OF CAINT BALL				
	CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND INSPECTIONS				
	375 JACKSON STREET, SUITE 220				
	SAINT PAUL, MN 55101-1806				
Sig	nature of responsible person: Livin X. Livin Date: 4130125				





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: 05/13/2025

Received From: LAURA LEFEBVRE dba: CREATIVE CONNECTIONS

1338 BAYARD AVE STE B ST PAUL MN 55116

Description:

Invoice Details

Invoice Amount

Amount Paid

1178578

Noise Variance

\$178.00

\$178.00

TOTAL AMOUNT PAID:

\$178.00

Paid By:

Payment Type	Check #	Received Date	Amount
Check	134	05/13/2025	\$3.00
Check	132	05/13/2025	\$175.00